REQUEST FOR SEMINAR PESTICIDE CREDITS
(SUBMIT THIRTY (30) DAYS PRIOR TO THE DATE OF SESSION)

Date submitted:

REQUESTOR'S INFORMATION

Person requesting credits:
Business name:
Affiliation:
Phone #: Fax #: E-mail:
Street Address:
City: State: Zip: County:

MEETING INFORMATION

Meeting title:
Date(s) of meeting:
Is this a private meeting? If yes, it will not appear in or web-site: yes no

Phone number for meeting inquiries/registration:
Facility name if any:
Street address:
City: State: Zip: County:

CREDIT INFORMATION

Requested number of credits (note: 1 credit per hour of training):

Requested certification categories (look at your agenda topics and determine which category or categories it covers, such as core, category specific, or both), see examples on next page.

Anticipated number of participants who might request credit:

Please note that as part of the certification attendance program, MDARD inspectors will make periodic visits to monitor training sessions for adherence to agenda time and requested categories.

I, the requestor, agree to comply with the stipulations in the guidelines for conducting training seminars _____ initial _____
**CORE TOPICS (commercial or private):** these topics are related to pesticide use and are generic in nature. Some examples may include pesticides and human health, pesticides in the environment, pesticide label review, personal protective equipment, pesticide application equipment, equipment calibration, pesticide laws and regulations, record keeping, etc. **You may use the core manual as guide for core topics.**

**CATEGORY SPECIFIC TOPICS:** these topics are related to the management of plant pests and diseases. Some examples may include, pest and disease ID, pest/disease biology, pest/disease monitoring, pest/disease control strategies, weed control, IPM, etc. You may use category specific manuals as guide for category topics.

**NOTE:** fertilizer, business, sales, marketing, or market analysis topics do not qualify for pesticide recertification credits.

**AGENDA**

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<tr>
<th>TIME</th>
<th>DESCRIPTION OF TOPICS</th>
<th>SPEAKER</th>
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For MDARD Use Only:

___ Approved  Number of Credits ___  Categories _____________

___ Denied  Reason _____