

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:

Joshua Guckenberger, Director at jguckenberger@ecasd.us

And Andrea Fay, Kitchen Manager at afay@ecasd.us

Or mail to:

**Food & Nutrition
Eau Claire Area School District
500 Main Street
Eau Claire, WI 54701**

OFFICE USE ONLY:

Trainer: _____

Date of Contact: _____

Date of Training: _____

Training Recorded: _____