## STATE OF CALIFORNIA State of California AGRICULTURAL PEST CONTROL ADVISER LICENSE APPLICATION **Agricultural Pest Control Adviser License Application**

DPR-PML-LIC-084 (REVev. 01/1807/23)

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**DEPARTMENT OF PESTICIDE REGULATION**Department of Pesticide Regulation PEST MANAGEMENT AND LICENSING BRANCH **LICENSING AND CERTIFICATION** PROGRAMLicensing and Certification Program P.O. BOXPO Box 4015 SACRAMENTO, CASacramento, California 95812-

4015 (916) 445-4038

E-Mail: LicenseMail@cdpr.ca.gov

he mailing address you indicate on this application is your address of record for your license <sub>r:</sub> nerefore <u>.</u> it is public information. You may wish to use a post office box in lieu of a physical address.						Web site: http://www.cdpr.ca.		
. Application Type.A. Application Type. Check	k the appropriate	e box(es).	FOR COMPLETE	INSTRUCTION	S, SEE PAGEFor C	omplete	e Instructions, See Page 2.	
NEW APPLICATIONNew Application (New application fee of \$80 is required in Section G) (New application fee of \$80 is required and a copy of valid government-issued documentation – See Instructions)	of L Of	N PREVIOU	FION - FAIL OR N IS EXAMReexami ow on Previous Ex	<u>nation –</u>	ADDING PEST Control Catego		ROL CATEGORY(IES)Adding Pes	
B. Applicant Information.B. Applicant Info	rmation							
NAME (Last)Name (Last)	(First)(First)	(Middle	- <i>Initial)</i> (Middle Initial)		MBER/APPLICATIC ate of Birth (mm/dd/		HOME PHONE NUMBERAdvise License Number (If Applicable)	
AAILING ADDRESS (Number and Street or P.O. ex)Mailing Address (Number and Street or PO Box)							WORK PHONE NUMBER Work Phone Number	
City)(City)	(County)(County)			(State)(State)	<del>(ZIP Code)</del> (ZIP C	ode)	CELL PHONE NUMBERCell or Home Phone	
EMPLOYER NAME AND MAILING ADDRESSEmployer I	Name and Mailing	Address (If	Applicable) (Numl	Der and Street or	P-O- Box, City, Sta	ite, <del>Zip</del>	E-MAIL ADDRESSE-Mail Address	
C. Examination - Laws, Regulations and Basic Basic Principles (includes integrated pest n			grated Pest Ma	nagement Pri	inciples).C. Exar	ninatio	n – Laws, Regulations, and	
Laws, Regulations, and Basic Principles Ex  This examination must be passed in addition to a categories in Section D below to obtain a PCA examination must be passed in addition to one	t <del>o one or more</del> ⊩ <u>This</u>		*Exemption: No exam within the I		equired if you have	passed t	this_	
categories in Section D to obtain a PCA.								
examination, <u>you may only select</u> a maximum of the (A) Insects, Mites, and Other Invertebrates  (B) Plant Pathogens \$50			(D) Vertebrate (E) Weed Conf	Pests <b>\$50</b>			ant Growth Regulators <b>\$50</b>	
(C) Nematodes \$50			(F) Defoliation	\$50				
E. Examination Schedule. E. Examination Schelocations. DPR will assign the exam date. Your					the examination s	chedule	e for available months and	
FIRST CHOICE - EXAMINATION MONTH & LOCATION MONTH & LOCATION				HOICE - EXAMIN	NATION MONTH &	LOCATI	ONSecond Choice – Examination	
F. Reasonable Accommodation-F. Reasonable	Accommodation	<u>on.</u>						
Check if you need reasonable accommodat	ion to take a <u>n</u> ₩	<del>ritten e</del> xam	۱.					
G. Fees. All fees are non-transferable and non-refun	dable.G. Fees. A	All fees are	non-transferable	and non-refund	dable. (Make check	payable	to "DPR Cashier")	
<ul> <li>New Application Fee (Fee is valid for 12 month (If required per Section A)</li> <li>Laws, Regulations, and Basic Principles Ex</li> <li>Category(ies) Examination Fee(s) (If require</li> </ul>	amination Fee (I			<u>Amour</u> \$80 \$50 \$50	x	:	Total Amount  \$  \$  = \$	
(Enter the # of categories)						Total F	Fees Due \$	
H. Read Before Signing-H. Read Before Signing for violation of any State or federal laws or regulationary action is pending?		-	-			ninal ac	ction taken against you	
YESYes (Attach explanation on separate page	e,if necessary.)			N	<del>O</del> No			
I declare under penalty of perjury, under laws			•		itted is true and	correct	t.l. I declare under penalty o	
DDI ICANT CIONATI IDEA policant Cignature	mat the mioni	nation Sul	milieu is true		SIGNED Data Signa	al		

## AGRICULTURAL PEST CONTROL ADVISER LICENSE APPLICATION INSTRUCTIONS Agricultural Pest Control Adviser License Application Instructions

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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:

New Application: If you:

- ✓ \*Are applying for an Agricultural Pest Control Adviser (PCA) license for the first time.
- Failed to obtain your license within 12 months from the first date you scheduled your 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.

Minimum education requirements must be met. Submit a copy of your official college/university transcripts, along with the completed Core Course Requirements form.

**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); Adviser License or Application Number (if applicable); date of birth; mailing address; email E-Mail address; home; work; and cell or home phone numbers; and current employer (if applicable).
- C. Examination Laws, Regulations, and Basic Principles (includes Integrated Pest Management Principles): This examination is required of all new PCA applicants. The Laws, Regulations, and Basic Principles examination for any other DPR license or certificate does not exempt you from this exam.

Exemption: If you have passed this exam within the past 12 months.

- D. Examination Category(ies): 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-G) before an Agricultural Pest Control Adviser License is issued. A maximum of four (4)-examinations may be scheduled per locationapplication. and you may only test once per month. If you are requesting the Laws, Regulations, and Basic Principles examination, a maximum of three (3)-total examinations (including the Laws, Regulations, and Basic Principles examination) may be scheduled per locationapplication. You may only apply once per month; exceptions to this are evaluated on a case by case basis.
- 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. Exam month and location options may be obtained from options may be obtained from options may be obtained from options. The examination schedule gives the location, schedule, and final filing dates. If you selected an exam date, Yyour 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 written exam. If you check "Yes", you will be contacted via phone, e-mail, or mail.
- G. Fees: All fees are non-transferable and non-refundable.

- H. Read Before Signing: Check appropriate box and provide explanation on separate page, if necessary.
- I. Declaration/Signature Block: Sign and date your application. Sign here to indicate that the information submitted is true and correct.

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

Cashier, Department of Pesticide Regulation P.O. Box 4015-Sacramento, California 95812 4015.

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