TRAINING RECORD CARD

Allergen Awareness Food Safety Discussions



I confirm that I have received the Food Safety Conversation training session on Allergen Awareness for Back of House Staff/Front of House Staff/Beverage Service (please indicate below which Food Safety Conversation has been delivered to you). I confirm that I understand my responsibilities when dealing with allergens and will follow the Company policies and procedures.

UNIT NAME						UNIT NUMBER						
UNIT MANAGER : Please note, where facilities allow, your staff should watch an Allergen Awareness Video and indicate they have watched it below.												
TRAINEE'S NAME	ВОН	FOH	BEV	Vide o	DATE	TRAINEE'S SIGNATURE	TRAINER'S NAME					
Julie Smith		Х		Х	2/11/23	I.S mith	D.Crowe					

FS/F/059/01 November 2023

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