

APPLICATION FOR TECHNICIAN EXAM

For fastest service please email completed form and a photocopy of the technician training certificate to eligibility@texasagriculture.gov

Legal Name of Individual Applying for Certification _____				
Social Security Number† _____		Driver's License No. _____		Date of Birth _____
Home Location Address _____				
Street _____		City _____	State _____	Zip _____
Home Mailing Address _____				
Street _____		City _____	State _____	Zip _____
Home Tel. (____) _____		Date of Hire _____		
Email Address: _____ ***Important Note*** I understand that my email address is required for the Texas Department of Agriculture to keep me informed of critical information, including licensing and regulatory updates; renewal invoices; and other important communications. Failure to provide an email address may result in my not receiving time-sensitive information that could affect my compliance with state regulations, thereby, resulting in monetary penalties.				
<i>Note: You must be CURRENTLY registered with the Business/Employer below in order to test.</i>				

The Structural Pest Control Service performs criminal history searches on all license applicants and licensees, including those applying for renewal of an existing license. At minimum, criminal history information is sought from the Texas Department of Public Safety. This process may delay agency action on a license application, if the applicant's criminal history reveals an arrest for, conviction of, or a plea of guilty to a criminal offense. If an applicant's or licensee's criminal history reveals a conviction or plea of guilty to a criminal offense which relates to the occupation of structural pest control, the applicant will be asked to submit additional information to demonstrate the applicant's current fitness to be licensed. Failure to submit the requested information, submission of false or misleading information, or failure to demonstrate current fitness to be licensed may result in denial of the application or revocation of an existing license.

Name of Business/Employer _____		T.P.C.L.# _____ (if applicable)		
Business Telephone No. (____) _____		Business Fax No. (____) _____		Bus Email: _____
Location Address: _____				
Street _____		City _____	State _____	Zip _____
Mailing Address: _____				
Street or P.O. Box _____		City _____	State _____	Zip _____

SIGNATURE OF APPLICANT

DATE

- **APPLICANTS MUST ATTACH A COPY OF THE CERTIFICATE OF COMPLETION FROM THE TECHNICIAN TRAINING COURSE OR EMAIL.**
- **I HAVE READ AND UNDERSTAND THE STRUCTURAL PEST CONTROL ACT AND SPCS REGULATIONS.**
- **A WILLFUL MISSTATEMENT OF FACT ON THIS APPLICATION WILL CONSTITUTE GROUNDS FOR DENIAL, REVOCATION OR REFUSAL TO ISSUE A LICENSE.**

APPLICATION FOR EXAM REGISTRATION

1. Upon confirmation of your eligibility, you will be sent correspondence giving you instructions on scheduling the examination with the approved examination provider.
2. Examination fees are collected by the examination provider. DO NOT SEND EXAM FEES TO TDA site.
3. Study guides for these exams are available, at a cost, from the Texas A&M AgriLife Extension Service by calling (979) 845-1099 or from the web site www-aes.tamu.edu.
4. A list of approved technician training course providers can be found on the agency website www.texasagriculture.gov .

† A social security number is mandatory and required by Texas Family Code § 231.302 for this occupational license. Social security numbers are required to assist in child support enforcement. In the event the applicant does not have a social security number, an affidavit of no social security number (form OGC-001) must be attached and a driver license number or state-issued ID number provided. This form is available on our website www.TexasAgriculture.gov or by mail. Failure to provide a social security number or an affidavit of no social security number will result in rejection of your application and a license will not be issued to you.