LOUISIANA DEPARTMENT of AGRICULTURE & FORESTRY
MIKE STRAIN, DVM *Commissioner*

OFFICE OF AGRICULTURE & ENVIRONMENTAL SCIENCES
5825 Florida Boulevard, Suite 1003
Baton Rouge, LA 70806
(225) 925-3760

APPLICATION FOR REGISTRATION OF FIELD SCOUTS

License Number:_____ Date:_____
Company Name: _____ Phone Number: _____
Mailing Address: _____ City/State/ZIP: _____
Name of Consultant:_____

Field Scout Information

Field Scout 1:

Name: _____ Phone Number:_____
Last Four Digits of Social Security Number:_____ Date Hired:_____

Field Scout 2:

Name: _____ Phone Number:_____
Last Four Digits of Social Security Number:_____ Date Hired:_____

Field Scout 3:

Name: _____ Phone Number:_____
Last Four Digits of Social Security Number:_____ Date Hired:_____

Field Scout 4:

Name: _____ Phone Number:_____
Last Four Digits of Social Security Number:_____ Date Hired:_____

Enclose a $10.00 registration fee for each Field Scout

Number of Field Scouts _____ x $10.00 = _____ Total

Please return the form and remittance to:
Louisiana Department of Agriculture and Forestry
5825 Florida Blvd., Suite 1003
Baton Rouge, LA 70806

OFFICE USE	
Transmittal #	
Check #	
Date	
Amt. $	.00

FIELD SCOUT **0800 1605 08**