CATEGORY TRAINING VERIFICATION FORM
for COMMERCIAL PESTICIDE APPLICATORS

→ Use this form only when applying for a CATEGORY EXAM ←

Training is not required if you are applying for an exam for recertification purposes or for Category 10 or 13. Please list below ONLY those categories in which you have been trained, and intend to add to your license through this exam process:

List Categories here:________________________________________________________

PLEASE CHECK APPROPRIATE BOX BELOW:

☐ YES, I have completed the 40 hours of “On-The-Job Category Training” (OJT) with a Pesticide Applicator licensed in the category I wish to test in, and I have performed/witnessed the minimum number of pesticide applications required by NJAC 7:30-6.2 in that category.

☐ NO, I have not completed the 40 hours of “On-The-Job Category Training” (OJT) because it is NOT available to me. (Note: You may not use this option for categories 3A, 3B, 7A, 7B & 8B. You must take a training course in lieu of the 40 hours of OJT.)

Why Isn’t Training Available To You?
Please check reason below:

☐ I am currently unemployed.
☐ I am starting a new business.
☐ I do not have a qualified trainer available.
☐ Other reason: __________________________________________________________

APPLICANT’S NAME (print): ________________________________________________

APPLICANT’S SIGNATURE: ___________________________ DATE: ______________

TRAINER’S NAME (print): ________________________________________________

TRAINER’S Pesticide Applicator License #: ________________________________

TRAINER’S SIGNATURE: ___________________________ DATE: ______________

• SUBMIT THIS FORM ONLY WITH THE APPLICATION FOR A CATEGORY EXAM.
• COMPLETE AFFIDAVIT (VPE-001) IF YOU HAVE A MINIMUM OF ONE-YEAR WORK EXPERIENCE IN THE CATEGORY APPLIED FOR.
• OPERATORS CANNOT USE THE AFFIDAVIT FORM AS PROOF OF TRAINING.
• DO NOT COMPLETE THIS FORM WHEN USING THE AFFIDAVIT.