

REQUEST TO BE NOTIFIED OF PLANNED PESTICIDE APPLICATIONS

School: _____

I am a parent, legal guardian or staff member of this school and I want to be notified before specific pesticide applications are made at the school or on the school grounds except for the following exempt applications:

- 1) non-volatile liquids injected into cracks, crevices or wall voids;
- 2) non-volatile baits, gels, pastes and granular materials placed in areas inaccessible to students;
- 3) paints, stains, and wood preservatives;
- 4) disinfectants used for routine cleaning;
- 5) non-powdered applications of ready-to-use general use pesticides to control or repel stinging or biting insects where there is an urgent need to protect the health or safety of a student, staff member or other school occupant;
- 6) when school is not in session and will not be in session until the re-entry time on the pesticide label has elapsed; and
- 7) indoor applications of a pesticide with no re-entry interval specified on its label but entry to the treated area is restricted for at least 24 hours.

I would prefer to be notified by (circle one): U.S. Mail E-mail Telephone

Student Name: _____

Parent/Guardian Name: _____

Date: _____

Mailing Address: _____

Daytime Telephone: _____

Evening Telephone: _____

E-mail: _____

PLEASE RETURN THIS FORM TO YOUR CHILD'S SCHOOL