

## **United States Department of Agriculture**

National Agricultural Statistics Service
Maryland Field Office
Cooperating with the Maryland Department of Agriculture



OMB No. 0535-0218

## RE-CERTIFICATION FULLCREDIT INFORMATION MEETING NUMBER: 20210258

Certification ID Number: ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (		(	)(	)(	)
(Please PRINT name exactly as it appe					
	ears on y	our 1	regis	tratio	n card.)
Name:					
Birth Date: (mm/dd/yy)//	/	_			
Address*:*(only needed when applicator certification ID is unknown					
*(only needed when applicator certification ID is unknown)	iown.)				
Last 4 digits of the Social Security Num *(only needed when the applicator Certification ID is					
CONFIDENTI	<u>IALIT`</u>	<u>Y</u>			
All Maryland participants completing the 2020 pesticide re-certification credit, must provide information asked for at a regular re-certification re-	the abo				
By signing below, the certified applicator (or Enthe information on this sheet will be given to the that the information will be used only for the purposent of the actual survey data will be shared with	Marylar ose of gr	nd De antin	parti g a c	nent o	of Agriculture. And
Certified Applicator (or Enumerator) Signa	ıtııre*:				

The information you provide will be used for statistical purposes only. Your responses will be kept confidential and any person who willfully discloses ANY identifiable information about you or your operation is subject to a jail term, a fine, or both. This survey is conducted in accordance with the Confidential Information Protection and Statistical Efficiency Act of 2018, Title III of Pub. L. No. 115-435, codified in 44 U.S.C. Ch. 35 and other applicable Federal laws. For more information on how we protect your information please visit: https://www.nass.usda.gov/confidentiality. Response to this survey is voluntary.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number is 0535-0218. The time required to complete this information collection is estimated to average 2 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.