

**Humboldt County Office of Education
Sample annual notification of planned pesticide use**

Date:

To: Office of Education Staff
Parents and Guardians of Students

From: Rob Walkenhauer, IPM Coordinator Supervisor, Maintenance and
Operations

Subject: Annual Notification of Planned Pesticide Use

The Healthy Schools Act of 2000 requires all California school districts and county offices of education to notify employees and the parents and guardians of students of the pesticides/herbicides that they expect to apply to school sites during the year.

Please see the attached list of products we anticipate using at our school sites during this school year. You can find more information regarding these pesticides and pesticide use reduction at the Department of Pesticide Regulation's web site at <http://www.cdpr.ca.gov>.

Further, should you wish to receive notification of individual pesticide applications at an Office of Education site, you may register with us. Beginning _____(date), 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 attached form and mail it to:

Rob Walkenhauer, IPM Coordinator
Humboldt County Office of Education
901 Myrtle Avenue
Eureka, CA 95501

It is the policy of the Office of Education to use the least toxic methods of pest prevention and control. Chemical pesticides/herbicides will be used only after other alternatives have been considered. When it is necessary to use a pesticide, only supervised, licensed/trained applicators will apply the pesticide, and treatments will be made after school and office hours. Our Integrated Pest Management program is outlined in Board Policy 3514.1. If you have any questions, please contact me at (707) 445-7085.

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**Humboldt County Office Of Education
Sample annual notice of pesticide use list**

Pesticide products expected to be used by the Humboldt County Office of Education during the _____ school year:

Name of Pesticide

Active Ingredient

You can find more information regarding these pesticides and pesticide use reduction at the Department of Pesticide Regulation's web site at <http://www.cdpr.ca.gov>.

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**Humboldt County Office Of Education
Sample request for individual pesticide application notification**

I understand that, upon registering with the Humboldt County Office of Education, I will be informed of individual pesticide applications at least 72 hours before an application at an Office of Education site.

I would like to be notified before each pesticide application at _____ school. I understand that my request will be active through August 31, _____, and must be renewed annually should I wish to continue to receive notifications.

I further understand that, should an emergency condition exist that necessitates immediate application of a pesticide to protect the health and safety of pupils, staff, other persons, or the school site, I will be notified as soon as is practical in accordance with Education Code 17612(c).

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

Please print neatly:

Name:	Date:
Address:	
Day Phone:()	Evening Phone:()
E-mail:	
Return to:	
Rob Walkenhauer, IPM Coordinator Humboldt County Office of Education 901 Myrtle Avenue Eureka, CA 95501	

**Humboldt County Office of Education
Sample notice for specific pesticide application**

Dear Parent, Guardian or Staff Member,

At your request, we are writing to notify you about a specific pesticide application at your school site. Please see below for detailed information.

If you would like to see the Material Safety Data Sheet for this chemical, it is available at the Humboldt County Office of Education, 901 Myrtle Avenue, Eureka. If you have any questions, please call me at (707) 445-7085.

Sincerely,

Rob Walkenhauer, IPM Coordinator
Supervisor, Maintenance and Operations

Notice of Pesticide Application

Date Form Completed: _____

School Name: _____

Location of Planned Pesticide Application:

Building Name: _____

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 Program.

WARNING PESTICIDE-TREATED AREA

ADVERTENCIA AREA TRATADA CON PESTICIDA

NAME OF PESTICIDE	NOMBRE DEL PESTICIDA
1	1
2	2
3	3
4	4

MANUFACTURER'S NAME; USEPA REGISTRATION No.	NOMBRE DEL FABRICANTE; No. DE REGISTRO DE USEPA
1	1
2	2
3	3
4	4

INTENDED APPLICATION DATE	FECHA PROPUESTA DE APLICACION

APPLICATION DATE	FECHA DE LA APLICACION

TREATED AREAS; REASON FOR TREATMENT	AREAS TRATADAS; RAZON DE LA APLICACION

School Name:

Nombre de la Escuela:

ALWAYS BE SAFE

1. If you need more information ask
Name:
Title:
2. Do not play on the treated area
3. Wash your hands and exposed skin
if you touch the treated area

1. Si necesita más información pregunte
Nombre:
Título:
2. No juegue en el área tratada
3. Lávese las manos y la piel expuesta si
usted toca el área tratada

For record keeping only per Education Code requirement

Amount of Pesticide Used: