



Drug and Alcohol Abuse Prevention Program

Revised 7/1/25

Campus Location: Aviation Institute of Maintenance
7421 East Independence Blvd., Charlotte, NC 28227
980-785-0700

The Drug Free Schools and Campus Regulations (EDGAR Part 86.100, Subpart B) require that, as a condition of receiving funds or any other form of financial assistance under any federal program, an institution of higher education must certify that it has adopted and implemented a program designed to prevent the unlawful possession, use, or distribution of illicit drugs and alcohol by students and employees, both on the institution's premise and as part of its activities. This Drug and Alcohol Abuse Prevention Program (DAAPP) policy was developed to inform the Institute, students, and employees of the seriousness of the use and abuse of illicit drugs and alcohol and to set forth the standards of conduct regarding such activity.

Aviation Institute of Maintenance supports the Drug-Free Schools and Campuses Regulations and is committed to providing a safe, healthy educational and work environment for all students and employees.

(1) Distribution of Annual Notification

The EDGAR Part 86 requires that schools annually distribute alcohol and drug policy notification in writing to students and employees. On or before October 1 of each year, an email is sent to all employees and students which contains a direct link to a PDF version of this policy. All new students who enroll after the distribution date will receive a copy of this policy during mandatory orientation prior to starting classes. New employees hired after the annual distribution date will receive a copy as part of the new employee materials. Additionally, a copy of the PDF is posted to the school's consumer information website for continuous reference.

Through the annual distribution of this policy, the school certifies that they have implemented a drug and alcohol prevention program in accordance with the Drug-Free Schools and Communities Act (DFSCA), as articulated in the Education Department General Administrative Regulations (EDGAR) Part 86, known as the Drug-Free Schools and Campuses Regulations pertaining to Drug and Alcohol Abuse Prevention.

A. Standards of Conduct

The unlawful possession, use, or distribution of illicit drugs and alcohol on Institute property or at any school sponsored activity by all students, staff, and faculty is strictly prohibited, even by individuals who are otherwise of legal age to do so. This includes the campus buildings, campus grounds, and parking areas, or while participating in off-site school/work-related activities such as but not limited to field trips, graduation ceremonies, school-sanctioned community service activities, or professional meetings attended by employees on behalf of the school.

These standards of conduct apply to all students who are registered at the Institution for at least one course as well as all full time and part time staff and faculty.

The Institution reserves the right to take whatever measures it deems necessary in response to an allegation of alcohol or other drug use in order to protect employees and students and the personal safety of the entire Institute's community. A student or employee who violates the drug and alcohol policy, including underaged drinking, is subject to both the campus policies and to criminal sanctions provided by federal, state, and local law. All instances of illegal drug use or underage drinking will be referred to the local authorities. Additionally, the school will impose disciplinary sanctions as defined in the Student Code of Conduct or the Employee Handbook for failure to abide by the standards of conduct.

B. Legal Sanctions

A student or employee who violates the drug and alcohol policy is subject to both the Institute's policies and to criminal sanctions provided by federal, state, and local law. The following are a summary of the applicable legal sanctions.

FEDERAL PENALTIES FOR TRAFFICKING AND POSSESSION OF A CONTROLLED SUBSTANCE

DRUG/SCHEDULE	QUANTITY	PENALTIES	QUANTITY	PENALTIES
Cocaine (Schedule II)	500–4999 grams mixture	First Offense: Not less than 5 yrs, and not more than 40 yrs. If death or serious injury, not less than 20 or more than life. Fine of not more than \$5 million if an individual, \$25 million if not an individual.	5 kgs or more mixture	First Offense: Not less than 10 yrs, and not more than life. If death or serious injury, not less than 20 or more than life. Fine of not more than \$10 million if an individual, \$50 million if not an individual.
Cocaine Base (Schedule II)	28–279 grams mixture		280 grams or more mixture	
Fentanyl (Schedule II)	40–399 grams mixture		400 grams or more mixture	
Fentanyl Analogue (Schedule I)	10–99 grams mixture		100 grams or more mixture	
Heroin (Schedule I)	100–999 grams mixture		1 kg or more mixture	
LSD (Schedule I)	1–9 grams mixture		10 grams or more mixture	
Methamphetamine (Schedule II)	5–49 grams pure or 50–499 grams mixture		50 grams or more pure or 500 grams or more mixture	
PCP (Schedule II)	10–99 grams pure or 100–999 grams mixture	Second Offense: Not less than 10 yrs, and not more than life. If death or serious injury, life imprisonment. Fine of not more than \$8 million if an individual, \$50 million if not an individual.	100 gm or more pure or 1 kg or more mixture	2 or More Prior Offenses: Not less than 25 years. Fine of not more than \$20 million if an individual, \$75 million if not an individual.

