## ALCOHOL AND DRUG POLICY SUPPLEMENT

THIS SUPPLEMENT MUST ACCOMPANY STANDARD APPLICATION FORM

AVIASCO, Inc. desires by policy and is required by law to provide a safe and healthful work environment for its employees.

To ensure the safety of our employees and the public and to protect our assets, the company prohibits using, possessing or being under the influence of drugs or alcohol on company property or while on the job regardless of where the work is being performed. Further, such activity will not be tolerated while off duty where it adversely affects the company or its employees. In keeping with this policy, all offers of employment are contingent upon applicants taking and passing pre-employment drug tests. Employees that are hired to perform a safety-sensitive function as defined under Appendix I FAR Part 121, are subject to submit to a federal pre-employment drug test to determine the presence of PCP, Cocaine, Amphetamines, Cannabinoids and Opiates. After a conditional offer of employment is made, an individual may be administered a medical examination that tests for current use of alcohol.

## APPLICANT'S STATEMENT

By my signature below, I attest to the following:

Witness

| 1. | I have read the above statements and understand the requirements contained therein. |
|----|---|
|    |   |
| 2  | Lagran to take the above reference test(s)  |

| Applicant's Name        |                                   |                  |
|-------------------------|-----------------------------------|------------------|
| Applicant 3 Name        |                                   |                  |
|                         |                                   |                  |
| Applicant's Signature   | Date                              |                  |
| THIS SECTION TO BE COMP | LETED ONLY IN PRESENCE OF AVIASCO | O REPRESENTATIVE |
|                         |                                   |                  |

Date