

[Date]

Dear Parent or Guardian,

Today, a bed bug was found on your child or in your child’s belongings. While this does not necessarily mean that the bed bug was brought to school by your child, it is important to your child’s health and to the school community that you inspect your home for signs of bed bugs.

Enclosed you will find information about bed bugs and an identification guide to help you with your inspection. Once you have inspected your home, please fill out the form below and return to the school office by [date].

Sincerely,

School Administration

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I have been informed that a bed bug was found on my child at school. I understand that bed bugs pose a threat to my child’s well-being and to the greater school community. I have read and understood the educational materials provided to me regarding bed bugs, and have:

* Carefully checked my family and home for signs of bed bug infestation myself
* Hired a pest management professional to check my family and home for signs of bed bug infestation. Name of pest control company: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

After completing a careful inspection, I certify that to the best of my knowledge:

* I or a pest management professional found signs of bed bugs in my home, and I will take the following actions to eliminate this infestation:

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* I or a pest management professional did not find signs of bed bugs in my home at this time. If I find evidence of bed bugs in the future, I will notify the school immediately and take action to address the infestation.

I understand that bed bugs can be spread to other homes if they are brought to school in backpacks, clothing, and other belongings. I understand that if bed bugs are repeatedly found on my child, that the school may take additional actions to protect the school community from bed bugs.

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Pest management professional’s signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_