

ANNUAL PESTICIDE USE NOTIFICATION

(*date-date School Year*)

Dear Staff, Parents and/or Guardians:

To meet the requirements of the Healthy Schools Act of 2000, the District has adopted an Integrated Pest Management (IPM) policy. This policy includes notifying staff, parents and/or guardians of pesticide use. During the school year, it may be necessary to apply pesticides at your child's school to avoid serious health problems posed by pests or to maintain the integrity of a structure.

- < The attached list of pesticide products has been approved for use at District sites. In the majority of cases, the products used by the District fall into the safest category, "Caution", and pest management products shall not be applied when students are present. Applicators shall receive annual safety training, strictly following the U.S. EPA label instructions and only apply pesticides with the least risk when necessary. For additional information on pest management products, you may access the California Department of Pesticide Regulation website at www.cdpr.ca.gov
- < In the event the use of a product is required that is not on the approved list, you will be notified 72 hours in advance (Exception: Emergency circumstances that warrant an immediate response).

If your child's health and/or behavior would be influenced by exposure to pesticide products and you would like to be notified each time a pesticide application takes place at your child's school, please complete the following form and return it to the Principal's office.

.....*Cut here and return if applicable*_____

PARENT/GUARDIAN REQUEST FOR NOTIFICATION

(*date-date School Year*)

I would like to be notified every time a pesticide application is to take place at my child's school (i.e., in addition to annual notification). I understand the notification will be sent home with my child at least 72 hours before application.

NOTE: This form is for the (*date-date*) school year. You must request this notification each school year. Please return this form by (*date*).

Child's Name: _____

School: _____

Name of parent/guardian: _____

Signature of parent/guardian: _____ Date: _____

Note to Principal

Forward a copy of this notice via school mail to: District IPM Coordinator

