



CITY OF DALLAS

**ENVIRONMENTAL AND HEALTH SERVICES DEPARTMENT
FOOD PROTECTION AND EDUCATION DIVISION
FOOD HANDLER REGISTRATION**

FEE	RETURN ALL APPLICATION TO:	FOR OFFICE USE ONLY
Certificate.....\$16.00	Food Handlers Registration Department of Environmental and Health Food Protection and Education Division 7901 Goforth Road Dallas, Texas 75238 Telephone: (214) 670-8083 Fax: (214) 670-8330	Certificate # _____
Mail Service Add.....\$ 1.00		FA# _____
Total Enclosed.....\$17.00		Card Code _____
All Fees are Non-Refundable		Date Certified _____
		Expires _____
		Eligibility _____
		Date Typed/Mailed _____
		Reviewed By _____

Please Print – All Spaces Must Be Complete // Application Must be Submitted at least Two Days Prior to class

Name _____
Last First Middle Initial

Home Address _____

City _____ State _____ Zip _____ Home Phone # _____
Work Phone # _____
Cell Phone # _____

Date of Birth _____ Social Security # _____ / _____ / _____

Drivers License # _____ State _____ Other I.D. _____
(Photo Copy of Drivers License Required)

Food Establishment to Which Registration Assigned _____

St. Name _____ City _____ State _____ Zip _____

Attending Registration Date: _____ / _____ / _____ From _____ To _____ PM

Select Presentation in English or Spanish

First Time Registration? Yes _____ No _____

All fees associated with this application are non-refundable. If you are not present on the date and time of the class specified above, the application and fee submitted is non-transferable to future classes. I understand that giving false information will be grounds for revocation of this registration certificate. I hereby certify that the above information is true and accurate. PLEASE ARRIVE TO CLASS AT LEAST 15 MNUTES EARLY!

APPLICANT'S SIGNATURE

DATE