

Volunteer Food Coordinator Application

Name _____

Address _____

Phone _____

E-mail _____

Date of Event _____

Location _____

_____ I have completed a Building Use Form

This training reviews the basics of food safety as well as the Eau Claire Area School District kitchen use requirements. We will also discuss event specifics and each food-safety critical control point of the event.

Duration of training will be dependent on the number of people in each training. Customarily, trainings are 30-60 minutes.

Please either e-mail your completed form to:

Lisa Smith, Director at lsmith1@ecasd.us

And Andrea Fay, Manager at afay@ecasd.us

OFFICE USE ONLY

Trainer _____

Date of Contact _____

Date of Training _____

Training Recorded _____