



VIRGINIA DEPARTMENT OF
ALCOHOLIC BEVERAGE CONTROL

Seller/Server Training Approval Program (STAP) Application

Instructions

Virginia ABC has established an approval process for alcohol server-training courses pursuant to Code of Virginia 4.1-227, E. *** Please note that changes have been made to training criteria since the 2022 application period, these are indicated in red font marked with an asterisk. ***

Applications are accepted annually, September 1 through October 1 by 5 p.m. In order to submit your training program for approval you must complete the following steps:

1. Review and follow the format of the STAP Criteria (page 3 of this Application) to make sure that your program will meet the listed criteria.
2. Submit your application by mail to:
Virginia Alcoholic Beverage Control Authority
Education and Prevention Section
P.O. Box 27491
Richmond, VA 23261

Your application must include three copies of each of the following:

- STAP Application (this form)
- Printed hard copy of your training program in its presentation format (PowerPoint, Video, Online, etc.)
 - If your training is an online training, log-in and password information must be provided allowing reviewers unlimited access.
 - The printed copy and the online training must be the same, a script of what is said in the training.
 - All pages must be numbered
- Answer key for all quizzes/tests
 - Provide the passing score required for your course.
 - Explain the quiz conditions, are you using a random question bank?
 - What happens if they get the question incorrect?
 - If the participant does not pass the quiz, do they retake the entire training?
- Your participant manual and any other written materials
 - If the training is a self-lead training, do you provide training resources? If so, please submit a copy.
 - All pages must be numbered
- Your instructor manual - must be submitted with in person classroom trainings.
 - All pages must be numbered
- * The certificate of completion template.**
(must include a first and last name, title of the training, date the training was completed, the training company name or logo, and the quiz score.)

*** Failure to follow this format or submit three copies of each of the above required documents may cause delay in the approval process by postponing the review of your submission to the next application period.**

During this process you may be asked to submit additional information or electronic files for clarification.

It will be your responsibility to keep your program updated with changes to Virginia's codes and regulations, and to maintain all records of training classes conducted. **All programs must be re-submitted for approval every three years.** This process will ensure that all approved Virginia programs meet all requirements and are current with any changes to Virginia codes and regulations.

For additional questions or concerns, please email education@virginiaabc.com.

Application

Business Owner's Name:	
Business Trade Name:	
Business Mailing Address:	
Business Physical Address:	
Business Telephone Number:	
Business Website:	
Type of Training:	<input type="checkbox"/> Public: provides training to Virginia ABC licensees and the general public. <input type="checkbox"/> Private: provides in-house training to own employees only.
Training Platform:	<input type="checkbox"/> Online training <input type="checkbox"/> Classroom training <input type="checkbox"/> Online and classroom approval request
Contact Person's Name:	
Contact Person's Telephone Number:	
Contact Person's E-mail Address:	
Contact Website:	
* Additional Information Virginia ABC should know or consider before reviewing the training?	<input type="checkbox"/> Submittal is to comply with the 3 year review process <input type="checkbox"/> Training has been submitted previously and rejected. Explain the reason for rejection. <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> <input type="checkbox"/> Other – Please explain below.

