Pre-Notification of the Use of Pesticides

(This notice should be received at least 72 hours prior to pesticide use)



Date:		
To: Parents and guardians	s of students, and sta	aff of [insert name of school]
From: IPM Coordinator		Phone Number:
Subject: Notification of	the Use of Non Low	v Impact Pesticides
This notice is to advise yo	ou that the following	g pesticide(s) will be used at [insert name of school]:
Pesticide Common N	Name	
Pesticide Trade Nam		
EPA Registration Nu	imber	
Location of the pesticide	application:	
Reason for the pesticide	application:	
If an <u>indoor</u> application	, the date and time	it is planned:
DATE	TIME	
If an outdoor application application may take pla	· ·	listed, in chronological order, on which the outdoor date is canceled.
DATE	DATE	DATE
Description of the possible the pesticides to be used		of the pesticide as per the Material Safety Data Sheets for
Pesticide product label i	nstructions and pre	ecautions related to Public Safety.
Environmental Protection	n Agency has stated:	t: The Office of Pesticide Programs of the United State, : "Where possible, persons who potentially are sensitive, such