

NEW FOOD SERVICE DIRECTOR NOTIFICATION

Please either fax to 502-564-5519 or email to your approving consultant

Sponsor Name/District:

Previous Food Service Director:

New Food Service Director:

Email:

Effective Date:

Phone Number with Area Code:

Extension:

Address1:

Address2:

City, State:

Zip Code:

Superintendent Signature

"I certify that the hiring of the newly appointed food service director is in compliance with the Professional Standards for School Nutrition Program Personnel as required by 7 CFR parts 210 and 235."
<http://education.ky.gov/federal/SCN/Documents/Professional%20Standards%20Reference%20Sheet.pdf>

Internal Use Only

Approving Consultant: _____

Date: _____

Date QST sent to new Director: _____

Date DL updated: _____

Date uploaded to SP: _____