

McKittrick Elementary School District

Request for Notification before Non-Exempt Pesticide Applications

Full Name (please print): _____

Dear IPM Coordinator, McKittrick Elementary School District,

I am writing to request notification in advance of non-exempt pesticide applications at my child's school, and/or at the school or other site where I am employed by the school district, as per my legal right under the NC School Children's Health Act.

I understand that I can request 72-hour advanced notification only for pesticide applications which are not listed on the annual schedule, which has been sent to me, and which I can view at any time by [contacting IPM coordinator or visiting website].

I also understand that notification requirements apply to all non-exempt pesticide applications at the relevant school or other non-school site (office building, garage, workshop, etc.), both indoor and outdoor pesticide applications, and including applications planned for summer recess, holidays, weekends, or after school.

Pesticide products exempt from notification requirements include antimicrobial cleansers, disinfectants, self-contained baits and crack-and-crevice treatments, and any pesticide products classified by the United State Environmental Protection Agency (EPA) as belonging to the US EPA Toxicity Class IV, "relatively nontoxic" (no signal word required on the product's label).

In addition, I understand that should a pest control emergency require a pesticide application for which there is not adequate time to notify me 72 hours in advance, I will receive a notice of emergency pesticide use less than 72 hours, or as soon as possible after, the emergency pesticide application.

I am requesting notification of pesticide use in the following schools or other sites:

	Name of Student/ employee	Specific School or another site	Homeroom/office/ room number
1			
2			
3			
4			
5			

I would like to be notified by (please check one):

() Mail Mailing address: _____

() Phone Home phone: _____ Work phone: _____
Mobile or other phone: _____

() Email Address: _____

Sincerely,

Signature: _____ Date: _____

