

# Qualified Applicator License Application

The mailing address you indicate on this application is your address of record for your license, therefore it is public information. You may wish to use a post office box in lieu of a physical address.

**A. Application Type.** Check the appropriate box(es). For complete instructions, see page 2.

- New Application  
 (New Application Fee of \$60180 is required and a copy of valid government-issued documentation – See Instructions)
- Reexamination – Fail or No Show on Previous Exam
- Adding Pest Control Category(ies)

**B. Applicant Information.**

Name (Last)	(First)	Middle Initial)	Date of Birth (mm/dd/yyyy)	QAL Number (If applicable)
Mailing Address (Number and Street or PO Box)				Work Phone Number
(City)	(County)	(State)	(ZIP Code)	Cell or Home Phone Number
Current Employer (Check only one box)				E-Mail Address
<input type="checkbox"/> City	<input type="checkbox"/> County	<input type="checkbox"/> State	<input type="checkbox"/> Federal	<input type="checkbox"/> Pest Control Business
<input type="checkbox"/> Maintenance Gardener	<input type="checkbox"/> Other or N/A	<input type="checkbox"/> Private Business		
Employer Name and Mailing Address (If Applicable) (Number and Street or PO Box, City, State, ZIP Code)				

**C. Examination – Laws, Regulations, and Basic Principles.**

- Laws, Regulations, and Basic Principles **\$50115**  
 This examination must be passed along with one or more categories in Section D to obtain a QAL.
- No fee or examination is required if you:**
- (1) Have a valid PCA, APC, JPC, or QAL License/Certificate Number: \_\_\_\_\_
- or
- (2) Have passed this exam within the last 12 months Application #: \_\_\_\_\_

**D. Examination - Categories.** Indicate the examination(s) you want to take by checking the appropriate box(es). One or more of the following exams must be passed in addition to the exam in Section C to become a QAL. You may only select a maximum of four examinations per application (including Laws, Regulations, and Basic Principles).

- |  |  |
|--|--|
| <input type="checkbox"/> (A) Residential, Industrial, and Institutional <b>\$50115</b> | <input type="checkbox"/> (I) Animal Agriculture <b>\$50115</b>         |
| <input type="checkbox"/> (B) Landscape Maintenance <b>\$50115</b>                      | <input type="checkbox"/> (J) Demonstration and Research <b>\$50115</b> |
| <input type="checkbox"/> (C) Right-of-Way <b>\$50115</b>                               | <input type="checkbox"/> (K) Health Related <b>\$50115</b>             |
| <input type="checkbox"/> (D) Plant Agriculture <b>\$50115</b>                          | <input type="checkbox"/> (L) Soil Fumigation <b>\$50115</b>            |
| <input type="checkbox"/> (E) Forest <b>\$50115</b>                                     | <input type="checkbox"/> (M) Non-Soil Fumigation <b>\$50115</b>        |
| <input type="checkbox"/> (F) Aquatic <b>\$50115</b>                                    |  |
| <input type="checkbox"/> (G) Regulatory <b>\$50115</b>                                 |  |
| <input type="checkbox"/> (H) Seed Treatment <b>\$50115</b>                             |  |

**E. Examination Schedule.** To complete this section, see DPR's Web site for the examination schedule for available months and locations. DPR will assign the exam date. Your exam date and location choices are not guaranteed.

First Choice – Examination Month & Location	Second Choice – Examination Month & Location
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**F. Reasonable Accommodation.**

- Check if you need reasonable accommodation to take an exam.

**G. Fees. All fees are non-transferable and non-refundable.**

	Amount	# of Exams	Total Amount
- New Application Fee (Fee is valid for 12 months) (If required per Section A)	<b>\$80180</b>		\$ _____
- Laws, Regulations, and Basic Principles Examination Fee (If required per Section C)	<b>\$50115</b>		\$ _____
- Category Examination Fee(s) (If required per Section D) (Enter the # of categories)	<b>\$50115</b>	X _____	= \$ _____
	<b>Total Fees Due</b>		\$ _____

**H. Read Before Signing.** During the last three years have you had any administrative, civil, or criminal action taken against you for violation of any State or

federal laws or regulations relating to the application or use of pesticides that resulted in disciplinary action or in which any disciplinary action is pending?

