**TRAINER NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TRAINER ID#: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE OF TRAINING: \_\_\_\_\_\_\_\_\_**

**LANGUAGE USED FOR TRAINING: \_\_\_\_\_­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**AGRICULTURAL EST./FARM NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ AG. EMPLOYER E-MAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** (*please use separate roster for each agricultural employer*)

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| **HANDLER’S FULL NAME (PRINT)** | **HANDLER’S SIGNATURE** | **HANDLER ID #****(if any)** | **DATE OF BIRTH** | **NATIVE LANGUAGE** |
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**PHYSICAL ADDRESS:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(include street address number, street name, City, State and Zip Code)*

**EPA-APPROVED TRAINING MATERIAL(S) USED (TITLE/EPA ID #): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**