



State of Alaska
 Department of Commerce, Community and Economic Development
 Division of Corporations, Business and Professional Licensing
BIG GAME COMMERCIAL SERVICES BOARD
 State Office Building, 333 Willoughby Avenue, 9th Floor
 PO Box 110806, Juneau, AK 99811-0806
 Phone: (907) 465-2543
 E-mail: license@alaska.gov
 Website: www.commerce.alaska.gov/occ

For Division Use Only

GAME MANAGEMENT UNIT CERTIFICATION EXAMINATION APPLICATION

Type or print all information legibly in ink.

To be eligible to receive certification in a game management unit (GMU) the following must be postmarked at least 45 days before the next scheduled examination:

1. \$390.00 per unit examination fee (maximum 3 units per test date) in the form of a check or money order payable to the State of Alaska.
2. Complete application.
3. Proof of having performed one or more of the following activities in the field for at least 60 days within each GMU you are requesting certification: Guiding, Hunting, Trapping, Camping, Surveying of Game.

Proof of hunting, trapping, camping, and/or surveying of game experience can be demonstrated by submitting an affidavit form (08-2459b) completed by

- An Alaska wildlife law enforcement officer who is familiar with you;
- Alaska fish and wildlife biologist (state or federal) who is familiar with you; or
- Three individuals known to you who can attest to your hunting, trapping, camping, surveying of game experience within the requested GMU(s).

Proof of guiding experience can be demonstrated by submitting one of the three following options:

- Photocopies of hunt records reflecting that you have participated in guided hunts, within GMU(s) for which you are requesting certification.
- A list of big game hunters that you have accompanied in the field on guided hunts, with identification of the year(s) and the contracting Registered Guide-Outfitter(s).
- An Affidavit of GMU Experience form (08-2459c) completed by contracting Registered Guide-Outfitter(s) for whom you have worked for as an Assistant in the GMU(s) for which you are requesting certification. Faxed affidavits will NOT be accepted. Originals must be mailed to the Division.

Applicant Name: _____

Guide-Outfitter #: _____
 (Insert "Pending" if you have a pending Guide-Outfitter application on file with the Board.)

Requested Test Location: Anchorage Juneau Fairbanks

Telephone #: _____

E-Mail Address (optional): _____

Please send correspondence via: Email US Mail

Request for Certification in GMU(s): _____



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AFFIDAVIT OF HUNTING, CAMPING, TRAPPING, SURVEYING OF GAME EXPERIENCE

Type or print all information legibly in ink.

Please check the appropriate box(s). This affidavit is being completed on the applicants behalf by a

- Wildlife law enforcement officer who is familiar with the applicant and can attest to the applicants hunting, camping, trapping and/or surveying of game experience within the Game Management Unit(s) noted below.
Wildlife biologist who is familiar with the applicant and can attest to the applicants hunting, camping, trapping and/or surveying of game experience within the Game Management Unit(s) noted below.
Person known to the application who can attest to the applicants hunting, camping, trapping and/or surveying of game experience within the Game Management Unit(s) noted below. Note: Three affidavits are required under this option.

I certify that (Applicant's Name) has the following hunting, camping, trapping, and/or surveying of game experience in Game Management Unit(s) below.

Identify the Game Management Unit(s) (GMU), year(s) and # of days in the field for which you are claiming the applicant has experience hunting, camping, trapping, and/or surveying of game.

GMU: Year: # of Days: GMU: Year: # of Days:
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Being first duly sworn upon his/her oath, deposes and says:

By my signature below, I declare that all facts and statements contained in this affidavit are true and correct; I am not falsifying any information that is needed by the Big Game Commercial Services Board in determining qualifications.

I understand that, in accordance with Alaska Statutes 11.560.200, any person knowingly or intentionally furnishing false or fraudulent information when completing this affidavit is subject to imprisonment for not more than one year, a fine of not more than \$5,000.00 or both.

Signature: Date:

Printed Name: Telephone # (optional):

Mailing Address:

SUBSCRIBED AND SWORN TO before me this day of, 20.

SEAL (or postmaster stamp if notary is not available)

Notary Public for the State of

My Commission Expires:



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AFFIDAVIT OF GAME MANAGEMENT UNIT GUIDING EXPERIENCE

Type or print all information legibly in ink.

- This form is to be completed by your employing contracting Registered Guide-Outfitter(s) for each unit you are requesting certification.
A separate affidavit is needed for each unit you are requesting certification. You may photocopy this form if necessary.

Being first duly sworn upon his/her oath deposes and says:

I make the following voluntary statement and no threats, promises, or any form of duress have been used to induce me to make this statement. I further confirm that hunt reports on file with the Department will support the information supplied below.

I _____, employed _____ as an Assistant Guide in
(Name of Employing Contracting Guide-Outfitter) (Applicant Name)
Game Management Unit: _____ for a total of _____ in the field on guided hunts.
(Number of Days)

You may provide additional names on a separate piece of paper.

Name of Client: _____ Dates of hunt: _____
Name of Client: _____ Dates of hunt: _____
Name of Client: _____ Dates of hunt: _____
Name of Client: _____ Dates of hunt: _____
Name of Client: _____ Dates of hunt: _____
Name of Client: _____ Dates of hunt: _____
Name of Client: _____ Dates of hunt: _____

I understand that in accordance with Alaska Statute 11.56.200 any person who knowingly or intentionally furnishes false or fraudulent information when completing this affidavit is subject to imprisonment for not more than one year, a fine of not more than \$5,000 or both.

I certify that the above information is true and correct.

Contracting Registered Guide-Outfitter Signature Guide-Outfitter Lic. # Date

SUBSCRIBED AND SWORN TO before me this _____ day of _____, 20_____.

SEAL

Notary Public
for the State of _____
My Commission Expires: _____

(or postmaster stamp if notary is not available)