POTOMAC CONFERENCE CORPORATION
Human Resources
606 Greenville Avenue, Staunton, VA 24401
Office (540) 886-0771 | Fax (540) 904-0722
http://www.pcsda.org

TB TEST RESULTS

Dear Medical Professional:

Potomac Conference Corporation employees who work in educational institutions are required to have a tuberculosis test showing that they are free from communicable tuberculosis. According to policy, this must be done at the hire date and every four years thereafter as long as the individual remains in employment.

Please provide us with the following information for the bearer of this note:

- The **name of the test** that was completed.
- The **date** the test was completed.
- The **results** of the test.

Thank you for your cooperation.

Sincerely,

Keith C. Hallam
VP for Education

This section to be completed by employee.

TB Test - Employee Release

I authorize the medical personnel at this facility to provide the results of my TB test as required by the Potomac Conference Corporation of Seventh-day Adventists. I understand that the resulting information will be kept on file with the HR and Education departments only and will be treated with appropriate confidentiality.

I further state that **I HAVE CAREFULLY READ THE FOREGOING RELEASE AND KNOW THE CONTENTS THEREOF AND I SIGN THIS RELEASE AS MY OWN FREE ACT**.

_____

Employee Name Employee Signature Date

This section to be completed by authorized medical professional.

_____

Name of TB test TB Test Date

TB Test Results: _____

_____

Name of Medical Professional Signature Date