

COMMERCIAL INDUSTRIAL HEMP PROCESSOR NEW EMPLOYEE FORM

BUSINESS

2. Business' Current Permit #: _____

Business Name _____

NEW EMPLOYEE

Last _____ First _____ MI _____
Date of Birth: ____/____/____ Current Age (in years): _____ Gender: Male Female
Last 4 Digits of Social Security #: _____ Driver's License _____ State _____
U.S. Citizen? Yes No If not a U.S. citizen, please provide Alien Registration #: _____
Have you been convicted of a felony? Yes No

Consent to Search K.A.R. 22-26-7(b)

By signing this form, I agree and consent to the State Fire Marshal or his designee conducting a search of my vehicle, my personal effects, or of my person while on the premises of a hemp processing facility, whenever an inventory discrepancy is detected or there is reason to believe that I may be in possession of hemp, intermediate substances, by-products, seeds, or hemp waste for a purpose other than the activities authorized by the Kansas Commercial Industrial Hemp Act.

Printed Name

Signature

Title

Witness Printed Name

Witness Signature

Title

Date Signed