

ATTENDANCE SHEET

PRIVATE PESTICIDE APPLICATOR RECERTIFICATION

Private Applicators MUST provide complete information before credit will be given for the program.

Only Private Applicators wishing to receive credit toward recertification may sign this attendance sheet.

Program Number _____ County _____ Date _____

Signature	Printed Name (REQUIRED)	County of Residence	PA Number (REQUIRED)	Payment Received
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
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_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Extension Sponsor Signature _____ Sheet _____ of _____

Credit toward recertification will not be given unless the attendance sheet is filled out completely. Send all attendance sheets for this program to Purdue Pesticide Programs. In addition, please keep a copy of the attendance sheet in case it is requested.