

# WYOMING PRIVATE PESTICIDE APPLICATOR TRAINING PROGRAM

DATE \_\_\_\_\_

LOCATION \_\_\_\_\_

1. Please provide an overall rating of this training program:  
 Very Good  
 Good  
 Fair  
 Poor
2. Did this program meet your expectations for information relevant to the safe and proper use of pesticides?  
 Yes  
 No
3. If no, what additional information is needed?
4. Do you feel this training prepared you to become a certified applicator?  
 Yes  
 No
5. If no, how would you strengthen the training?
6. What change in your use of pesticides will you make because you attended this training program?
7. Overall comments:

**THANK YOU FOR YOUR COOPERATION**