

ANSWER SHEET
STATE OF NEW JERSEY EXAMINATION
FOR
RECIPROCAL PESTICIDE APPLICATOR/DEALER and EtO WAIVER EXAMS

Completely fill in correct answer. Example: 1. (●) (B) (C)

- | | | | |
|-----------------|-----------------|-----------------|-----------------|
| 1. (A) (B) (C) | 11. (A) (B) (C) | 21. (A) (B) (C) | 31. (A) (B) (C) |
| 2. (A) (B) (C) | 12. (A) (B) (C) | 22. (A) (B) (C) | 32. (A) (B) (C) |
| 3. (A) (B) (C) | 13. (A) (B) (C) | 23. (A) (B) (C) | 33. (A) (B) (C) |
| 4. (A) (B) (C) | 14. (A) (B) (C) | 24. (A) (B) (C) | 34. (A) (B) (C) |
| 5. (A) (B) (C) | 15. (A) (B) (C) | 25. (A) (B) (C) | 35. (A) (B) (C) |
| 6. (A) (B) (C) | 16. (A) (B) (C) | 26. (A) (B) (C) | 36. (A) (B) (C) |
| 7. (A) (B) (C) | 17. (A) (B) (C) | 27. (A) (B) (C) | 37. (A) (B) (C) |
| 8. (A) (B) (C) | 18. (A) (B) (C) | 28. (A) (B) (C) | 38. (A) (B) (C) |
| 9. (A) (B) (C) | 19. (A) (B) (C) | 29. (A) (B) (C) | 39. (A) (B) (C) |
| 10. (A) (B) (C) | 20. (A) (B) (C) | 30. (A) (B) (C) | 40. (A) (B) (C) |

PLEASE CHECK BOX BELOW INDICATING EXAM YOU ARE TAKING:

CHECK ONE BOX ONLY:

- | | |
|--|--|
| <input type="checkbox"/> Commercial Applicator (40 Questions) | <input type="checkbox"/> Commercial Dealer (40 Questions) |
| <input type="checkbox"/> Private Applicator (40 Questions) | <input type="checkbox"/> EtO Waiver (30 Questions) |

Note: Only complete the number of questions next to the exam you checked above.

NAME: _____ **SSN:** _____
(print) (last four numbers only)

SIGNATURE: _____ **DATE:** _____