

WRITTEN TRAINING PROGRAM

Employer Name: _____

Trainer's Name: _____

Trainer's Qualification: _____ PA: _____ QAL/QAC: _____ PCA: _____

Training Materials:

Name of videos, pamphlets, or other training materials, and a brief description:

1. _____
2. _____
3. _____
4. _____

Pesticide labeling from the following products:

Pesticide Safety Information Series (PSIS) leaflets used:

Materials Safety Data Sheets (MSDS) for the following products:
