

ATTACHMENT A

READ, SIGN AND RETURN WITH APPLICATION

Name of Concession: _____

Address: _____

Certified Foodservice “Person-In-Charge” _____

Contact Telephone Number: _____

I have read the Emergency Reference Reminder and I understand my responsibilities as outlined below and that I have trained the following employees with basic food protection skills who could be in charge in my absence.

- **How to use and calibrate a food thermometer**
- **How to take an internal food temperature**
- **The definition of a Potentially Hazardous Food (PHF)**
- **How to document time and temperature and why PHFs must be discarded between 4 & 5 hours after the cold-holding temperature has risen above 41 degrees F.**

Employee Name

Signature

Date