CRITERIA	PRESENT	
	YES	NO
1. Alcohol Related Laws, Regulations, and Consequences	<input type="checkbox"/>	<input type="checkbox"/>
A. Underage sale of alcoholic beverages (§ 4.1-304)	<input type="checkbox"/>	<input type="checkbox"/>
B. Underage sale of tobacco products (§ 18.2-371.2)	<input type="checkbox"/>	<input type="checkbox"/>
C. * Sale, consumption, and loitering by intoxicated persons (§4.1-225) (Section 1.j)	<input type="checkbox"/>	<input type="checkbox"/>
D. Second party sales - alcohol and tobacco (§ § 4.1-306, 18.2-371.2)	<input type="checkbox"/>	<input type="checkbox"/>
E. Time of alcohol sales (3 VAC5-50-30)	<input type="checkbox"/>	<input type="checkbox"/>
F. Age of employees (3 VAC5-50-50)	<input type="checkbox"/>	<input type="checkbox"/>
G. Designated manager (3 VAC5-50-40)	<input type="checkbox"/>	<input type="checkbox"/>
H. Sale and consumption in unauthorized places (3 VAC 5-50-110)	<input type="checkbox"/>	<input type="checkbox"/>
I. Employee consumption of alcoholic beverages (§ § 4.1-325, 4.1-325.2, 4.1-325.A16)	<input type="checkbox"/>	<input type="checkbox"/>
J. Happy hour and advertising (§4.1-325.6, 3 VAC 5-20-30, 3 VAC 5-20-40, 3 VAC 5-50-160)	<input type="checkbox"/>	<input type="checkbox"/>
K. * Crossover Products- wine and beer displays - effective July 1, 2023 (§4.1-209.B)	<input type="checkbox"/>	<input type="checkbox"/>
L. Penalties - criminal and administrative (§ 4.1-349, 3 VAC 5-70-210)	<input type="checkbox"/>	<input type="checkbox"/>
2. Checking Identification	<input type="checkbox"/>	<input type="checkbox"/>
A. Types of identification (3 VAC 5-50-20)	<input type="checkbox"/>	<input type="checkbox"/>
B. Elements of acceptable identification (3 VAC 5-50-20)	<input type="checkbox"/>	<input type="checkbox"/>
C. Acceptable forms of identification (3 VAC 5-50-20)	<input type="checkbox"/>	<input type="checkbox"/>
D. * Once made available, provide a bona fide ID sample. Include a current image of the following ID types from the Department of Motor Vehicles: VA driver's license, VA DMV identification card, an underage VA driver's license, and an underage VA ID card.	<input type="checkbox"/>	<input type="checkbox"/>
E. Second forms of identification	<input type="checkbox"/>	<input type="checkbox"/>
F. 3 Types of false identification	<input type="checkbox"/>	<input type="checkbox"/>
G. Identification resources	<input type="checkbox"/>	<input type="checkbox"/>
3. Preventing Intoxication	<input type="checkbox"/>	<input type="checkbox"/>
A. Licensee and employee responsibility	<input type="checkbox"/>	<input type="checkbox"/>
B. Intoxication influences	<input type="checkbox"/>	<input type="checkbox"/>
C. Signs of intoxication	<input type="checkbox"/>	<input type="checkbox"/>
D. Blood alcohol concentration definition, state the legal BAC for an adult in Virginia	<input type="checkbox"/>	<input type="checkbox"/>
F. Server strategies	<input type="checkbox"/>	<input type="checkbox"/>
G. Bystander Intervention	<input type="checkbox"/>	<input type="checkbox"/>
H. Managing Confrontational Situations	<input type="checkbox"/>	<input type="checkbox"/>
I. How to refuse sales	<input type="checkbox"/>	<input type="checkbox"/>
J. Documenting confrontational situations	<input type="checkbox"/>	<input type="checkbox"/>
K. Post-confrontational situation follow-up with Virginia ABC	<input type="checkbox"/>	<input type="checkbox"/>
5. Virginia ABC Programs and Resources	<input type="checkbox"/>	<input type="checkbox"/>
A. Alcohol and tobacco compliance checks	<input type="checkbox"/>	<input type="checkbox"/>
B. * Virginia ABC Licensing, or "VAL" for short, is Virginia ABC's new licensing system that enables licensees to complete online transactions on behalf of their business. https://www.abc.virginia.gov/licenses/val	<input type="checkbox"/>	<input type="checkbox"/>
C. * Mention the Virginia ABC Licensee newsletter (https://www.abc.virginia.gov/licenses) and Responsibility Guide for Licensees. (https://www.abc.virginia.gov/library/licenses/pdfs/licensee-responsibility-guide-2023.pdf)	<input type="checkbox"/>	<input type="checkbox"/>
6. Contacting the Virginia Alcoholic Beverage Control Authority	<input type="checkbox"/>	<input type="checkbox"/>
A. Virginia ABC regional office directory * provide a working hyperlink	<input type="checkbox"/>	<input type="checkbox"/>
B. Virginia ABC website * provide a working hyperlink	<input type="checkbox"/>	<input type="checkbox"/>
7. Training Quiz questions and answer key * (testing the knowledge gained from the training material)	<input type="checkbox"/>	<input type="checkbox"/>
A. * Certificate of Completion – (First name, last name, training course title, date of completion, training company who issued the training, quiz score received)	<input type="checkbox"/>	<input type="checkbox"/>
B. * Passing score for participants	<input type="checkbox"/>	<input type="checkbox"/>