# THE COMMONWEALTH OF MASSACHUSETTS

EXECUTIVE OFFICE OF ENERGY AND ENVIRONMENTAL AFFAIRS



Department of Agricultural Resources

251 Causeway Street, Suite 500, Boston, MA 02114 617-626-1700 fax: 617-626-1850 www.mass.gov/agr



CHARLES D. BAKER Governor KARYN E. POLITO Lt. Governor MATTHEW A. BEATON Secretary

JOHN LEBEAUX Commissioner

TO: Providers of Continuing Education / Contact Hours

FROM: Massachusetts Department of Agricultural Resources, Crop & Pest Services, Pesticide Program

### **REGARDING: Required Announcement**

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The Department requires that training providers give instructional information prior to the start of training. This information may be provided by the following methods:

-Verbal -Handout -PowerPoint Slide

Each individual obtaining a Pesticide Contact Hour or CEU must be given the below information at least once during the day before or when the certificates of attendance are being handed out.

## Attendance during the training

Pesticide Applicators / Dealers receiving credit must sit and be present through the entirety of the training in order to obtain the CEU's that are being offered. The applicator may NOT partake in any activities that would distract or otherwise draw attention away from the training. This includes but is not limited to the following:

- Taking or making phone calls
- Using phones for anything that is not related to the class that is being provided
- Coming in late
- Leaving early
- Being disruptive

### **Identification to obtain CEU**

By receiving the CEU or Contact Hour Certificate for the training you are attesting to be the individual that is registered for the workshop. Should the training provider and/or Department discover that the individual attending the training and possessing the CEU is making false identity claims, the individuals involved may be penalized by revocation or suspension of pesticide license(s).

### Submission of CEU's to the Department

After the training, the Contact Hour Certificate or CEU will be issued; however, it will **NOT** be signed or endorsed by the training providers unless it is first properly completed with the applicators information (Complete name and license number). **Please note: You are to hold onto this CEU and are only required to send in to the Department IF you are audited.** The Department will not accept a CEU that does not have both the applicators signature and the training providers' signature. Only the original signed CEU will be accepted during the audit.

### **Training Providers Rights**

The training provider and/or Department reserves the right to withdraw or revoke contact hours or CEU's if any of the above listed behaviors are observed/experienced or violates any of the providers' instructions/policies.