

Farmington Valley Health District

95 River Road, Suite C • Canton, CT 06019 • Phone (860) 352-2333 • Fax (860) 352-2542

Avon • Barkhamsted • Canton • Colebrook • East Granby • Farmington • Granby • Hartland • New Hartford • Simsbury NAME OF EMPLOYEE: **Training Topics Employee** Date CFPM/Trainer **Initials Initials** Completed **Food Protection** a. Receiving Safe Food b. Keeping Foods Safe in Storage c. Protecting Foods from Cross Contamination d. Protecting Foods from Bare Hand Contact e. Single-Use Disposable Gloves **Personal Health and Cleanliness** a. Ill Food Workers b. Handwashing Requirements and Procedures c. Good Hygienic Practices **Food Temperature Control** a. Probe Thermometers b. Food Temperature Danger Zone c. Minimum Cooking Temperatures

e. Pasteurized Egg	s and Egg Products			
f. Hot and Cold Ho	olding			
g. Cooling Procedu	ires for Hot Foods			
h. Thawing Frozen	PHFs			
i. Reheating PHFs				
j. Microwave Coo	king			
Employee Training Sheet Information Name of Establishment:				
Address of Establishment:				
Name of Certified Food Protection Manager / Trainer:				
Duties:				
Signature and Title:	Signed by Certified Food	Protection Manager ,	Date / Trainer	:
Signature and Title:	Signed	by Employee	Date	::
	Signed	by Lilipioyee		

d. Consumer Advisory