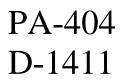


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Texas Department of Agriculture Private Pesticide Applicator Training Verification and Exam Nonoccupational



COMMISSIONER SID MILLER

	¹ APPLICANT INFORMATION							
	Driver's License No.	If no Driver's License, enter State I.D. Card No.						
SECTION A	Issuing state TX Other			Issuing state TX Other				
				M. I. Last Name			Suffix	
	Address							
ECT								
\mathbf{S}	2 City					State	Zip	
	Phone							
	() - Ext.							
B	¹ TRAINING VERIFICATION - TO BE COMPLETED BY COURSE PROVIDER							
	City	County						
N								
SECTION B	Course Provider Name		Course Provider Signature					
EC								
S	Affiliation: Texas AgriLife Extension		Training Date (mm/dd/yy)					
	Other TDA Course Provider							
С	¹ TEST ADMINISTRATION – TO BE COMPLETED BY TDA OFFICIAL ADMINISTERING TEST							
			strator Signature		PA Test Score	Test Date (mm/dd/yy)		
SEC.						/	/	

This document becomes a public record and is subject to disclosure. With few exceptions, you have the right to request and be informed about the information that the State of Texas collects about you. You are entitled to receive and review the information upon request. You also have the right to ask the state agency to correct any information that is determined to be incorrect. (Reference: Government Code, Sections 552.021, 552.023, and 559.004.)