

Employee Training Sheet

Training Topics	Date Completed	QFO Initials	Employee Initials
1. Proper Food Temperature Control			
a. Cooking			
b. Hot and Cold Holding			
c. Rapid Cooling and Heating			
d. Food temperature gauge use, storage, sanitization, and calibration			
2. Food Protection			
a. Washing Fruit and Vegetables			
b. Protection from bare hand Contact			
c. Protection from Cross Contamination			
d. Covering food and protection from other sources of contamination			
3. Personal Health and Cleanliness			
a. Employee sick leave, restricting/excluding ill workers			
b. Reporting illness to health jurisdiction			
c. Good hygienic practices			
d. Hand washing requirements, facilities, and procedures			
4. Sanitation of the Facility, Equipment, Supplies, and Utensils			
a. Sanitization requirements and procedures			
b. Cleaning schedule and procedures for food/nonfood-contact surfaces			
c. Proper use of the ware washing sink, and dishwashing machine			
5. Identify and recognize the foods most commonly associated with food allergies.			

Employee Training Sheet

Pursuant to Public Health Code (PHC) Section: 19-13-B42(s)(8)(A) and 19-13-B49(t)(7)(A) the qualified food operator of each food service and catering food service establishment is responsible for ensuring training of food preparation personnel. Training shall include but not necessarily be limited to:

1. Instruction in proper food temperature control;
2. Food protection;
3. Personal health and cleanliness;
4. Sanitation of the facility, equipment, supplies and utensils
5. Food Allergies

The qualified food operator of each food service and catering food service establishment shall maintain written documentation of a training program, and training records of individual employees, and shall make these records available to the local health departments upon request. Training records shall be retained for the term of employment of all current food workers.

The qualified food operator is responsible for completing and maintaining the employee training sheet and training record forms or substitute forms with similar content approved by the local health department.

Employee Training Sheet

Name of Establishment: _____

Address of Establishment: _____

Employee Name: _____

Duties: _____

Date of hire: _____

Adapted from forms developed by the Weston-Westport Health District