PENALTIES			
Other Schedule I & II drugs (and any drug product containing Gamma Hydroxybutyric Acid)	Any amount	First Offense: Not more than 20 yrs. If death or serious injury, not less than 20 yrs, or more than life. Fine \$1 million if an individual, \$5 million if not an individual. Second Offense: Not more than 30 yrs. If death or serious bodily injury, life imprisonment. Fine \$2 million if an individual, \$10 million if not an individual.	
Flunitrazepam (Schedule IV)			
Other Schedule III drugs	Any amount	First Offense: Not more than 10 years. If death or serious injury, not more than 15 yrs. Fine not more than \$500,000 if an individual, \$2.5 million if not an individual. Second Offense: Not more than 20 yrs. If death or serious injury, not more than 30 yrs. Fine not more than \$1 million if an individual, \$5 million if not an individual.	
All other Schedule IV drugs		First Offense: Not more than 5 yrs. Fine not more than \$250,000 if an individual, \$1 million if not an individual. Second Offense: Not more than 10 yrs. Fine not more than \$500,000 if an individual, \$2 million if other than an individual.	
All Schedule V drugs	Any amount	First Offense: Not more than 1 yr. Fine not more than \$100,000 if an individual, \$250,000 if not an individual. Second Offense: Not more than 4 yrs. Fine not more than \$200,000 if an individual, \$500,000 if not an individual.	

FEDERAL TRAFFICKING PENALTIES—MARIJUANA

DRUG	QUANTITY	1st OFFENSE	2nd OFFENSE *
Marijuana (Schedule I)	1,000 kg or more marijuana mixture; or 1,000 or more marijuana plants	Not less than 10 yrs. or more than life. If death or serious bodily injury, not less than 20 yrs., or more than life. Fine not more than \$10 million if an individual, \$50 million if other than an individual.	Not less than 15 yrs. or more than life. If death or serious bodily injury, life imprisonment. Fine not more than \$20 million if an individual, \$75 million if other than an individual.
	100 kg to 999 kg marijuana mixture; or 100 to 999 marijuana plants	Not less than 5 yrs. or more than 40 yrs. If death or serious bodily injury, not less than 20 yrs. or more than life. Fine not more than \$5 million if an individual, \$25 million if other than an individual.	Not less than 10 yrs. or more than life. If death or serious bodily injury, life imprisonment. Fine not more than \$20 million if an individual, \$75 million if other than an individual.
	More than 10 kgs hashish; 50 to 99 kg marijuana mixture More than 1 kg of hashish oil; 50 to 99 marijuana plants	Not more than 20 yrs. If death or serious bodily injury, not less than 20 yrs. or more than life. Fine \$1 million if an individual, \$5 million if other than an individual.	Not more than 30 yrs. If death or serious bodily injury, life imprisonment. Fine \$2 million if an individual, \$10 million if other than an individual.
	Less than 50 kilograms marijuana (but does not include 50 or more marijuana plants regard-less of weight) 1 to 49 marijuana plants;	Not more than 5 yrs. Fine not more than \$250,000, \$1 million if other than an individual.	Not more than 10 yrs. Fine \$500,000 if an individual, \$2 million if other than individual.
Hashish (Schedule I)	10 kg or less	Not more than 5 yrs. Fine not more than \$250,000, \$1 million if other than an individual	Not more than 10 yrs. Fine \$500,000 if an individual, \$2 million if other than individual
	1 kg or less	Not more than 5 yrs. Fine not more than \$250,000, \$1 million if other than an individual.	Not more than 10 yrs. Fine \$500,000 if an individual, \$2 million if other than individual

* The minimum sentence for a violation after two or more prior convictions for a felony drug offense have become final is not less than 25 years imprisonment and a fine up to \$20 million if an individual and \$75 million if other than an individual.

Federal Law, Alcohol

Alcohol is not considered a controlled substance under the USE Code and is not subject to the same federal regulations as other drugs. The Federal Uniform Drinking Age Act of 1984 sets the minimum legal drinking age to 21. Individual states control the regulations and penalties relating to the possession and distribution of alcohol.

