EVALUATION: Pesticide Applicator Recertification Course

Course Title and Date: NAME / TITLE -- DATE

Course Organizer: NAME/VCE UNIT or DEPARTMENT/AFFILIATION

**1.** Pesticide applicator type: 🞎 Private 🞎 Commercial 🞎 Registered Technician

**2.** As a result of attending this state-required pesticide recertification course:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Strongly Agree** | **Agree** | **Neither Agree or Disagree** | **Disagree** | **Strongly Disagree** |
| I know what I need to do to comply with state and federal laws and regulations |  |  |  |  |  |
| I will read pesticide labels and follow all instructions for use, storage, and disposal |  |  |  |  |  |
| I know what I need to do to keep myself, others, and the environment safe when handling pesticides |  |  |  |  |  |
| I have learned more about pesticide application techniques, such as equipment, calibration, and maintenance |  |  |  |  |  |
| I have learned more about important pests, and methods for their control |  |  |  |  |  |

**3.** As a result of attending this state-required pesticide recertification course: (\*Agents: make a program-specific table with questions relevant to your course.)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Strongly Agree** | **Agree** | **Neither Agree or Disagree** | **Disagree** | **Strongly Disagree** |
| I can interpret the different parts of a typical pesticide label and describe the information and instructions they contain |  |  |  |  |  |
| I can explain the problem of pesticide resistance and how to prevent it |  |  |  |  |  |
| I know the different pesticide formulations and how to choose the one best suited for the job |  |  |  |  |  |
| I can recognize sensitive areas at or near the site of a pesticide application |  |  |  |  |  |
| I can list some signs and symptoms of pesticide poisioning and/or injury |  |  |  |  |  |
| I can determine how much pesticide concentrate and diluent to use when a making a spray application |  |  |  |  |  |
| I know how to configure my sprayer to minimize drift |  |  |  |  |  |

**4.** What part of this course was most helpful?

**5.** How could this course be improved?

**6.** What overall rating would you give this course? excellent good fair poor

**7.** Please rank your preference for earning pesticide applicator recertification credits, where **1 = most preferred and 4 = least preferred**.

|  |  |
| --- | --- |
| **Recertification Options** | **Rank** |
| Online, in a self-paced course |  |
| Online, during a live webinar |  |
| In person, in a dedicated course |  |
| In person, as part of attending a professional conference/meeting |  |

Comments/suggested topics for future courses:

***Farm owners/operators/managers – Please complete this section:***

**8.** Rate how your overall pesticide use (number of sprays/season for all insecticide, fungicide, and herbicide products) has changed over the last 5 years.

🞎 Decreased

🞎 Unchanged

🞎 Increased

**9.** If pest monitoring (checking traps, visual inspection, etc.) is conducted on your farm by you

or someone else, indicate how often:

🞎 I don’t monitor

🞎 once/month

🞎 every other week

🞎 once or more/week

**10.** Do you consider yourself a practitioner of integrated pest management (IPM)?

🞎 Yes – at a minimum this includes: regular pest monitoring; use pesticides only when

necessary; rotate pesticide modes of action; calibrate sprayer; and follow

pesticide regulations

🞎 No

**11.** If you do not use IPM, what are the reasons:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Strongly Agree** | **Agree** | **Neither Agree or Disagree** | **Disagree** | **Strongly Disagree** |
| Lack of knowledge and training |  |  |  |  |  |
| Pest pressure too high |  |  |  |  |  |
| Greater time investment required |  |  |  |  |  |
| Greater cost |  |  |  |  |  |
| Lack of qualified labor |  |  |  |  |  |
| I am not interested in using IPM |  |  |  |  |  |

**12.** List the top pest problems you have faced on your farm in the last 5 years, and circle the rate of economic severity of each pest you list.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Crop** | **Pest** | **Minor costs** | **Moderate costs** | **Severe costs** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |