

SOUTH BEND COMMUNITY SCHOOL CORPORATION
RECORD KEEPING FORM FOR PESTICIDE APPLICATIONS

SCHOOL NAME: SCHOOL ADDRESS:	APPLICATION #1	APPLICATION #2	APPLICATION #3	APPLICATION #4
1. DATE: MONTH/DAY/YEAR				
2. TIME OF APPLICATION				
3. APPLICATOR NAME LICENSE NUMBER PHONE NUMBER				
4. DESIGNEE FOR INFORMATION ABOUT APPLICATION				
5. DESCRIPTION OF APPLICATION AREA (FOOTBALL FIELD, CRACKS IN SIDEWALK, FENCE LINES, ETC.)				
6. PESTICIDE USED, BRAND NAME, MANUFACTURER, EPA #				
7. AMOUNT USED (TOTAL OUNCES/POUNDS/GALLONS OF CONCENTRATE/DILUTED MIX				
8. SIGNATURE OF PERSON FILLING OUT FORM (TYPED NAME IF FILLING OUT ELECTRONICALLY)				