

PESTICIDE USE REPORTING FOR SCHOOL AND CHILD DAY CARE CENTER EMPLOYEES

DEPARTMENT OF PESTICIDE REGULATION
PEST MANAGEMENT & LICENSING BRANCH

APPLICATION YEAR 2017	SCHOOL DESIGNEE (IPM COORDINATOR) Robert Strain		DISTRICT / CENTER NAME Temple City Unified School District		LICENSE / CERTIFICATE NUMBER (OPTIONAL)		
REPORT PREPARED BY: Robert Strain			E-MAIL ADDRESS rstrain@tcusd.net		CITY Temple City		PHONE NUMBER (626) 548-5038
School CDS #/Child Day Care Facility # OR Name & Address AND Specify if School or Child Day Care Facility	County Code	Date & Time Application Completed	Location (# from list on back)	Manufacturer & Name of Product Applied	EPA REG. Number on Label or CA Reg. Number for adjuvants (include alpha code, if listed)	Amount of Pesticide Product Used (check or write in unit from label)	Pest Control Code (from list on back)
La Rosa Elementary School <input checked="" type="checkbox"/> School <input type="checkbox"/> Day Care		12/01/2017 3am	#8 #10	Monsanto Roundup Pro Max	524-579	6 (vol.) <input checked="" type="checkbox"/> OZ <input type="checkbox"/> ML <input type="checkbox"/> PT (wt.) <input type="checkbox"/> GR <input type="checkbox"/> OZ <input type="checkbox"/> LB	30
Temple City High School <input checked="" type="checkbox"/> School <input type="checkbox"/> Day Care		12/01/2017 4am	#8 #10	Monsanto Roundup Pro Max	524-579	16 (vol.) <input checked="" type="checkbox"/> OZ <input type="checkbox"/> ML <input type="checkbox"/> PT (wt.) <input type="checkbox"/> GR <input type="checkbox"/> OZ <input type="checkbox"/> LB	30
<input type="checkbox"/> School <input type="checkbox"/> Day Care						<input type="checkbox"/> OZ <input type="checkbox"/> ML <input type="checkbox"/> PT (wt.) <input type="checkbox"/> GR <input type="checkbox"/> OZ <input type="checkbox"/> LB	
<input type="checkbox"/> School <input type="checkbox"/> Day Care						<input type="checkbox"/> OZ <input type="checkbox"/> ML <input type="checkbox"/> PT (wt.) <input type="checkbox"/> GR <input type="checkbox"/> OZ <input type="checkbox"/> LB	
<input type="checkbox"/> School <input type="checkbox"/> Day Care						<input type="checkbox"/> OZ <input type="checkbox"/> ML <input type="checkbox"/> PT (wt.) <input type="checkbox"/> GR <input type="checkbox"/> OZ <input type="checkbox"/> LB	

Use this form ONLY to report pesticide applications made by schoolsite employees, staff, and volunteers at schools and child care centers.
DO NOT report pesticide use by pest management professionals contracted to apply pesticides at schoolsites. They will report their own
use. Report must be submitted no later than January 30th of the year following the year of use to:
School Pesticide Use Reporting, Department of Pesticide Regulation, P.O. Box 4015, Sacramento, CA 95812-4015

INSTRUCTIONS:

- 1 Each line is an individual pesticide application. Report only one schoolsite, date/time, and pesticide per line. Multiple pages will be needed if you need to report more than 5 pesticide applications.
- 2 A name and address is required for each schoolsite. A cover sheet with all schoolsite names/addresses can be included with your report to prevent repetitive writing/typing.
- 3 Applicators: If you are mixing a concentrate with a liquid, report the amount of concentrate applied. For products that don't require dilution, report the amount of finished product applied.

PEST CONTROL CODES:

Code 10 - Structural Pest Control.....includes pest control work performed within or on buildings or other structures

Code 30 - Landscape Maintenance Pest Control...includes pest control work performed on landscape plantings around buildings

Code 80 - Vertebrate Pest Control.....includes pest control work performed by public agencies or work under the supervision of the State or county agricultural commissioner

LOCATION CODES:

1 Administration Bldg	5 Cafeteria/Kitchen	9 Landscape (indoor)	13 Multipurpose Room	17 Vehicle
2 Athletic Field	6 Classroom	10 Landscape (outdoor)	14 Playground	18 Multiple Locations
3 Auditorium	7 Gymnasium	11 Library	15 Pool	19 Other (Please indicate)
4 Bldg, Exterior	8 Hardscape (parking lot, sidewalk, etc.)	12 Locker Room	16 Restroom	

Reason for application is not required for reporting. This form, when filled out completely, can be used as the pesticide use record required under HSA.

Reasons for application (required for Healthy Schools Act recordkeeping).

Application 1: **Weed Control**

Application 2: **Weed Control**

Application 3:

Application 4:

Application 5: