



**PEST CONTROL INDUSTRY
WE NEED YOUR HELP!
November 2017**

The Structural Pest Control Board (SPCB) is looking for individuals who would like to participate in upcoming examination development workshops throughout the next year. Participation at these workshops provides a unique opportunity for you to help us create and develop questions for our licensing exams that are relevant and comprehensive to the industry.

Throughout the next year, several two-day examination development workshops will be held in Sacramento. These workshops will bring together licensees from all over California. Most licensees who attend these workshops report that this experience is both rewarding and enjoyable. Workshop participants receive a \$300 payment for their two-day participation and are reimbursed for SPCB-approved transportation, lodging and meals. The SPCB pays directly for flights and rental cars. Field Representatives and Operators will earn 8 hours of continuing education (6 hours technical and 2 hours Rules and Regulations) per two-day workshop. Applicators will earn 8 hours of continuing education (6 hours Pesticide Use and Application and 2 hours Rules and Regulations) per two-day workshop.

We are currently creating a list of interested licensees to participate in the developmental process of our exams. Interested licensees must hold an active license that is in good standing with the Board. Once SPCB has received a workshop interest form, the license is reviewed thoroughly in order to determine eligibility of the participant. SPCB will then notify you by email of upcoming workshops.

If you wish to be included in this unique opportunity, please complete the backside of this letter and fax it to (916) 263-2469 or mail it to the SPCB at your earliest convenience. If you prefer, you can call the SPCB at (916) 561-8700 to speak with someone directly.

Your input can make a real difference in the testing of future licensees. We look forward to hearing from you.

Sincerely,

A handwritten signature in blue ink that reads "Susan Saylor".

Susan Saylor
Executive Officer

WORKSHOP INTEREST FORM

Name: _____

LICENSE TYPE	LICENSE NUMBER	ACTIVE STATUS
Applicator	RA	Yes <input type="checkbox"/> No <input type="checkbox"/>
Company Name:		
Field Representative	FR	Yes <input type="checkbox"/> No <input type="checkbox"/>
Company Name:		
Operator	OPR	Yes <input type="checkbox"/> No <input type="checkbox"/>
Company Name:		
CONTACT INFORMATION		
Telephone Number		
E-Mail Address		
PRELIMINARY QUESTIONNAIRE		
1. Are you actively working in the industry?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
2. Are you a SPCB approved continuing education provider?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
3. Are you a trainer for a pest control company?	Yes* <input type="checkbox"/> No <input type="checkbox"/>	
*If you answered yes to question 3, please provide an explanation of the training provided:		

Please choose one of the following methods to return your interest form to the SPCB:

Email

SPCBWorkshops@dca.ca.gov

Mail

2005 Evergreen Street, Suite 1500
Sacramento, CA 95815

Fax

(916) 263-2469

You may also call the SPCB directly at (916) 561-8700 to express interest in the workshops or for any questions.