



Alcohol and Marijuana Control Office 550 W 7th Avenue, Suite 1600 Anchorage, AK 99501 <u>marijuana.licensing@alaska.gov</u>

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

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

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

Applicant:	R. Marcy dba A	R. Marcy dba Alaska Cannabis Industries					
Course Name: Marijuana Handler's Card							
Mailing Address:	4751 N Wasilla Fishhook Road						
City:	Wasilla		State:	AK	ZIP:	99654	
Email Address: marcy@lawcorn		ner.net	Phone:	(907) 631-9518			
Check one:	course application, \$500 f	ee 🖸 Three year	course review, \$500	0 fee			
You must be able to certify I hereby certify that I am th and I know the full content submitted are true and core any attachment, or docume	this course in-person in a the statement below. Read to the person herein named and so thereof. I declare that all of the rect. I understand that any facents to support this applications of A misdemeanor under Alask	the following and then sign subscribing to this application container alsification or misrepreseron, is sufficient grounds for the sufficient grounds for th	n your initials in the bation and that I have red d herein, and evidence ntation of any item or for denying or revoking	ox to the content of	right: omplete appl documents in this applic /permit. I fui	ation, or RM	
Ronda L. Marcy Konda J. Marcy							
Printed Name of Applicant		Signature of Applica	int /				
	7	OFFICE USE ONL)				17	
Board Meeting Date:		Approved Y/N?:		0	ourse #:		