

Application for Child Nutrition Certification

I. Type of Certification Requested: Must provide an Official High School or College Transcript. (Check only one)

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| <input type="checkbox"/> Manager, Regular | <input type="checkbox"/> Food Service Administrator, Emergency |
| <input type="checkbox"/> Manager, Emergency | <input type="checkbox"/> Food Service Administrator, Provisional |
| <input type="checkbox"/> Satellite Manager | <input type="checkbox"/> Food Service Administrator II |
| | <input type="checkbox"/> Food Service Administrator III |
| | <input type="checkbox"/> Food Service Administrator IV |

II. Person to Be Certified:

Last Name	First Name	MI
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Position	Hire Date
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School District Name and Address

Reason for Certification Request: _____

III. Is the person to be hired ServSafe Certified? Yes No
(MUST provide Certification Certificate within 30 days of hire date.)

IV. Educational documentation must be submitted with this application. The MINIMUM required documentation for each type of certification is outlined in the attached document.

V. Authorized Signatures:

Signature of Applicant	Date
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Signature of School Food Service Administrator	Date
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Signature of Superintendent	Date
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