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

PA-404
D-1411

COMMISSIONER SID MILLER

¹ APPLICANT INFORMATION				
SECTION A	Driver's License No. _____		If no Driver's License, enter State I.D. Card No. _____	
	Issuing state <input type="checkbox"/> TX <input type="checkbox"/> Other		Issuing state <input type="checkbox"/> TX <input type="checkbox"/> Other	
	First Name	M. I.	Last Name	Suffix
	Address			
	City		State	Zip
	Phone () - Ext.			

¹ TRAINING VERIFICATION - TO BE COMPLETED BY COURSE PROVIDER							
SECTION B	<table border="1"> <tr> <td>City</td> <td>County</td> </tr> <tr> <td>Course Provider Name</td> <td>Course Provider Signature</td> </tr> <tr> <td>Affiliation: <input type="checkbox"/> Texas AgriLife Extension <input type="checkbox"/> Other TDA Course Provider</td> <td>Training Date (mm/dd/yy)</td> </tr> </table>	City	County	Course Provider Name	Course Provider Signature	Affiliation: <input type="checkbox"/> Texas AgriLife Extension <input type="checkbox"/> Other TDA Course Provider	Training Date (mm/dd/yy)
City	County						
Course Provider Name	Course Provider Signature						
Affiliation: <input type="checkbox"/> Texas AgriLife Extension <input type="checkbox"/> Other TDA Course Provider	Training Date (mm/dd/yy)						

¹ TEST ADMINISTRATION – TO BE COMPLETED BY TDA OFFICIAL ADMINISTERING TEST				
SEC. C	Test Administrator Name (print)	Test Administrator Signature	PA Test Score	Test Date (mm/dd/yy) / /

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.)