North Carolina State Law, Controlled Substance

The Institute complies with all federal, state, and local laws. A summary of the relevant sections of the Code of North Carolina are provided in this policy. Full details of the Code of North Carolina, Chapter 90 North Carolina Controlled Substances Act can be found at [Chapter 90 - Article 5 \(ncleg.gov\)](http://www.ncleg.gov)

The North Carolina Controlled Substance Act places controlled substances into categories called Schedules. In North Carolina, the consequences for violating the controlled substance laws vary in severity depending on several factors:

- Whether an offense relates to manufacturing, possession, or sale/delivery.
- The amount of drug involved, and
- The type of drug.

Schedule	Description	Penalties for manufacture, sell, or deliver, or possess with intent to manufacture, sell, or deliver	Penalties for Possession
I	High potential for abuse and no accepted medical use. Includes opiates, fentanyl derivatives, opium derivatives, hallucinogenic substances, systemic depressants, stimulants, NBOMe compounds, synthetic cannabinoids, substituted phenethylamines, and N-Benzyl phenethylamines	Class H felon (i) Class G felony (sale of a controlled substance) (1a) Class C felony (manufacture of methamphetamine)	Class I felony- Maximum Penalty: Five (5) years in prison and/or fine
II	High potential for abuse and severe dependence but have a currently accepted medical use. Includes raw opium, opium extracts, codeine, cocaine, fentanyl, and methamphetamine		Class I felony- Maximum Penalty: Five (5) years in prison and/or fine
III	Have less potential for abuse than Schedule II drugs, a potential for moderate or low dependency and an accepted medical use. Anabolic steroids and buprenorphine fall into this	Class I felon Class H felon (sale of controlled substance)	Class 1 misdemeanor Maximum Penalty: Possession of less than 100 tablets, capsules, other dosage units or equivalent quantity: Two (2) years in prison and/or fine

	category		
IV	Low potential for abuse than Schedule III drugs, a limited potential for dependency, and are accepted in medical treatment. Schedule IV drugs include depressants, benzodiazepines, stimulants, and narcotic drugs	Class I felon Class H felon (sale of controlled substance)	Class 1 misdemeanor Maximum Penalty: Two (2) years in prison and/or fine
V	Low potential for abuse relative to Schedule IV drugs, accepted medical use, limited physical or psychological dependency. Schedule V drugs may be sold at retail without a prescription. Includes stimulants and anticonvulsants	Class I felon Class H felon (sale of controlled substance)	Class 2 misdemeanor Maximum Penalty: Six (6) months in prison and/or fine
VII	Have accepted medical use, low potential for abuse, and low potential to produce dependence. Schedule VI drugs include marijuana	Class I felon Class H felon (sale of a controlled substance)	Class 3 misdemeanor- less than ½ ounce of marijuana or 1/20 hashish Maximum Penalty: 30 days in prison, \$100 fine Class 1 misdemeanor- quantity exceeds 1/2 ounce of marijuana or 1/20 ounce of hashish Maximum Penalty: 2 years in prison, fine Class I felony- quantity exceeds 1 ½ ounce of marijuana or 3/20 of an ounce of hashish or any quantity of synthetic tetrahydrocannabinols or tetrahydrocannabinols isolated from hashish Maximum Penalty: 5 years in prison and/or fine

Offense	Penalty	Incarceration	Max. Fine
Trafficking in Marijuana § G.S-90-95(h)(1)			
In excess of 10 pounds, but less than 50 pounds	Class H felon	Minimum term of 25 months and maximum term of 39 months	Not less than \$5000
50 pounds or more, but less than 2000 pounds	Class G felon	Minimum of 35 months and maximum of 51 months	Not less than \$25,000
2000 pounds or more, but less than 10,000 pounds	Class F felon	Minimum of 70 months and maximum of 93 months	Not less than \$50,000
10,000 pounds or more	Class D felon	Minimum of 175 months and maximum of 222 months	Not less than \$200,000
Trafficking in Synthetic cannabinoid -dosage units consist of 3 grams of synthetic cannabinoid§ G.S-90-95(h)(1a)			
In excess of 50 dosage units but less than 250 dosage units	Class H felon	Minimum of 25 months maximum of 39 months	Not less than \$5000
250 dosage units but less than 1250 dosage units	Class G felon	Minimum of 35 months maximum of 51 months	Not less than \$25,000
1250 but less than 3750	Class F felon	Minimum of 70 months and maximum of 93 months	Not less than \$50,000
3750 dosage units or more	Class D felon	175 months maximum of 222 months	Not less than \$200,000
Trafficking in Methaqualone- dosage unit consists of 1,000 tablets, capsules or other dosage units § G.S-90-95(h)(2)			
1000 tablets or more dosage units but less than 5000	Class G felon	Minimum of 35 months maximum of 51 months	Not less than \$25,000

