

**ACCEPTANCE OF DUTIES UNDER THE MEDICAL CANNABIS ACT ACKNOWLEDGEMENT  
FORM**

I understand that I may be assigned or asked to undertake duties that arise from or directly relate to the Utah Medical Cannabis Act. Pursuant to Utah Code §§ 4-41a-107 and 26-61a-111, I acknowledge the following:

\_\_\_\_\_ I acknowledge that my job duties may require me to engage in conduct which is in violation of the criminal laws of the United States with respect to the manufacture, sale, or distribution of cannabis;

\_\_\_\_\_ I acknowledge that in accepting and performing those duties, I am entitled to the protections of the Utah Protection of Public Employees Act, Utah Code § 67-21-1 *et seq.*, except insofar as those protections extend to acts which may be a violation of criminal law of the United States with respect to the manufacture, sale, or distribution of cannabis;

\_\_\_\_\_ I acknowledge that notwithstanding Utah Code Subsection 67-21-3(3), I may not:

(a) claim in good faith that my actions violate or potentially violate the laws of the United States with respect to the manufacture, sale, or distribution of cannabis; or

(b) refuse to carry out a directive that I reasonably believe violates the criminal laws of the United States with respect to the manufacture, sale, or distribution of cannabis.

**Disclaimer:** A state or a political subdivision employer may not take retaliatory action, as defined in Utah Code § 67-19a-101(11), against a current employee who refuses to sign this notice.

Position Title: \_\_\_\_\_

Employee Name: \_\_\_\_\_ EIN: \_\_\_\_\_

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_