Employee Log

(Attachment C)

Name of Food Booth: _____

At all times of operation, there shall be a least one booth operator present who has completed a food safety course administered by Environmental Health Services or a recognized provider of food safety training. Signify below who that person(s) is by placing a " ✓" by the name. Attached a copy of the food safety training certification if the person(s) compled training by a recognized provider of food safety training.

NAME	DATE	ASSIGNMENT	TIME IN	TIME OUT