5000 or more dosage units but less than 10,000	Class F felon	Minimum of 70 months maximum of 93 months	Not less than \$50,000
10,000 units or more	Class D felon	Minimum of 175 months maximum of 222 months	Not less than \$200,000
Trafficking in Cocaine-§ G.S-90-95(h)(3)			
28 grams or more, but less than 200 grams	Class G felon	Minimum of 35 months maximum of 51 months	Not less than \$50,000
200 grams or more, but less than 400 grams	Class F felon	Minimum of 70 months maximum of 93 months	Not less than \$100,000
400 grams or more	Class D felon	Minimum of 175 months maximum of 222 months	Not less than \$250,000
Trafficking in Methamphetamine§ G.S-90-95(h)(3b)			
28 grams or more, but less than 200 grams	Class F felon	Minimum of 70 months maximum of 93 months	Not less than \$50,000
200 grams or more, but less than 400 grams	Class E felon	Minimum of 90 months maximum of 120 months	Not less than \$100,000
400 grams or more	Class C felon	Minimum of 225 months maximum of 282 months	Not less than \$250,000
Trafficking in Amphetamine§ G.S-90-95(h)(3c)			
28 grams or more, but less than 200 grams	Class H felon	Minimum of 25 months maximum of 39 months	Not less than \$5000
200 grams or more, but less than 400 grams	Class G felon	Minimum of 35 months maximum of 51 months	Not less than \$25,000
400 grams or more	Class E felon	Minimum of 90 months maximum of 120 months	Not less than \$100,000
Trafficking in Opium, opiate, or opioid, including heroin§ G.S-90-95(h)(4)			
Four grams of more, but less than 14 grams	Class F felon	Minimum of 70 months maximum of 93 months	Not less than \$50,000
14 grams or more, but less than 28 grams	Class E felon	Minimum of 90 months maximum of 120 months	Not less than \$100,000
28 grams or more	Class C felon	Minimum of 225 months maximum of 282 months	Not less than \$500,000

North Carolina State Law, Alcohol

The term alcoholic beverage is defined in the Code of North Carolina **§ 18B-101** as a beverage containing at least one-half of one percent (0.5%) alcohol by volume, including malt beverages, unfortified wine, fortified wine, spirituous liquor, mixed beverages, and any alcohol consumable. In North Carolina, it is illegal to drive a motor vehicle while noticeably impaired or with an alcohol concentration of 0.08 percent or higher. While driving a commercial motor vehicle, the limit is 0.04. When you are arrested for a DWI in North Carolina, there is a two-part process that includes both a criminal case and a separate driver's license suspension.

North Carolina alcohol laws **§ 18B-302** make no exceptions for consuming alcohol under age 21. It is illegal for anyone under 21 to purchase, possess, or attempt to purchase or possess any alcoholic beverage. Anyone who purchases for, or otherwise gives, provides, or assists in the provision of alcoholic beverages to another person knowing that the person is less than 21 years of age is guilty of a Class 1 misdemeanor. If convicted, the court may order a fine of up to \$500, and a requirement of 25

hours of community service. Purchase, Possession or Consumption by a person who is 19- or 20-year-old is a Class 3 misdemeanor.

Using a fake ID to establish a false identity or false age to purchase alcoholic beverages is a Class 3 misdemeanor. Upon receipt of a conviction report, there could have a potential loss of driver's license. Penalties include possible jail time, fines, and other conditions such as a mandatory 1-year suspension of your driver's license, or substance abuse assessment treatment or education classes. The higher your BAC, the more severe the penalties will be. Multiple convictions will also result in harsher sentences. Additional information can be found here:

<https://www.ncleg.gov/Laws/GeneralStatuteSections/Chapter18B>

C. Health Risks

The use of drugs, including alcohol and tobacco, can produce serious short and long term health risks. Substance use can lead to dependency and addiction, health problems, mental illness, social issues, and violence. Beyond the harmful consequences for the individual, drug and alcohol use can cause serious emotional, mental, and physical health problems for others.

Alcohol consumption causes a number of marked changes in behavior. Even low doses significantly impair the judgement and coordination required to drive a car safely, increasing the likelihood that the driver will be involved in an accident. Low-to-moderate doses of alcohol also increase the incidence of a variety of aggressive acts including domestic and child abuse. Moderate-to-high doses of alcohol cause marked impairments in higher mental functions, severely altering a person's ability to learn and remember information. Very high doses cause respiratory depression and death. If combined with other depressants of the central nervous system, much lower doses of alcohol produce the effects just described.

