



Authorization Release for Federal Background Investigation

I, _____, authorize Cannabis NM Staffing LLC to obtain "National Criminal Back Check" for employment screening. I also authorize a Federal background check at any time during the screening process and throughout my employment, if applicable.

Signature: _____ Date: _____

Printed Name: _____

Personal information needed for background check

First: _____ Last name: _____

Middle: _____ Other name(s) Maiden/Married _____

Date of Birth (MM-DD-YYYY): _____ - _____ - _____

SS# _____ - _____ - _____