APPLICATION FOR EXAMINATION

This application for examination and a fee of $5 per exam shall be submitted prior to taking Commercial or Dealer exams. Checks should be made payable to the Treasurer, State of New Hampshire.

Check the examinations you are taking:

LEVEL: ______SUPERVISORY ______OPERATIONAL

___A1 AGRICULTURAL PEST CONTROL - FRUIT
___A2 AGRICULTURAL PEST CONTROL - HERBICIDES
___A3 AGRICULTURAL PEST CONTROL – FIELD CROPS
___A4 AGRICULTURAL PEST CONTROL - ANIMALS
___B RIGHT-OF-WAY, AND COMMERCIAL WEED & BRUSH CONTROL
___C1 FOREST PEST CONTROL AND TIMBER TREATMENT
___C2 CHRISTMAS TREES
___D AQUATIC PEST CONTROL
___E PUBLIC HEALTH PEST CONTROL
___F1 GENERAL PEST CONTROL
___F2 MOSQUITO AND BLACK FLY
___F3 TERMITES AND WOOD DESTROYING INSECTS
___F4 FUMIGATION
___F5 POLE TREATING AND WOOD PRESERVATION
___F6 FOOD HANDLERS
___F7 TREE ROOT CONTROL ON SANITARY SEWER PIPES
___F8 MICROBIAL PEST CONTROL
___G1 SHADE AND ORNAMENTAL PEST CONTROL
___G2 TURF PEST CONTROL
___G3 INDOOR FOLIAR PEST CONTROL
___H DEMONSTRATION AND RESEARCH PEST CONTROL
___J AERIAL PEST CONTROL

___ DEALER EXAM
___ WORKER PROTECTION EXAMINATION

___ RETEST ON RULES AND REGULATIONS EXAMINATION
___ RETEST ON CORE EXAMINATION

TOTAL AMOUNT PAID: ______________________ DATE: ________________________________

NAME: __________________________________________________________

ADDRESS: _______________________________________________________

______________________________________________________________

SIGNATURE: ____________________________________________________