



Synthetic Marijuana Products Advisory Council Appointment Application

Synth App
V1 8/2023

*This is only an application. Appointments only become effective upon approval notification from the Cannabis Control Division. The application must be complete and submitted with all required documents by **November 1, 2023**, in order to be considered.*

Current member appointments available:

- Two members from the marijuana industry (i.e., existing Cannabis Licensee or Testing Laboratory)
- One public member – must have expertise in toxicology, organic chemistry, or regulatory affairs in nutraceutical, pharmaceutical, or dietary supplements.

Applicant Information

I am applying for: Marijuana Industry Member Public Member

First Name		Last Name	
Street Address			
City		State	ZIP Code
Email			Phone

Questions

Are you affiliated with an approved Cannabis Licensee? Yes No

Affiliated Cannabis licensee name and license number (please list all applicable)

Licensee Name 1:	License Number 1:
Licensee Name 2:	License Number 2:
Licensee Name 3:	License Number 3:

**Please include any additional affiliations on another document attached to your application.*

Type of affiliation (check all that apply):

- Beneficial Owner Worker
 Manager Other

If other, describe in detail below:

Public member expertise (check all that apply):

- Toxicology Regulatory affairs in nutraceutical, pharmaceutical, or dietary supplements
 Organic Chemistry

Please tell us how you fulfill the public member qualifications.

Please tell us why you want to participate in the Synthetic Marijuana Products Advisory Council.

Required Documents

Please provide the following documents with this application.

- Resume
- Cover Letter
- Other (e.g., diploma, certificate, etc.)
*Other is required for Public Member applicants only

Waivers

- I agree that if appointed, I will abide by all state laws and rules.
- I verify that all information in this application is accurate to the best of my knowledge.

Signature

Date

Email completed application and required documents to DORCCD@mt.gov

Questions? Call us at (406) 444-6900, or Montana Relay at 711 for the hearing impaired.