



Alcohol and Marijuana Control Office
 550 W 7th Avenue, Suite 1600
 Anchorage, AK 99501
marijuana.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
 Phone: 907.269.0350

Alaska Marijuana Control Board Form MJ-10: Education Course Provider Application

This marijuana handler permit education course provider application is required for all persons and entities seeking to have a marijuana handler permit education course approved or re-approved (every three years) by the Marijuana Control Board. Applicants should review **3 AAC 306.700** and **3 AAC 306.701**.

The course curriculum must cover at least the following topics:

- AS 17.37, AS17.38, and 3 AAC 306
- The effects of consumption of marijuana and marijuana products
- How to identify a person impaired by consumption of marijuana
- How to determine valid identification
- How to intervene to prevent unlawful marijuana consumption
- The penalty for an unlawful act by a licensee, an employee, or an agent of a marijuana establishment
- A written test, demonstrating that each student has learned the information correctly



This form must be submitted to AMCO's Anchorage office, along with copies of the course curriculum, before any marijuana handler education course provider application will be considered by the board.

Applicant Information

Enter information for the business seeking to be an approved marijuana handler permit education course.

Applicant:	Rserveing				
Course Name:	Alaska Marijuana Handler Permit Training				
Mailing Address:	PO Box 192				
City:	Madison	State:	SD	ZIP:	57042
Email Address:	support@Rserveing.com	Phone:	605-427-2000 800-247-		

Check one: Initial course application, \$500 fee Three year course review, \$500 fee

Do you intend to provide this course in-person in a classroom-type setting, or online? Check all that apply. In-person Online

You must be able to certify the statement below. Read the following and then sign your initials in the box to the right:

I hereby certify that I am the person herein named and subscribing to this application and that I have read the complete application, and I know the full content thereof. I declare that all of the information contained herein, and evidence or other documents submitted are true and correct. I understand that any falsification or misrepresentation of any item or response in this application, or any attachment, or documents to support this application, is sufficient grounds for denying or revoking a license/permit. I further understand that it is a Class A misdemeanor under Alaska Statute 11.56.210 to falsify an application and commit the crime of unsworn falsification.

Initials

RG

Robert Graham

Robert Graham
 Signature of Applicant

Printed Name of Applicant

OFFICE USE ONLY			
Board Meeting Date:		Approved Y/N?:	Course #: