

IRVINE UNIFIED SCHOOL DISTRICT
Maintenance and Operations

EMPLOYEE
REQUEST FOR PESTICIDE APPLICATION NOTIFICATION

Incomplete or illegible form will be voided

I understand that, upon request, the school district is required to supply information about scheduled pesticide applications. I would like to be notified of these dates for this school site. This request is for the 2009/2010 school year.

Please print neatly:

If you teach at other school sites, Please, fill out a separate form and return to that school site.

Print name of school: _____

Print name of Employee: _____

Address _____ City _____ ZIP _____

Signature: _____

Return this form to the school site secretary.

School Site Instructions:

Please forward a copy of this form to Maintenance and Operations.