

## **Allegheny County Health Department**

## Food Safety Program - Certification phone: 412.578.7933

## FOOD PROTECTION MANAGER CERTIFICATION REGISTRATION FORM PLEASE TYPE OR PRINT LEGIBLY.

Registrant Information			
Name:			
Title	First	Middle Initial	Last
Mailing Address:	Street Number and Name		Apartment/Unit #
	City	State	Zip Code
Phone:		Email:	
Employment Information			
Company Name:			Client #
			(Found on Allegheny County Health Permit)
Address:	Street Number and Name		
	City	Stat	e ZIP Code
Job Title:		Business Phone:	
Course/Registration Information			
up to 2 weeks for before the class.	pooks to arrive. Books for late reg	istrants can be picked up from our office by appointn	Course/Exam Option:  2-Day Certification - \$135  1-Day Recertification - \$105  Challenge Exam - \$65
	Location of Course	e or Challenge Exam	Exam Language Options:  2 weeks' advance notice required. Late requests may be rescheduled.
	neck or money order payable t rer of Allegheny County" and	submit registration form with payment to: epartment Food Safety Program	Spanish Simplified Chinese Korean Japanese Canadian French
In order to allow time for processing registration forms and mailing course books, registration with payment must be received by this office 10 days prior to the first day of the course. Forms received without payment will <u>NOT</u> be considered registered until payment is received. Please call (412) 578-7933 with any questions or to confirm that forms and payments were received.			
NOTE: All courses are from 8:30 am to 4-5 pm.			
Exams begin promptly at their listed time. Late arrivals cannot be admitted.			
	PLE.	ASE DO NOT WRITE BELOW THIS LINE – Office Use Only _	
		Payment Information	
□ Cash	☐ Check ☐ Money O	\$00	