

Application for **SAFE FOOD CREW** Public Recognition Program



Please print or type all information and return to:

Public Health – Madison and Dane County
 Attn: Beth Cleary
 210 Martin Luther King Jr. Blvd Room 507
 Madison, WI 53703-3346
 or FAX to (608) 266-4858

NAME OF ESTABLISHMENT/ORGANIZATION:		DATE:
BUSINESS ADDRESS (NUMBER, STREET, CITY, STATE, ZIP CODE):		
MAILING ADDRESS - IF DIFFERENT THAN ABOVE (NUMBER, STREET, CITY, STATE, ZIP CODE):		
BUSINESS PHONE NUMBER:	BUSINESS E-MAIL:	
CONTACT NAME, PHONE NUMBER, E-MAIL ADDRESS:		
CURRENT NUMBER OF FOOD EMPLOYEES:	NUMBER OF YEARS IN BUSINESS:	CURRENT NUMBER OF CERTIFIED FOOD MANAGERS:
NAME OF TRAINER:		CERTIFIED FOOD MANAGER? <input type="checkbox"/> YES <input type="checkbox"/> NO
NAME OF TRAINER:		CERTIFIED FOOD MANAGER? <input type="checkbox"/> YES <input type="checkbox"/> NO
NAME OF TRAINER:		CERTIFIED FOOD MANAGER? <input type="checkbox"/> YES <input type="checkbox"/> NO

- Include Training Verification Log (one per module trained)
- Include Trainer's Evaluation Form
- Include Pre and Post Quizzes (one per participant/module trained)

*To receive recognition, complete at least 5 modules in a 12-month period and train at least 10% of food employees (or a minimum of up to 5, whichever is greater) per module.