

# Kentucky Department of Agriculture

Division of Environmental Services  
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## AGRICULTURAL PESTICIDE APPLICATOR CERTIFICATION CEU REQUEST FORM

### COURSE INFORMATION

DATE OF COURSE FROM: \_\_\_\_\_ TO: \_\_\_\_\_

TITLE OF COURSE: \_\_\_\_\_

LOCATION: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

EMAIL: \_\_\_\_\_

### CEU INFORMATION

Day/Session 1: GENERAL HOURS: \_\_\_\_\_  
SPECIFIC CATEGORY: \_\_\_\_\_ HOURS: \_\_\_\_\_

Day/Session 2: GENERAL HOURS: \_\_\_\_\_  
SPECIFIC CATEGORY: \_\_\_\_\_ HOURS: \_\_\_\_\_

Day/Session 3: GENERAL HOURS: \_\_\_\_\_  
SPECIFIC CATEGORY: \_\_\_\_\_ HOURS: \_\_\_\_\_

Day/Session 4: GENERAL HOURS: \_\_\_\_\_  
SPECIFIC CATEGORY: \_\_\_\_\_ HOURS: \_\_\_\_\_

Day/Session 5: GENERAL HOURS: \_\_\_\_\_  
SPECIFIC CATEGORY: \_\_\_\_\_ HOURS: \_\_\_\_\_

DO YOU WISH FOR THIS TO BE POSTED TO OUR WEBSITE? YES  NO

### SUBMISSION INFORMATION

- Please submit this form and the agenda for the training course to David Wayne at [david.wayne@ky.gov](mailto:david.wayne@ky.gov).
- Upon approval a letter and sign in sheet will be sent to the email submitted above.
- For questions please call (502) 573-0282

### DEPARTMENT USE ONLY

GENERAL HRS \_\_\_\_\_

SPECIFIC CATEGORIES \_\_\_\_\_

SPECIFIC HOURS \_\_\_\_\_

APPROVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

COURSE NUMBER: \_\_\_\_\_