



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**.

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APR 19 2024

The course curriculum must cover at least the following topics:

Dept. of Commerce
 AMCO

- 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:	Cannabis Training University (CTU)				
Course Name:	Alaska Marijuana Handler Certification-Pass Guarantee-Free Retakes				
Mailing Address:	600 17th St Suite 2800				
City:	Denver	State:	CO	ZIP:	80202
Email Address:	support@thectu.com	Phone:	844-484-3288		

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

JZ

Jeffrey Zorn

Jeffrey Zorn

Digitally signed by Jeffrey Zorn
 Date: 2024.04.19 12:30:56
 -04'00'

Printed Name of Applicant

Signature of Applicant

<i>OFFICE USE ONLY - GG/LGS</i>					
Board Meeting Date:	6/26/24	Approved Y/N?:		Course #:	MHCP 038