Yes (Attach explanation on separate page)

No

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**I. I declare under penalty of perjury, under laws of the State of California, that the information submitted is true and correct.**

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Applicant Signature

Date Signed

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# Qualified Applicator License Application Instructions

## Failure to complete or provide the requested information may delay the processing of your application.

DPR will only disclose personally identifiable information, such as home phone number and personal email address, to third parties as required by state or federal law or regulation and consistent with the Information Practices Act (Civ. Code, sections 1798-1798.78).

**A. Application Type:** Check the appropriate box(es).

**New Application:** If you:

- ✓ \*Are applying for a Qualified Applicator License for the first time.
- ✓ Failed to obtain your license within 12 months from the first date of your scheduled examination.
- ✓ Failed to meet the renewal requirements.

\*Applications for a new license shall include an attached copy of valid government-issued documentation verifying that the applicant will meet the required minimum age of 18 years old prior to admission to the examination. The applicant's name included on the submitted application shall match the name stated on the valid government-issued documentation submitted.

**Reexamination:** Scheduling an examination on which you failed to obtain a passing score or failed to appear for a previously scheduled examination.

**Add Pest Control Category(ies):** Requesting to take pest control category examinations not yet taken. If passed, the category(ies) will be added to your existing license.

**B. Applicant Information:** Enter your name (name shall match the submitted valid government-issued documentation); Qualified Applicator License or Application Number (if applicable); date of birth; mailing address; E-Mail address; cell or home and work phone numbers; employment type; and current employer (if applicable).

**C. Examination - Laws, Regulations, and Basic Principles:** This examination is required of all new QAL applicants. Exemption: (Check the appropriate box, if applicable). No fee or examination is required if you: have a valid Pest Control Adviser License (PCA), Journeyman Pilot Certificate (JPC), Apprentice Pilot Certificate (APC), or Qualified Applicator License (QAL). To qualify for this exemption, you must enter the number from your current license or certificate next to the (1) exemption, or (2) have passed the Laws, Regulations, and Basic Principles exam within the last 12 months. A Qualified Applicator Certificate (QAC) does not meet the exemption requirements.

**D. Examination - Categories:** Indicate the category(ies) you want to take by checking the appropriate box(es). In addition to the Laws, Regulations, and Basic Principles examination, each new applicant must successfully pass at least one of the pest control categories (A-M) before a Qualified Applicator License is issued. You may only select a maximum of four examinations per application, including the Laws, Regulations, and Basic Principles examination. You may only apply once per month, exceptions to this are evaluated on a case by case basis. [See Go to DPR's Web site to find Qualified Applicator License category descriptions and suggested study material source list in the Qualified Applicator License Application Packet at <www.cdpr.ca.gov/docs/license/app\\_packets/qal.pdf>.](#)

**E. Examination Schedule:** Provide your first and second choice for taking your exam(s). Indicate the exam month and location for each choice in the appropriate boxes. Your exam date and location choices are not guaranteed. Go to DPR's Web site to find [current exam information](#). If you selected an exam date, your application must be postmarked by the final filing date for the earliest choice you provided. DPR will assign your exam date.

**F. Reasonable Accommodation:** Reasonable accommodation will be provided to applicants who need assistance to take an exam. If you check "Yes", you will be contacted.

**G. Fees: All fees are non-transferable and non-refundable.**  
New Application Fee: ~~\$80~~180.....(See Section A)  
Laws, Regulations, and Basic Principles Examination Fee: ~~\$50~~115.....(See Section C)  
Category Examination Fee(s): ~~\$50~~115 per exam .....(See Section D)

**H. Read Before Signing:** Check appropriate box and provide explanation on separate page, if necessary.

**I. Declaration/Signature Block:** Sign here to indicate that all of the information submitted is true and correct.

**Mailing Instructions:** Enclose a check, money order, or credit card information payable to "Cashier, DPR" and mail to:

Department of Pesticide Regulation  
Attn: Cashier MS-4A  
PO Box 4015  
Sacramento, CA 95812-4015