Repeated use of alcohol can lead to dependence. Sudden cessation of alcohol intake is likely to produce withdrawal symptoms, including severe anxiety, tremors, hallucinations, and convulsions. Alcohol withdrawal can be life-threatening. Long-term consumption of large quantities of alcohol, particularly when combined with poor nutrition, can also lead to permanent damage to vital organs such as the brain and the liver.

Mothers who drink alcohol during pregnancy may give birth to infants with fetal alcohol syndrome. These infants have irreversible physical abnormalities and intellectual disabilities. In addition, research indicates that children of alcoholic parents are at greater risk of becoming alcoholics than are other youngsters.

A summary of the health risks associated with the substances covered by the Controlled Substances Act (21 USC 811) are summarized in the Appendix. For additional health risks specifically related to your situation, contact your health care provider.

Reference: U.S. Department of Justice Drug Enforcement Administration. Drugs of Abuse: A DEA Resource Guide.

D. Drug and Alcohol Programs

Students and employees who use controlled substances or who abuse alcohol are encouraged to seek assistance through the campus Student Services office or the office of the Campus Executive Director. A binder of community resources can also be found in the Learning Resource Center at the campus. Employees are also encouraged to seek confidential assistance from the Human Resources department at the corporate office by calling 757-456-5065. The staff will assist you or provide an appropriate referral. Although the school does not have in-house counseling or treatment services, many options are available in the surrounding areas for employees and students in need of substance-abuse counseling, treatment, or rehabilitation and reentry programs.

You can find treatment facilities in your area by searching at www.findtreatment.gov. In addition, the school maintains the following list of national and local services and hotlines related to substance abuse. For more information relating to your area and needs, contact the Campus Executive Director or the Student Services Coordinator for a confidential discussion.

National Hotlines

Organization	Phone/Web	Services
Substance Abuse and Mental Health Services Administration (SAMHSA)	1-800-662-HELP	information on alcohol and drug abuse, local treatment options, support through hotline counselors about to speak with about alcohol, drug or family problems
Alcoholic Anonymous	www.aa.org	Recovery assistance from alcoholism
Al-Anon and Alateen	www.al-anon.org	Guide for family whose lives have been affect by someone else's drinking
Narcotics Anonymous	www.na.org	Recovery assistance from addiction
National Alcoholism and Substance Abuse Information Center	1-800-784-6776	National database of the alcohol rehab treatment and drug rehab treatment centers for every level of treatment option
HelpGuide	www.helpguide.org	Guides to mental health and wellness, including addition and recovery information
National Suicide Prevention Lifeline	1-800-273-TALK Call or text: 988	24/7 support for people in distress
National Sexual Assault Hotline	800-565-4673	24/7 assistance for survivors of sexual violence and harassment
National Domestic Violence Hotline	800-799-7233	24/7 assistance for survivors of domestic violence
Veteran Crisis	Dial 988, press 1	27/4 crisis support for Veterans and their loved ones

Local Drug and Alcohol Related Services

Facility	Services	Address	Phone
Charlotte Detox Center	Addiction treatment	8509 Crown Crescent Ct, Charlotte NC 28227	866-550-3472
New Beginnings Treatment Center	Addiction treatment, DWI services	6555 old Monroe Rd, Indian Trail NC 28079	704-821-4291
Community Choice	Addiction treatment	5800 Executive center Drive, Charlotte NC 28212	704 336-4844
Atrium Health Addiction Services	Outpatient, chemical dependency care	7825 Ballantyne Commons Pkwy, Charlotte NC 28277	704-446-0391
Harmony Recovery Group	Addiction and mental health treatment, detox	8520 Cliff Cameron Dr, Charlotte NC 28269	252-397-3625
Midwood Addiction Treatment	Alcohol and drug abuse rehab, mental health therapy	1111 The Plaza, Charlotte NC 28025	704-625-2828

Anuvia Prevention & Recovery Center	Detox, outpatient and residential services, DWI services, prevention	100 Billingsley Rd, Charlotte NC 28211	704-376-7474
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E. Disciplinary Sanctions

Student Sanctions. In accordance with the Student Code of Conduct, use, possession, or distribution of illegal narcotic, alcoholic, or other controlled substances, except as expressly permitted by law, to include public intoxication, is a Level I violation and is deemed to be among the most serious types of violations. As a condition of enrollment, students must abide by the terms of this policy and the Student Code of Conduct. If any violation of the standards of conduct are violated, sanctions will be imposed which would include the following.

