

# **WEST VIRGINIA DEPARTMENT OF AGRICULTURE**

Pesticide Regulatory Programs Unit Regulatory & Environmental Affairs Division 1900 Kanawha Blvd., East Charleston, WV 25305-0190

For Office Use Only
Approved
Batch No. <u>6888-9670</u>
Scheduled date
Location

## **APPLICATION FOR EXAMINATION**

SECTION A: EXPERIENCE VERIFICATION					
I certify that is/was employed by as a					
pesticide applicator/distributor from to and qualifies for examination.  Date Date					
Please list applicant's <u>specific</u> pesticide application/storage/distribution duties below: (Name of pesticide, how it was applied/stored/distributed; Applicators - List pests treated.) Use additional sheets if necessary.					
This form must be signed by the person verifying the applicant's experience. THE APPLICANT MAY NOT SIGN HIS OR HER OWN EXPERIENCE FORM UNLESS OTHERWISE STATED.					
COMPANY/AGENCY NAME:					
Signature: Telephone number:					
Company Officer Supervisor Manager Other					
NOTARIZATION: STATE SEAL:					
State of:					
County of:					
The foregoing instrument was acknowledged before me on:					
By: (Printed name of person verifying applicant's experience.)					
Notary Signature: Notary Expiration:					

SECTION B: EDUCATION VERIFICATION
A degree or academic certificate acceptable to the Commissioner - In lieu of experience requirement, a degree or academic certificate in a biological field of study (i.e. Biology, Agronomy, Horticulture, etc.), other education applicable to the area of certification.
I,, wish to use my education in to qualify  for examination. A copy of my transcript of courses or outline of the technical or professional training program
is enclosed with this application.

#### SECTION C: COMBINATION OF EXPERIENCE AND EDUCATION VERIFICATION

Applicants who lack a full year's experience or a degree may submit copies of completion of training and proof of partial experience using Sections A & B. This information will be reviewed for consideration in fulfilling the education/experience requirements.

### This application must be fully completed or it will be returned!

Once completed, mail the application with a current copy of the applicant's driver's license and the \$20 exam fee (check or money order made payable to the West Virginia Department of Agriculture) to:

West Virginia Department of Agriculture Pesticide Regulatory Programs 1900 Kanawha Blvd. East Charleston WV 25305-0190

You will receive your approved and revised Admission Ticket by mail or email notifying you as to your qualification and the location and date you will test.

You must bring a copy of the revised Examination Admission ticket, along with a current photo identification, on the day of the exam.

FALSIFICATION OF THIS INFORMATION COULD LEAD TO REGULATORY ACTION. False swearing is a FELONY.

SECTION D: EXAMINATION ADMISSION T	TICKET PLEASE RETURN	PLEASE RETURN WITH A \$20.00 EXAM FEE & COPY OF DRIVER'S LICENSE		
Social Security Number	Current WV	Certification #	Today's Date	
Applicant Name		Phone #	Date of Birth	
Street Address		Email		
Suite/Apt	County	Company Name		
City State	Zip	Signature of Applicant		
Please circle the location at which	you would like to test.	. If you need directions,	call 304-558-2209.	
Charleston	Morgantown	Teays Val	lley	
Beckley	Parkersburg	Inwood	Inwood	
I need to take the exams circled belo	ow:			
LPAB (Licensed Pesticide Application GS General Standards Examination	•			
Agriculture Plant Pest Control	8A. General Pest	10. Regulatory	10. Regulatory	
2. Agricultural Animal Pest Control	8B. Structural Pest	11. Demonstration	11. Demonstration & Research	
3. Forest Pest Control	8C. General Fumigation	12. Pesticide Storag	12. Pesticide Storage & Distribution	
4. Ornamental & Turf	8D. Wood Preservation/	13. Predator Contro	13. Predator Control	
5. Seed Treatment	Wood Product Treatmen	nt 14. Aerial Pest Cont	14. Aerial Pest Control	
6. Aquatic Pest Control	8E. Urban IPM	15. Sewer Root Con	15. Sewer Root Control	
7. Right-of-Way/ Industrial Weed	9. Public Health			
	FOR OFFICE II			

#### FOR OFFICE USE ONLY

Your application to take the pesticide examination has been approved. You are scheduled at the location selected on at 8:30/9:00/9:30 am. If you cannot test on this day, you must call the Charleston office at (304) 558-2209 five days prior to your test date to reschedule. You may reschedule only once, then another application and fee is required. If you fail to report, your \$20.00 examination fee will be forfeited.

Complete & mail this application along with a current copy of the applicant's driver's license and the \$20.00\* exam fee (check or money order made payable to the West Virginia Department of Agriculture) to: West Virginia Department of Agriculture, Administrative Services Division, 1900 Kanawha Blvd., East, Charleston WV 25305-0190. \*City, state or government employees are exempt from any fees. Please send all FedEx, UPS, or USPS overnight deliveries to: WVDA - Pesticides, 281 Gus R. Douglass Lane, Charleston, WV 25312. You will receive your approved and revised Admission ticket by email to notify you of the location and test date.

> YOU MUST PRESENT A COPY OF THE REVISED EXAMINATION ADMISSION TICKET, ALONG WITH A CURRENT PHOTO IDENTIFICATION, ON THE DAY OF THE EXAM.