



**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>142-</u> _____	
Scheduled date _____	
Location _____	

**APPLICATION FOR EXAMINATION**

**SECTION A: Experience Verification**

I certify that \_\_\_\_\_ is/was employed  
Name of Applicant

by \_\_\_\_\_ as a  
Name of Business/Agency

pesticide applicator from \_\_\_\_\_ to \_\_\_\_\_ and qualifies for examination.

Please **list applicant's specific pesticide application duties** below: (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.**

COMPANY/AGENCY  
 NAME \_\_\_\_\_

SIGNATURE \_\_\_\_\_

Company Officer       Supervisor       Other \_\_\_\_\_

Telephone number: \_\_\_\_\_

**NOTARIZATION:**

State of \_\_\_\_\_  
 County of \_\_\_\_\_ }SS:

The foregoing instrument was acknowledged before me this \_\_\_\_\_

Date

by \_\_\_\_\_.

(name of person verifying applicant's experience)

My commission expires \_\_\_\_\_.

\_\_\_\_\_  
 Notary Public

**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 (Name of Applicant) \_\_\_\_\_ wish to use my education in (Field of study) \_\_\_\_\_ 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.

***Applications must be completely filled out or they will be returned to applicants!***

When completed, mail all of the application with your fee (check or money order made payable to: West Virginia Department of Agriculture) to the West Virginia Department of Agriculture, Pesticide Regulatory Programs, 1900 Kanawha Blvd., East, Charleston WV 25305-0190.

You will receive your approved Admission ticket by mail notifying you as to your qualification and the location and date you will test. **You must take the admission ticket with you to the exam location**

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

**SECTION D: Examination Admission ticket.**

**Please return with a \$20.00 fee.**

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Current WV Certification #

\_\_\_\_\_  
Today's Date

Phone \_\_\_\_\_ Fax# \_\_\_\_\_

\_\_\_\_\_  
**Print your name on the line above**

County \_\_\_\_\_

\_\_\_\_\_  
Print your mailing address on the line above

Employed by \_\_\_\_\_

\_\_\_\_\_  
Print your city, state & zip code on the line above

Signature \_\_\_\_\_

**Please circle the location at which you would like to test. If you need directions to that office, please call their number listed below.**

Charleston — 304-558-2209

Morgantown — 304-285-3215

Milton — 304-743-5236

Beckley — 304-256-6783

Parkersburg — 304-420-1026

Inwood — 304-229-5828

**I need to take the exams circled below:**

**LPAB** (Licensed Pesticide Application Business exam) - You need this IF you apply to the property of others for hire.

**GS** General Standards Examination -everyone must take this exam in addition to the category for the type of work you will perform.

1 - Agricultural Plant Pest Control

8A - General Pest

12 - Pesticide Storage & Distribution

2 - Agricultural Animal Pest Control

8B - Structural Pest

13A - Predator Control

3 - Forest Pest Control

8C - Fumigation

13B - Sewer Root Control

4A - Ornamental & Turf Outdoors

8D - Wood Treatment

13C - Hardwood Tree Release

4B - Ornamental Pest Control Indoors

8E - Urban IPM

13D - Mosquito Control

5 - Seed Treatment

9 - Public Health

13E - Black Fly Control

6 - Aquatic Pest Control

10 - Regulatory

11 - Demonstration & Research

7 - Right-of-Way/Industrial Weed

**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 a.m. If you cannot test on this day, you must call the Charleston office (304-558-2209) five days prior to your test day 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 your \$20.00\* fee (check or money order made payable to 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.

You will receive your approved Admission ticket by mail to notify you of the location and date you will test.

**You must take this admission ticket with you to the exam location.**

REVISED 04/2009