

[To be returned to the National Hiring Center]

NOTIFICATION TO APPLICANT

Please read the information below. Sign, date, and return the form using the enclosed envelope.

I am an applicant for a position as a Border Patrol Agent with the Immigration and Naturalization Service (INS). I have read and fully understand the information in the attached notice with regard to the requirement that I satisfactorily pass a test for the illegal use of drugs and controlled substances. I further understand that my failure to comply with the drug testing requirement will result in the withdrawal of my application for employment consideration. In addition, I may be ineligible for consideration for employment with the INS for a minimum period of six months. I understand the consequences of a positive test result or an attempt to alter or substitute a specimen. I voluntarily consent to be tested for the illegal use of drugs or controlled substances.

Signature _____ Date _____

Daytime Telephone Number _____

Print Name _____

SSN _____