

**LOS ANGELES UNIFIED SCHOOL DISTRICT
2015-2016
ANNUAL PESTICIDE USE NOTIFICATION**

The District has adopted an Integrated Pest Management (IPM) policy. This policy includes notifying parents/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 and/or maintain the integrity of a structure. However, should you feel that your child's or your (for school staff) health and/or behavior could be influenced by exposure to pesticide products, you are notified as follows:

- An application of products on the Approved List may be applied during the school year (see attached list of pesticide products that have been approved for use at District sites).
- 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).
- Additional information regarding pesticide products, including those on the District's Approved List, is available online at <http://www.cdpr.ca.gov>.

Please complete, detach and return the form below to the school's main office, indicating whether you wish to be pre-notified each time a pesticide is scheduled to be used at the school.

-----Cut here and return if applicable-----

**PARENT/GUARDIAN REQUEST FOR NOTIFICATION
2015-2016**

- 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 that the notification will be sent home with my child, or provided to me as a school staff member at least 72 hours before application. (Exception: Emergency circumstances that warrant an immediate response).
- I do not need to be notified** every time a pesticide is to take place at the school. I understand that I will receive an annual notification in the Parent Student Handbook, or by other means, of pesticides approved for use at schools.

Child's name (print): _____ Room Number _____

School: _____

Name of parent/guardian (print): _____

Signature of parent/guardian: _____ Date: _____

Note to Site Administrator

File the original in the Main Office. If the above "I would like to be notified" box is checked, forward a copy of this notice via school mail to Pest Management Unit.

**Maintenance and Operations Central 3 and Special Services
Attn. Pest Management Unit**