Dear Parent, Guardian, or Staff Member,

The Indiana State Chemists Office requires us to notify parents, guardians, and staff of pesticides we will apply during the year. These applications are performed by licensed professionals periodically to keep our buildings and grounds free of unwanted insects rodents and pests. If you wish to be notified each time a pesticide is applied at your school, please fill out the form below and return it to us. If you have additional questions, feel free to contact me at <a href="mailto:yorkb@sefschools.org">yorkb@sefschools.org</a> or 1.765.294.2206 XT 2004.

Thanks,		
Brian York		
Director of Maintenance		
REQUEST FOR NOTIFI	ICATION (Pesticide Application	on)
I would like to be notified school.	d every time a pesticide applica	ation is to take place at my child's
CHILDS NAME		
SCHOOL		GRADE
NAME OF PARENT/GU	JARDIAN/STAFF	DATE
ADDRESS		
CITY	ZIP CODE	EMAIL