

## APPLICATION FOR QUALIFIED CANNABIS WORKER

50 Corriveau Avenue  
St. Albert, Alberta T8N 3T5

Phone: 780-447-8600 Fax: 780-447-8912  
Toll Free: 1-800-272-8876

Email: [gaming.registrations@aglc.ca](mailto:gaming.registrations@aglc.ca)  
Website: [aglc.ca](http://aglc.ca)

**I am applying for:**

- Retail Cannabis Worker    
  Retail Cannabis Licensee    
  Cannabis Representative, employed by a licensed producer

NAME	Surname	First Name	Middle Name(s) (in full)
OTHER ALIAS(ES)	_____		
DATE OF BIRTH	_____ <small>Year      Month      Day</small>	<input type="checkbox"/> CANADIAN CITIZEN <input type="checkbox"/> LANDED IMMIGRANT <input type="checkbox"/> OTHER (Describe) _____	GENDER <input type="checkbox"/> Male <input type="checkbox"/> Female
PLACE OF BIRTH	_____ <small>City</small> <span style="float: right;"><small>Country</small></span>		
MAILING ADDRESS	_____		HOME ADDRESS (if different from mailing)
	Apt #, Street or PO Box	_____	Apt #, Street or PO Box
	City	Postal Code	City      Postal Code
TELEPHONE	Res ( _____ ) _____		Cell ( _____ ) _____
EMAIL ADDRESS	_____		

**DO YOU HAVE SELLSAFE CERTIFICATION?**

No   
  Yes, provide:     
 SellSafe Reg #: \_\_\_\_\_     
 Expiry Date: \_\_\_\_\_

**ARE YOU CURRENTLY OR HAVE YOU EVER BEEN CHARGED WITH A CRIMINAL OFFENCE?**

No   
  Yes, provide details

<i>Date of Charge or Conviction</i>	<i>Place of Charge or Conviction</i>	<i>Offence</i>	<i>Outcome</i>
_____	_____	_____	_____
_____	_____	_____	_____

1. Answer "Yes" even if:

- i. The charges were dismissed or subsequently downgraded to a lesser charge.
- ii. You completed an alternative measures or other similar program.
- iii. You were charged but not convicted.
- iv. You did not serve any time in prison.
- v. The investigation, charges or offences happened in another jurisdiction.

2. Answer “No” if:
- i. You received a pardon under the provisions of the Criminal Records Act (Canada) or similar legislation, or if any records relating to a charge or conviction have been expunged or otherwise officially sealed by a court or government agency.
  - ii. You were charged under the provisions of the Young Offenders Act (Canada) or other similar legislation.
  - iii. You have never been charged with a criminal offence.

**I CERTIFY THAT:**

- All information provided as part of the application is truthful and complete.
- Any criminal charges or convictions will be reported to the AGLC immediately.
- I authorize the AGLC to undertake a criminal record check or inquire with any police agency to determine my eligibility to be certified as a qualified cannabis worker.
- I understand that a false statement or failure to meet AGLC conditions may result in my qualification being refused or cancelled.

\_\_\_\_\_  
*Applicant's Signature*

\_\_\_\_\_  
*Date*

**ENSURE THE FOLLOWING IS ATTACHED TO THIS APPLICATION:**

- Current criminal records check (original) provided by RCMP or local police (obtained within the last three months).  
*A criminal records check is **not** required if you have already completed the Personal Disclosure Cannabis Retailer (form 8017).*
- For first-time applicants born in Canada, copy of birth certificate, Canadian Passport, Indian Status Card.
- For first-time applicants born outside Canada, copy of Certificate of Canadian Citizenship or immigration documents (e.g., permanent resident card, landed immigrant documents, or current work/study permit).

**NOTICE TO APPLICANTS**

- Any changes to personal information (e.g. address, surname) must be reported immediately to the AGLC by:
  - email to [gaming.registrations@aglc.ca](mailto:gaming.registrations@aglc.ca)
  - call AGLC at 1-800-272-8876
- Qualification is valid for up to five years. It is the responsibility of the applicant to ensure renewal of qualification prior to expiry.
- Applications will be reviewed throughout the qualification period. If an individual fails to comply with AGLC policies or is charged with or convicted of an offence under *Gaming and Liquor Act*, as amended from time to time, Gaming and Liquor Regulation, as amended from time to time, or criminal offence the qualification may be cancelled.

**Protection of Privacy** – The personal information requested on this form is collected under the authority of Section 33(c) of the *Alberta Freedom of Information and Protection of Privacy Act* and will be protected under Part 2 of that Act. It will be used for the administration of all policies and processes relating to cannabis licensing. Direct any questions about this collection to: AGLC FOIP Coordinator, 50 Corriveau Avenue, St. Albert, AB T8N 3T5 780-447-8600 or toll free at 1-800-272-8876.