

KENT HEALTH DEPARTMENT

414 E. MAIN ST., P.O. BOX 5192, KENT, OH 44240 (330) 678-8109 FAX (330) 678-2082

FOOD SAFETY BASICS CLASS

Kent Health Department is now offering a Level 1 Person In Charge Food Safety Basics Class. This course has been approved by the Ohio Department of Health for Level 1 Certification in Food Protection. As of March 1, 2010, OAC 3701-21-25 (I) requires that all new food service operations have at least one person per shift that is Level 1 certified or higher.

When:

Wednesday, January 4, 2017 from 9:00 AM – Noon. Sign in begins at 8:30 AM
Monday, May 1, 2017 from 1:00 PM – 4:00 PM Sign in. begins at 12:30 PM
Wednesday, September 6, 2017 from 9:00 AM – Noon. Sign in begins at 8:30 AM
Monday, December 4, 2017 from 1:00 PM – 4:00 PM. Sign in begins at 12:30 PM
Please arrive early to register so that we may begin the class on time.

Where:

Kent Health Department - 414 E. Main St., Kent, OH 44240

How much: \$20.00 per person.

Registration form must be submitted 2 days prior to set presentation date. Advanced payments are non-refundable and cannot be applied to nor transferred to a different class date
Presentation will be cancelled if there are less than 10 people registered at the registration deadline.

You may call and request an "in house" presentation at your facility or schedule a class at our facility for groups of 10 or more. Cost is \$200.00 and includes training materials. Payment must be received 10 days prior to requested date if presented at your facility and is non-refundable.

For more information contact Justin Smith at (330) 678-8109 or send email to j.smith@kent-ohio.org

Mail registration form below with check made payable to:

**Kent Health Department
P.O. BOX 5192
Kent, OH 44240**

PLEASE CUT OR TEAR ON THE DOTTED LINE. THE TOP IS FOR YOU TO KEEP. ONLY THE BOTTOM REGISTRATION FORM NEEDS TO BE SUBMITTED.

REGISTRATION FORM – FOOD SAFETY BASICS CLASS

PLEASE PRINT LEGIBLY

Company Name: _____

Mailing Address: _____

Contact person and telephone number: _____

Number attending each class you plan to attend:

January _____

May _____

September _____

December _____