

2011-2012 Annual Parental Notification of Pesticide Use

September 14, 2011

Dear Parent or Guardian:

The Healthy Schools Act of 2000 was signed into law in September 2000, and requires that all schools provide parents or guardians of students with annual written notification of expected pesticide use on school sites during the year, based on Board policy.

We intend to use the following pesticides in our school district for the 2011-2012 school year:

Problem	Product Name	Active Ingredient
Yellow Jackets* <i>*If needed</i>	Knox Out 2FM	Diazinon
	Raid Wasp and Hornet Killer	Diazinon
	Easy Gone Hornet, Wasp, and Yellow Jacket Killer	Diazinon
	Total Kill Wasp and Hornet Killer	Diazinon
Rodent Baiting	Contrac Blox	Bromadiolone
Termite Baiting* <i>*At Granada School Only</i>	Recruit II	Hexaflumur
Weed Control* <i>If needed</i>	Turflon Ester Specialty Herbicide	Triclopyr

The District's entire Integrated Pest Management Policy #3514.2 may be viewed on our website at www.reedschools.org under School Board Policies Online. You may also find more information regarding these pesticides and pesticide use reduction at the California School Integrated Pest Management Program web site at: <http://www.schoolipm.info/>

Parents or guardians may request prior notification of individual pesticide applications at the school site. Those listed on this registry will be notified at least 72 hours before pesticides are applied. If you would like to be notified every time a pesticide is applied, please complete and return the attached form and return it to your child's school. Please note, if you had placed your name on the notification list last year, you will still need to complete and return an updated application notification for the 2009-2010 school year. *The form only needs to be completed and returned if you want specific notification of every application.*

If you have any questions, please contact Merle Chisholm, Director of Maintenance and Operations, at 927-2628.

**REQUEST FOR
INDIVIDUAL PESTICIDE APPLICATION NOTIFICATION**

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*Please circle the name of the school(s) for which you wish to be notified
when there is an application of pesticide or herbicide.*

I understand that, upon request, the school district 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 the above-noted school(s).**

Please Print

Name of Parent/Guardian: _____ Date: _____

Address: _____

Day Phone: (_____) _____

**PLEASE RETURN THE COMPLETED FORM TO YOUR CHILD'S SCHOOL OFFICE ONLY
IF YOU ARE REQUESTING NOTIFICATION OF
EVERY APPLICATION OF HERBICIDE OR PESTICIDE.**