Texas Department of Agriculture
Private Pesticide Applicator
Training Verification and Exam
Nonoccupational

PA-404
D-1411

COMMISSIONER SID MILLER

SECTION A

¹ APPLICANT INFORMATION

Driver's License No. _____   If no Driver's License, enter State I.D. Card No. _____

Issuing state ☐ TX   ☐ Other   Issuing state ☐ TX   ☐ Other

First Name	M. I.	Last Name	Suffix

Address

City	State	Zip

Phone

(   )   -   Ext.

SECTION B

¹ TRAINING VERIFICATION - TO BE COMPLETED BY COURSE PROVIDER

City	County

Course Provider Name	Course Provider Signature

Affiliation: ☐ Texas AgriLife Extension   Training Date (mm/dd/yy)
☐ Other TDA Course Provider

SEC. C

¹ TEST ADMINISTRATION – TO BE COMPLETED BY TDA OFFICIAL ADMINISTERING TEST

Test Administrator Name (print)	Test Administrator Signature	PA Test Score	Test Date (mm/dd/yy)
			/ /