



Texas Department of Agriculture
Texas Prescribed Burning Board
Training Verification

PBB-602

COMMISSIONER SID MILLER

| | | | | |
|------------------|---|------------|---|-----------|
| SECTION A | ¹ APPLICANT INFORMATION | | | |
| | <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. | First Name | M. I. | Last Name |
| | <input type="checkbox"/> Ms. <input type="checkbox"/> _____ | | | |
| | Social Security No. - - | | | |
| | ² MAILING ADDRESS | | | |
| | Address | | | |
| | City | State | Zip | |
| SECTION A | ³ CONTACT INFORMATION | | | |
| | Primary Phone () - | | Secondary Phone (optional) () - | |
| | Cell Phone (optional) () - | | Fax (optional) () - | |
| | E-mail (optional) | | Would you prefer to be contacted by E-mail? <input type="checkbox"/> Yes <input type="checkbox"/> No | |

| | | | |
|---------------------------|--|--|----------------------------|
| SECTION B | ¹ TRAINING VERIFICATION | | |
| | City | PBB Training Region | Date / / month day year |
| | ² TO BE COMPLETED BY COURSE PROVIDER | | |
| | Printed Name | | Test Score |
| Course Provider Signature | | <input type="checkbox"/> Certification Training <input type="checkbox"/> CEU Training | |

This document becomes 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.)