

STUDENT RIGHTS AND RESPONSIBILITIES  
INVESTIGATIONS AND SEARCHES

FNF  
(EXHIBIT)

The following exhibits are used by the District:

- Exhibit A: Parental Acknowledgment of Reasonable Suspicion Drug-Testing Policy —  
2 pages
- Exhibit B: Student Acknowledgment Form — 1 page
- Exhibit C: Reasonable Suspicion Observation Form (Confidential) — 2 pages
- Exhibit D: Signs of Student Substance Abuse (Confidential) — 2 pages



EXHIBIT A

BORGER INDEPENDENT SCHOOL DISTRICT  
PARENTAL ACKNOWLEDGMENT OF  
REASONABLE SUSPICION DRUG-TESTING POLICY

I, \_\_\_\_\_ as parent or guardian of \_\_\_\_\_,  
a student enrolled in Borger Independent School District hereby acknowledge the following:

I have received a copy of the District's reasonable suspicion drug-testing policy. I understand the District's policy regarding substance abuse. I understand that it is the practice of the District to conduct drug and alcohol tests for the purposes of carrying out this policy.

I understand that my child cannot be compelled to give a biological specimen. Under this policy, a "biological sample" will mean a urine sample or, in the case of reasonable suspicion of alcohol use, a breath sample. I understand that if he or she gives a biological specimen, it will be tested for drugs and/or alcohol. I understand that the giving of biological specimen, when requested by the District, is a condition of my child's being in good standing. I understand that if a test of my child's specimen reveals an unexplained presence of a drug and/or alcohol, the District will implement the steps associated with the drug-testing policy and Student Code of Conduct. More specifically, I understand that reasonable suspicion testing will be carried out in the following steps:

1. Any school employee who has reasonable suspicion, based on personal observation, that a student has used or is under the influence of (a) alcohol or (b) a controlled substance or dangerous drug, as said terms are more specifically defined in the Student Code of Conduct, while at school or a school-related activity, will complete a referral form and discuss his or her suspicions with the campus principal, or, in the principal's absence, the principal's designee.
2. The campus principal or designee will review the evidence supporting the reasonable suspicion referral and will decide if it is sufficient to proceed. If so, the principal or designee will observe and/or question the student and then decide if he or she agrees with the initial assessment. If so, the principal or designee will proceed with the referral.
3. If the principal or designee decides that a drug-use test is warranted, he or she will contact the student's parent or guardian and take the student to the school nurse where the student will be asked to produce a breath and/or urine sample for testing.
4. If the student or parent/guardian refuses the test, the principal or designee will consider the refusal to be the same as a positive test and will proceed in accordance with local policy.
5. If a student produces a breath and/or urine sample for testing, the principal or designee may, based on the evidence and circumstances, return the student to class, assign the student to in-school suspension or the disciplinary alternative education program pending the results of the drug-use test and appeal procedures as set forth in this policy, or send the student home under the terms of an emergency removal, as described in the Student Code of Conduct.

STUDENT RIGHTS AND RESPONSIBILITIES  
INVESTIGATIONS AND SEARCHES

FNF  
(EXHIBIT)

Prescription drugs currently being taken as prescribed:

---

---

Comments:

---

---

At this time, I hereby acknowledge that I have read the terms and provisions of the District's reasonable suspicion drug-testing program and the above acknowledgment form.

Parent/Guardian signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

Witness \_\_\_\_\_

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

Social Security Number \_\_\_\_\_

Student I.D. Number \_\_\_\_\_

Please return to the principal's office by \_\_\_\_\_. You may return this form by sending it with your student to class, where the forms will be collected and forwarded to the principal's office. However, if you have provided any information above that you would like to remain confidential, you should return the form by mail to the principal's office at one of the following addresses: BISD Drug-Testing Policy, c/o Borger High School, Attn: BHS Principal, 600 W. 1st, Borger, TX 79007; or BISD Drug-Testing Policy, c/o Borger Middle School, 1321 S. Florida St., Borger, TX 79007.

EXHIBIT B

BORGER INDEPENDENT SCHOOL DISTRICT  
STUDENT ACKNOWLEDGMENT FORM

Please sign, date, and return this form, along with a signed parental consent form, by  
\_\_\_\_\_.

I have received and read a copy of the District's reasonable suspicion drug-testing policy. I understand that this policy is part of the District's rules, and that it applies to all secondary District students.

