

**APPLICATION FOR
 STRUCTURAL PEST CONTROL
 APPLICATOR EXAMINATION AND LICENSE
 LICENSE FEE \$10
 (Effective 1/1/2007)**

(Remit by money order, cashier's, personal or certified check payable to the Structural Pest Control Board.)

FOR BOARD USE ONLY	
ATS No.	_____
Checked By	_____
Effective Date	_____
License No.	_____

INSTRUCTIONS:

- Each question must be fully and truthfully answered.
- Attach sheets to this application wherever so directed or when space provided is not sufficient.
- An incomplete application will be returned to the applicant.
- A \$10 license fee must be included with this application.

PLEASE NOTE:

- State law requires an applicant to complete the Live Scan/fingerprint process for the purpose of conducting criminal history record checks prior to licensure.

PLEASE PRINT OR TYPE **DATE OF BIRTH** _____
DRIVERS LICENSE NO. _____

1. Name of Applicant	(First)	(Middle)	(Last)
2. Residence Address:	(Street)	Telephone Number Area Code ()	
(City)	(State)	(Zip)	
Mailing Address:	(Street)		
(City)	(State)	(Zip)	
3. Employed by:			
Employer's Address:	(Official Address of Record)	Telephone Number Area Code ()	
(City)	(State)	(Zip)	
<p>4. Disclosure of your social security number (SSN) is mandatory. Section 30 of the Business and Professions Code and Public Law 94-455 (42 USCA 405(c)(2)(C)) authorizes collection of your SSN. Your SSN will be used exclusively for tax enforcement purposes, for purposes of compliance with any judgment or order for family support in accordance with Family Code Section 17520, or for verification of licensure or examination status by a licensing or examination entity which utilizes a national examination and where licensure is reciprocal with the requesting state. If you fail to disclose your SSN, your application for an initial license will not be processed AND you will be reported to the Franchise Tax Board, which may assess a \$100 penalty against you.</p> <p>SOCIAL SECURITY NUMBER:</p>			
5. Are you 18 years of age or older?	YES <input type="checkbox"/>		NO <input type="checkbox"/>
6. Have you ever applied for the applicator examination?	YES <input type="checkbox"/>		NO <input type="checkbox"/>
If YES, when? _____			
7. Are you presently licensed or have you previously been licensed as a structural pest control applicator, field representative or an operator in the State of California?	YES <input type="checkbox"/>		NO <input type="checkbox"/>
If YES, state license number(s) _____			

8. Have you had a professional or vocational license denied, suspended, or revoked by this or any other state? (If YES, attach signed detailed statement.)	YES <input type="checkbox"/> NO <input type="checkbox"/>
9. Have you ever been found to be in violation of any provision of the Structural Pest Control Act? If YES, attach signed detailed statement.)	YES <input type="checkbox"/> NO <input type="checkbox"/>
10. Do you have any pending disciplinary action against you in regards to a structural pest control professional or vocational license in this or any other state? If YES, explain _____	YES <input type="checkbox"/> NO <input type="checkbox"/>
11. Have you ever been convicted of a felony or of a misdemeanor other than minor traffic infractions? (Minor traffic violations resulting in a fine of \$300.00 or less do not need to be disclosed.) (If YES, attach signed detailed statement regarding all felonies and misdemeanor convictions.)	YES <input type="checkbox"/> NO <input type="checkbox"/>

VIOLATION OF THE SECURITY OF THE EXAMINATION, INCLUDING CHEATING ON AN EXAMINATION, IS A MISDEMEANOR. IF YOU ARE FOUND GUILTY, YOU COULD RECEIVE A FINE, A JAIL SENTENCE OR BOTH. IT IS ALSO REASON FOR DISQUALIFICATION FROM THE EXAMINATION AND DENIAL OF A LICENSE.

IF YOU VIOLATE THE SECURITY OF THE EXAMINATION AND ARE FOUND GUILTY, IN ADDITION TO OTHER PENALTIES, YOU WILL BE HELD LIABLE FOR ACTUAL DAMAGES CAUSED TO THE STRUCTURAL PEST CONTROL BOARD FOR UP TO \$10,000 AND THE COSTS OF LITIGATION (BUSINESS AND PROFESSIONS CODE SECTION 123).

SOME VIOLATIONS OF EXAMINATION SECURITY ARE:

- Removing examination materials from examination rooms
- Copying any portion of the examination materials
- Talking to any other candidate during the examination
- Copying answers from another candidate
- Allowing another person to copy your answers
- Having books, notes, etc. during the examination
- Taking the examination for someone else
- Letting someone else take your examination
- Memorizing questions or answers from the examination to share with others
- Getting examination questions or other materials before, during or after the examination
- Selling, buying, receiving any portion of a future, current or previously administered examination

The information on this application is required pursuant to Section 8560 and following of the Business and Professions Code. All information requested in this application is mandatory, none is voluntary. Failure to provide any of the requested information will result in the application being rejected as incomplete. The information you furnish will be used to determine whether you do or do not meet the requirements for which you are applying. The information you provide may be transferred to other governmental and law enforcement agencies and may be disclosed upon a Public Records Act request made pursuant to Section 6250 of the Government Code. You have a right of access to records maintained by this agency which contain personal information about you subject to the provisions of the Information Practices Act. (§1798 et. seq of the Civil Code) The information is maintained by the Structural Pest Control Board, 2005 Evergreen Street, Suite 1500, Sacramento, CA 95815-3831; telephone 916/561-8704. The Registrar of the Board is the Custodian of Records.

CERTIFIED TRUE STATEMENT

I have read and understand the above and I certify under penalty of perjury under the laws of the State of California to the truth and accuracy of all statements and representations made in this application, including all statements attached hereto. I understand that falsifying information on this application may result in the denial of this application or the revocation of this license.

	Attach 2" x 2" photo here
Signature of Applicant	
Date	