- Reporting the violation to law enforcement officials.
- Remove a student from Institution activities, to include classroom lecture, practical labs, and externships, when impairment is noted or feared.
- Taking appropriate disciplinary action against such student, up to and including probation, expulsion, termination of enrollment

Employee Sanctions. Our Institute's reputation depends entirely on the ethical and legal behavior of its employees. The Institute is committed to a standard of ethics, integrity and compliance with applicable laws in all aspects of conducting business. As such, employees are expected to observe standards of ethical conduct as described in the Employee Handbook and in this policy. If any violation of the standards of conduct are violated, sanctions will be imposed which would include the following.

- Reporting the violation to law enforcement officials.
- Remove the employee from the workplace or any Institution activities when impairment is noted or feared.
- Submission to a drug, alcohol, or illegal substance test.
- Taking appropriate disciplinary action against such employee in accordance with the Employee Handbook, which could include verbal or written warning, performance improvement plan, demotion, suspension, or separation of employment.
- Require participation in a substance abuse rehabilitation program approved for such purposes by a federal, state, local health, law enforcement or other appropriate agencies as a condition of continued employment.

(2) Biennial Review

The school will complete a review of the Drug and Alcohol Abuse Prevention (DAAPP) policies and procedures. The biennial review will occur no later than February of each odd numbered year (2025, 2027, 2029, etc) and cover the previous two calendar years. For example, the review conducted in February 2025 will cover the calendar years 2023 and 2024.

The school will form a task force to accomplish the biennial review, to include at a minimum the following individuals. The task force will include the Campus Executive Director or Assistant Campus Director, the Student Services Coordinator, the Director of Education, and other campus representatives as needed. The objective of the review is to determine the effectiveness of, and to implement any needed changes to the DAAPP and to ensure the campus is enforcing the disciplinary sanctions and

policies consistently. In accomplishing the objectives, the following steps will be considered during the review.

1. Determine the number of drug and alcohol-related violations and fatalities that occurred on campus or as part of any institution's activities and are reported to campus officials during the last 2 years. Document the particulars of the offense(s), any mitigating circumstances, and the school sanctions imposed. Cover student and employee violations. Remove all personally identifying information from the documentation.
2. Review the offenses and subsequent institutional sanction. Compare data obtained year over year. Have the sanctions been enforced consistently?
3. Are there any recommendations for improvement in consistency of the disciplinary policies?
4. Review the educational programming held at the campus during the previous 2 years relation to the policy. Has the DAAPP policy been effective in preventing the possession, use, or distribution of drugs or alcohol, as defined in this statement?
5. If not, what action plans are in place to improve the process.

The Biennial Review Report, at a minimum, should include answers to the above questions. The report will also include a written statement certifying that the school has adopted and implemented the drug prevention program described in § 86.100. The report and the certification statement will be kept on campus and a copy emailed to the Director of Academic Affairs at the corporate office no later than February 28 of each odd numbered year. A copy of the Biennial Review Report will be posted on the school's consumer information web site.

3) Record Keeping

The school will keep a copy of the annual Drug and Alcohol Prevention Plan policies, reports and backup documentation from the biennial review, and any other records reasonably related to the school's compliance with the drug and alcohol abuse prevention program for a minimum of 5 years.

