

ELK RAPIDS SCHOOLS

"Where Excellence is a Tradition!"

PESTICIDE PRIOR NOTIFICATION REQUEST

Dear Parent or Guardian:

Complete this form **ONLY** if you are requesting notification by United State Postal Service first-class mail.

Please be advised that you **WILL** receive notice via the methods identified in the Advisory to Parents/Guardians notice.

If you are requesting prior notification of pesticide treatments conducted at this school, ***other than a bait or gel formulation***, and you would like the notice to be delivered by United States Postal Service first-class mail at least three (3) days prior to the planned treatment, please complete the information below and submit to:

Elk Rapids Schools, District Office, 308 Meguzee Point Rd, Elk Rapids, MI 49629

I wish to receive a prior notice of any pesticide application to the school listed by first-class mail.

School: _____

Parent/Guardian Name: _____

Student(s) Name: _____

Mailing Address: _____

City, State, Zip Code: _____

Phone: _____

Email Address: _____

Please check one:

_____ I wish to be notified prior to pesticide treatment inside the building.

_____ I wish to be notified prior to pesticide treatment outside the building.

_____ Please notify me about both.

Signature

Date