

National Drug & Alcohol Screening Association

Annual Accreditation Renewal Statement

Designated Employer Representative (DER)

The Designated Employer Representative (DER) Accreditation packet is valid for five (5) years from the date of approval and must be **fully resubmitted every 5 years**.

An annual review is required each consecutive year to maintain accreditation compliance. An updated Certificate of Accreditation will be awarded upon successful completion of the review. If the information remains the same as when it was submitted with the original application, the applicant will only be required to attest that no changes have been made.

Applicants are subject to an internal compliance audit by a qualified individual on the Review Board with potential of revocation for egregious violations/non-compliance.

If you have questions about accreditation renewal or changes to your information, please contact info@ndasa.com.

Annual Renewal Statement

| I,, hereby | ertify on behalf of | |
|------------------------------------|--|--|
| there have been no changes to the | formation contained in my original DER | |
| Accreditation application submitte | o the NDASA Accreditation Committee on | |
| Original date of application | | |
| | | |
| | Signature | |
| | | |
| | Title | |
| | | |

Date