Appendix: Health Risks Associated with Use of Illicit Drugs and Abuse of Alcohol

Drug	Schedule	Trade Names	Medical use	Dependency	Usual method of abuse	Possible effects	Effects of Overdose	Withdrawal
Narcotics								
Fentanyl	II	Apache, China Girl, Dance Fever, Friend, Goodfellas, Great Bear, He-Man, King Ivory, Murder 8, Tango & Cash.	Analgesic, anesthetic	High	Injected, snorted, smoked, oral,	Drowsiness, inability to concentrate, apathy. Slowed physical activity, constriction of the pupils, flushing of the face and neck, constipation, nausea, vomiting, and slowed breathing	Overdoses of narcotics are not uncommon and can be fatal. Constricted (pinpoint) pupils, cold clammy skin, confusion, convulsions, extreme drowsiness, and slowed breathing	Restlessness, irritability, loss of appetite, nausea, tremors, drug craving, severe depression, vomiting, increased heart rate and blood pressure, and chills alternating with flushing and excessive sweating
Heroin	I	Big H, Black Tar, Chiva, Hell Dust, Horse, Negra, Smack, and Thunder	None	High	injected, smoked, snorted			
Hydromorphone	II	D, Dillies, Dust, Footballs, Juice, Smack	Pain reliever	High	Oral, ingestion			
Methadone	II	Amidone, Chocolate Chip Cookies, Fizzies with MDMA, and Wafer	Analgesic	High	Swallowed, injected			
Morphine	II	Dreamer, Emsel, First Line, God's Drug, Hows, MS, Mister Blue, Morf, Morpho, Unkie	Pain reliever	High	Oral, injected			
Opium	II	Aunti, BigO, Black ill, Chinese Molasses, Dopiump, Dreams, FiDoNIE, G, God's medicine, Guma, Joy, Midnight Oil, O, OP, Pox.	None	High	Smoked, injected, oral			
Oxycodone	II	Hillbilly Heroin, Kicker, OC, Ox, Roxy, Perc, and Oxy, OxyContin	Analgesic	High	Oral, injected			
Stimulants								
Amphetamines	II	Bennies, Black Beauties, Crank, Ice, Speed, and Uppers	Treat ADHD	High	Oral, injected	Sense of exhilaration, enhanced self-esteem, improve mental and physical performance, increase activity, reduce appetite, extend wakefulness for prolonged period, Chronic, high-dose use is frequently associated with agitation, hostility, panic, aggression, and suicidal or homicidal tendencies, tolerance	In overdose, unless there is medical intervention, high fever, convulsions, and cardiovascular collapse may precede death. Because accidental death is partially due to the effects of stimulants on the body's cardiovascular and temperature-regulating systems, physical exertion increases the hazards of stimulant use	Abrupt cessation is commonly followed by depression, anxiety, drug craving, and extreme fatigue
Cocaine	II	Blow, Coca, Coke, Crack, Flake, Snow	Rare	High	Snorted, injected, smoked			
Khat	I, IV	Abyssinian Tea, African Salad, Catha, Chat, Kat, and Oat	None	High	Chewed, smoked			
Methamphetamine	II	Batu, Bikers Coffee, Black Beauties, Chalk, Chicken Feed, Crank, Crystal, Glass, Go-Fast, Hiropon, Ice, Meth, Methlies Quick, Poor Man's Cocaine, Shabu, Shards, Speed, Stove Top, Tina, Trash, Tweak, Uppers, Ventana, Vidrio, Yaba, and Yellow Bam	Obesity, ADHD	Moderate	Swallowed, snored, injected, smoked			
Depressant								
Barbiturates	I, III, IV	Barbs, Block Busters, Christmas Trees, Goof Balls, Pinks, Red Devils, Reds & Blues, and Yellow Jackets	Sedatives, hypnotics, anesthetics, anticonvulsants	High	Swallowed, injected	Sleepiness, amnesia, impaired mental function, confusion. Slurred speech, loss of motor coordination, weakness, headache, dizziness	Extreme drowsiness, confusion, impaired coordination, decreased reflexes,	Withdrawal can be life threatening

