

WORKER PROTECTION STANDARD TRAINING and DEC SPECIAL PERMIT TRAINING

for non-certified applicators and handlers of federally restricted-use pesticides

SAME CHANGES TO PROGRAM AS IN 2016-2018

April 9, 2019
WAYNE COUNTY

April 10, 2019
ORLEANS COUNTY

English 8:30 AM registration; 9:00 AM - 12:30 PM
Spanish 1:00 PM registration; 1:30 PM - 5:00 PM

English & Spanish 8:00 AM registration;
8:30 AM - 12:00 Noon

Cornell Cooperative Extension Wayne County
1581 Route 88N, Newark, NY 14513

Orleans County Cooperative Extension
Fairgrounds Trolley Building
12690 Route 31, Albion, NY 14411

Certified Supervisors are required to attend the first 30 minutes of training.

Just like last year, **Special Permits (SP) will only be issued for 11 specific pesticide labels and SP trainees will have to pass a test.** This will relieve the certified pesticide applicator from “on-site within voice contact” supervision of non-certified pesticide applicators when they are handling federally-restricted-use pesticides for which they hold a Special Permit. The labels that will be covered include **Lorsban Advanced, Endigo ZC, Warrior II with Zeon Technology, Agri-Mek SC, Beseige, Gramoxone SL 2.0, Leverage 360, Danitol 2.4EC, Mustang Maxx, Asana XL, and Lannate LV.**

New York DEC notes that the **Special Permit process is intended for farm workers with English language skills that are not adequate to pass the DEC private applicators exam.** All others are encouraged to apply for their private applicators license via taking the certification exam.

Workers requiring **general pesticide training/Agricultural Worker Protection Standard Handler training** who do **not need special permits** are welcome to take the class; they will not be tested and will receive a course participation certificate.

\$20 per DEC Special Permit / General Pesticide Training

Pre-registration required by April 5, 2019. After April 5, a late fee of \$20 will be required for each registrant.

REGISTER BY MAIL using the form below or CALL Kim Hazel, 585-798-4265 x26, with all details and pay at the door.

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WORKER PROTECTION STANDARD TRAINING and DEC SPECIAL PERMIT TRAINING

This training is being offered in 2 locations. **CHOOSE THE LOCATION you wish to attend ==>** Wayne Co. Orleans Co.

Farm Name _____

Farm Address _____

Name of Supervising Pesticide Applicator _____

Supervisor's DEC Pesticide Applicator ID No. _____

Name of non-certified applicator(s): \$20 each, choose session. (Special Permit as opposed to general pesticide training.):

_____	<input type="checkbox"/> English	<input type="checkbox"/> Spanish	<input type="checkbox"/> Special Permit
_____	<input type="checkbox"/> English	<input type="checkbox"/> Spanish	<input type="checkbox"/> Special Permit
_____	<input type="checkbox"/> English	<input type="checkbox"/> Spanish	<input type="checkbox"/> Special Permit
_____	<input type="checkbox"/> English	<input type="checkbox"/> Spanish	<input type="checkbox"/> Special Permit
_____	<input type="checkbox"/> English	<input type="checkbox"/> Spanish	<input type="checkbox"/> Special Permit
_____	<input type="checkbox"/> English	<input type="checkbox"/> Spanish	<input type="checkbox"/> Special Permit
_____	<input type="checkbox"/> English	<input type="checkbox"/> Spanish	<input type="checkbox"/> Special Permit

TOTAL AMOUNT DUE: No. applicators/handlers _____ X \$20 = \$ _____

Make check payable to: **Cornell Cooperative Extension.** Mail registration form and payment to:
Cornell Cooperative Extension, Attn: Kim Hazel, 12690 NYS Rt 31, Albion, NY 14411

Cornell Cooperative Extension