

Cooperative Extension

Pesticide Update

_____ (Date)

_____ (County)

(Place any additional comments on the back of this card)

I learned at least one new pesticide safety practice.

___ Yes

___ No

One thing I will do as a result of this workshop is...

I learned something new about managing pests.

___ Yes

___ No

Because of what I learned at Extension pesticide update meetings in previous years, I have (check all that apply):

- ___ reduced my pesticide use
___ used pesticides more safely
___ changed how I managed specific pests

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