Drug	Schedule	Trade Names	Medical use	Dependency	Usual method of abuse	Possible effects	Effects of Overdose	Withdrawal
Benzodiazepine	IV	Benzos and Downers, valium, zanax, Ativan, klonopin, flurazepam,	Anesthesia, insomnia, anticonvulsant	Low	Oral, snorted	vomiting, low blood pressure. Prolonged use produces physical and psychological dependence and tolerance	respiratory depression, coma, and possible death. Overdose effects of concomitant use of benzodiazepines and opioids include: Profound sedation, respiratory depression, coma, and death	
GHB	I III	Sodium oxybate, xyrem	None	High	Ingested			
Rohypnol	IV	Date rape drug, Forget Pill, La Rocha, Lunch Money Drug, Mexican Valium, Pingus, R2, Reynolds, Roach, Roopies, Roofies, Row-Shay, Wolfies	None		Oral			
Hallucinogens								
Ecstasy/MDMA	I	Adam, Beans, Clarity, Disco Biscuit, E, Ecstasy, Eve, Go, Hug Drug, Lover's Speed, MDMA, Peace, STP, X, and XTC	None	High	Oral	Sensory effects, perceptual distortions, flashbacks, elevated heart rate, increased blood pressure, dilated pupils, nausea and vomiting.	Psychological harm, fear, depression, anxiety, and paranoia. Deaths generally occur due to suicide, accidents, dangerous behavior, inadvertently eating poisonous plant material. Respiratory depression, coma, convulsions, seizures, and death due to respiratory arrest	
Ketamine	III	Cat Tranquilizer, Cat Valium, Jet K, Kit Kat, Purple, Special K, Special La Coke, Super Acid, Super K, and Vitamin K	anesthetic	Moderate	Snorted, smoked, oral, injected			
LSD	I	Acid, Dots, Mellow Yellow, Window Pane	None	High	Oral			
Peyote & Mescaline	I	Buttons, Cactus, Mesc, and Peyoto	None	High	Oral, smoked			
Psilocybin	I	Magic Mushrooms, Mushrooms, and Shrooms	None	High	Oral			
Steroids								
Anabolic Steroids	III	Arnolds, Juice, Pumpers, Roids, Stackers	Hormone deficiencies, delayed puberty		Oral, injected, applied to skin	Mood swings, hostility, impaired judgement, aggression, growth stunt in adolescents, changes in sexual development, high cholesterol levels, acne and fluid retention, liver damage	Anabolic steroids are not associated with overdoses.	Depression
Marijuana/ Cannabis								
Marijuana	I	Aunt Mary, Bud, Blunts, Chronic, Dope, Gangster, Ganja, Grass, Hash, Herb, Joint, Kif, Mary Jane, Mota, Pot, Reefer, Sinsemilla, Skunk, Smoke, Weed, Yerba	None	Moderate	Smoked, oral	Learning impairments, dizziness, nausea, tachycardia, flushing, tremors, merriment, relaxation, sedation, blood shot eyes, coughing, increased appetite, increased blood pressure, burnt lung tissue	None	Restlessness, irritability, sleep difficulties
Marijuana concentrates	I	710, wax, honey oil, budder, butane honey oil, shatter, dabs, black glass, errl.	None	Moderate	Smoked, oral			
Vaping	--	E-cigs, e-hookahs, mods, vape pens, vapes, and Juuls or Juuling	None	Moderate	Inhaling			
Inhalants								
Inhalants	--	Gluey, Huff, Rush, and Whippets	None		inhaled	Brain damage, cognitive abnormalities, slow body function,	Loss of consciousness, death by asphyxiation	

Drug	Schedule	Trade Names	Medical use	Dependency	Usual method of abuse	Possible effects	Effects of Overdose	Withdrawal
						loss of consciousness, drowsy		
Designer Drugs								
Bath Salts		Bliss, Blue Silk, Cloud Nine, Drone, Energy-1, Ivory Wave, Lunar Wave, Meow Meow, Ocean Burst, Pure Ivory, Purple Wave, Red Dove, Snow Leopard, Stardust, Vanilla Sky, White Dove, White Knight, White Lightning	None		Snorting, oral, smoking, injected	Euphoria and alertness, confusion, psychosis, hallucination agitation, aggression, self destructive behavior, rapid heartbeat, hypertension, sweating, headaches, palpitations	Nausea, anxiety, seizures, stroke, coma, organ injury, death	
K2/Spice		Spice, K2, Blaze, RedX Dawn, Paradise, Demon, Black Magic, Spike, Mr. Nice Guy, Ninja, Dream, Genie, Sence, Smoke, Skunk, Serenity, Yucatan, Fire, Skooby Snax, and Crazy Clown	None					
Drugs of Concern								
DSM		CCC, Dex, DXM, Poor Man's PCP, Robo, Rojo, Skittles, Triple C, and Velvet	Cough suppressant, cold medication		Oral	Confusion, agitation, paranoia, sensor changes, euphoria and hallucinations, excitability, sweating	Impairment of the senses	
Kratom		Thang, kakuam, thom, ketum, and biak	None		Oral, chewed	Nausea, itching, sweating, constipation, vomiting, drowsiness, loss of appetite, seizure, hallucination		
Salvia Divinorum		Maria Pastora, Sally-D, and Salvia	None		Chewed, smoked	Distorted perception, fear and panic, paranoia, hallucination, impaired judgment, loss of coordination, slurred speech		
Alcohol								
		Undistilled: Beer, wine hard cider, mead, sake Distilled: Gin, brandy, whiskey, rum, tequila, vodka, absinthe, everclear	None	Common	Oral	Short term risks: injuries, violence, alcohol poisoning, risky behaviors, miscarriage Long term risks: Long term risks: high blood pressure, heart disease, stroke, liver disease, cancer, weakened immune system, memory problems, mental health problems, social problems	Alcohol poisoning: confusion, difficulty remaining conscious, vomiting, seizures, slow breathing, clammy skin, low body temperature	Anxiety, shaking, insomnia, headache, nausea, hallucinations, seizures, delirium tremens

Reference: U.S. Department of Justice Drug Enforcement Administration. Drugs of Abuse: A DEA Resource Guide.