Print Name \_\_\_\_\_

Social Security Number \_\_\_\_\_

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Witness Signature \_\_\_\_\_ Date \_\_\_\_\_



STUDENT RIGHTS AND RESPONSIBILITIES  
INVESTIGATIONS AND SEARCHES

FNF  
(EXHIBIT)

EXHIBIT C

BORGER INDEPENDENT SCHOOL DISTRICT  
REASONABLE SUSPICION OBSERVATION FORM  
(CONFIDENTIAL)

A. NATURE OF THE INCIDENT/CAUSE FOR SUSPICION

1. Apparent drug or alcohol intoxication
  2. Observed abnormal or erratic behavior
  3. Evidence of tampering on drug test
  4. Other (e.g., flagrant violation of school regulations, serious misconduct, fighting or argumentative/abusive language, refusal of instruction, unauthorized absence), please specify \_\_\_\_\_
- 

B. UNUSUAL BEHAVIOR

- Extreme mood or personality change
  - Verbal abusiveness
  - Physical abusiveness
  - Withdrawal, depression, or unresponsiveness
  - Inappropriate verbal response to questioning or instructions
  - Other erratic or inappropriate behavior (e.g., hallucinations, disorientation, excessive euphoria, confusion), please specify \_\_\_\_\_
- 

C. PHYSICAL SIGNS OR SYMPTOMS

- Possession, dispensing, or using controlled substance
- Slurred or incoherent speech
- Unsteady gait or other loss of physical control; poor coordination
- Dilated or constricted pupils or unusual eye movement
- Bloodshot or watery eyes
- Extreme fatigue or sleeping in class
- Excessive sweating or clamminess of the skin
- Flushed or very pale face

STUDENT RIGHTS AND RESPONSIBILITIES  
INVESTIGATIONS AND SEARCHES

FNF  
(EXHIBIT)

- Highly excited or nervous
- Nausea or vomiting
- Odor of alcohol
- Odor of marijuana
- Dry mouth (frequent swallowing/lip wetting)



STUDENT RIGHTS AND RESPONSIBILITIES  
INVESTIGATIONS AND SEARCHES

FNF  
(EXHIBIT)

EXHIBIT D

BORGER INDEPENDENT SCHOOL DISTRICT  
SIGNS OF STUDENT SUBSTANCE ABUSE  
(CONFIDENTIAL)

Student \_\_\_\_\_

Staff Member \_\_\_\_\_ Date \_\_\_\_\_

<b>BEHAVIOR</b>	<b>YES</b>	<b>NO</b>	<b>MAYBE</b>
1. Does the student go through frequent or extreme mood swings?			
2. Have you noticed a change in the student's friends?			
3. Has the student lied or do you suspect lying?			
4. Has the student been involved in acts of vandalism?			
5. Does the student use obscene language or gestures?			
6. Does the student seem withdrawn from other youngsters?			
7. Have there been sudden or explosive bursts of anger?			
8. Does the student suffer from memory loss or disorientation?			
9. Has the student dropped out of favorite activities or sports?			
10. Has the student been charged with an auto accident or drunk driving?			
11. Has the student been involved with court/legal matters?			
12. Is there drug-oriented graffiti on schoolbooks or clothing?			
13. Are you afraid of the student?			
14. Does the student have a history of discipline or behavior problems?			
<b>APPEARANCE— HEALTH</b>	<b>YES</b>	<b>NO</b>	<b>MAYBE</b>
1. Does the student neglect personal appearance/hygiene?			
2. Have you noticed bruises on the skin?			
3. Is the student's coloring pale, flushed, or blotchy?			
4. Have you noticed a constant or persistent cough?			

STUDENT RIGHTS AND RESPONSIBILITIES  
INVESTIGATIONS AND SEARCHES

FNF  
(EXHIBIT)

5. Have you seen the student with dilated pupils or red or watery eyes?			
6. Has the student lost weight?			
7. Does the student appear hyperactive or nervous?			
8. Have you ever detected the odor of pot or alcohol on the student?			
9. Have you seen the student staggering, stumbling, or dis-oriented without the odor of pot or alcohol on his or her breath?			
<b>FAMILY</b>	<b>YES</b>	<b>NO</b>	<b>MAYBE</b>
1. Has there been verbal abuse within the family?			
2. Is there a history of chemical abuse in the family?			
3. Has there been physical abuse within the family?			
<b>ACADEMIC</b>	<b>YES</b>	<b>NO</b>	<b>MAYBE</b>
1. Has the student been?			
a. Sleeping in class?			
b. Skipping class?			
c. Cheating on tests, etc.?			
d. Disrupting class?			
2. Does the student want to quit school?			
3. Has the student received warnings or failing grades?			
4. Has the student been in trouble at school this year?			
5. Are teachers expressing fear of the student?			
6. Do you see the student's behavior getting worse or better?			
7. Is there a change in level of motivation, goals, or attitudes toward achievement?			