

Dear Parent or Guardian,

The Healthy Schools Act of 2000 requires that all California school districts and child care centers provide parents or guardians of students with annual written notification of expected pesticide use on school sites. The notification will identify the active ingredient or ingredients in each pesticide product and will include the Internet address (<http://www.cdpr.ca.gov>) for further information on pesticides and their alternatives.

Parents or guardians may request prior notification of individual pesticide applications at the school district or child care center. People listed on this registry will be notified at least 72 hours before pesticides are applied. If you would like to be notified every time we apply a pesticide, please complete and return the form below and mail it to:

If you have any questions, please contact

Sincerely,

Request for Individual Pesticide Application Notification

I understand that, upon request, the school district or child care center is required to supply information about individual pesticide applications at least 72 hours before application. I would like to be notified before each pesticide application at this school or child care center.

I would prefer to be contacted by (check one): U.S. Mail E-mail Phone

Please print neatly:

Name of Parent/Guardian: _____ Date: _____

Address: _____

Day Phone:() _____ Evening Phone:() _____

E-mail: _____

Return to:

SAMPLE NOTICE FOR SPECIFIC PESTICIDE APPLICATION

Dear Parent or Guardian,

At your request, we are writing to notify you about a specific pesticide application(s) at your school or center. Please see below for detailed information. If you would like to see the Safety Data Sheet for this chemical, it is available at

[SCHOOL OR CHILD CARE CENTER LOCATION]

If you have any questions, please contact

[SCHOOL OR CHILD CARE CENTER REPRESENTATIVE NAME]
at [PHONE].

Sincerely,
[NAME OF SCHOOL OR CHILD CARE CENTER OFFICIAL]

Notice of Pesticide Application

Date Form Completed: _____

Name: _____

Location of Planned Pesticide Application: _____

Building Name/Number: _____

Playground or Grounds Section: _____

Name of Pesticide To Be Applied: _____

Active Ingredient(s): _____

Planned Date/Time of Pesticide Application: _____

For more information regarding these pesticides and pesticide use reduction, visit the Department of Pesticide Regulation's Web site at <http://www.cdpr.ca.gov> and click School IPM.