

REQUEST FOR ADVANCE NOTIFICATION OF PESTICIDES

Dear Parent / Guardian:

Complete this form **ONLY** if you are requesting advance notification of a pesticide application.

If you are requesting prior notification of pesticide treatments conducted at this school, other than a bait or gel formulation, please choose the method by which you would like to be notified.

Please complete the information below and submit it to one of the following school office or mail to:

Cole Academy, 1915 W. Mount Hope, Lansing MI. 48910
Principal Traci LaDue 517.372.0038

Cole Academy East, 2921 E. Coleman Rd., East Lansing MI. 48823
Principal Sarah Thomas 517.580.3470

I wish to receive a prior notice of at least 3 days' notice of any pesticide application to the school by:

- SMS/Text (Number to text) _____
- Email (Email address) _____
- USPS First-class mail (Please provide information below. Your notice will be post-marked at least 3 days prior to the planned treatment.)

PARENT NAME: _____

STUDENT NAME: _____

STREET ADDRESS: _____

CITY, ZIP _____

Please Check One:

- I wish to be notified prior to a scheduled pesticide application inside of the school building.
- I wish to be notified prior to a scheduled pesticide application on the outside grounds of the school building.
- Both of the above.

Signature

Date