

FOOD SAFETY MANAGER CERTIFICATION SPRING 2025 COURSES

Food Safety Manager Certification - Course & Exam Overview _

- · Causes and prevention of foodborne illness
- · Safe food handling, storage, preparation, & service
- · Proper personal hygiene practices

- Policies for reporting health issues
- Food allergen awareness
- Food safety management systems
- · Cleaning & sanitizing procedures
- · Emergency preparedness
- Pest control

The program satisfies the food safety manager certification requirement of the Oakland County Sanitary Code Article IV, as well as the Michigan Food Law, Act 92 of 2000.

Food Safety Manager Recertification _____

This course is designed for those students who have previously earned a food safety manager certificate and need to re-certify due to an expired certificate. This course is a four-hour review followed by an afternoon exam session. If a certificate is more than ten (10) years old, it is recommended that the recertification course be taken. Please provide a copy of your previous certificate with this registration form.

Attendance: Attendance is required for the duration of the class to sit for the exam.

Refunds: Once enrolled in a class, there will be NO refunds. Students may be able to transfer to another open class if arrangements are made at least 48 hours prior to the start of the class they are enrolled in.

To Register: Complete the registration form and mail or deliver to OCHD with the appropriate fee and a copy of your previous certificate (if applicable). Classes fill quickly and early registration is recommended.

It is recommended that students pick up a book prior to class. Books can be obtained at either of our two offices:

North Oakland Health Center • 248-858-1312

South Oakland Health Center • 248-424-7190

1200 N. Telegraph Rd, Bldg 34 E • Pontiac

27725 Greenfield Rd • Southfield

A VALID I.D. IS REQUIRED TO SIT FOR THE EXAM.

Call 248-858-1312 or email OCHDCertifiedFoodManagerTraining@oakgov.com for more information.

| | O Book received (clerical use only) |
|--|---|
| REGISTRATION FORM | |
| Name: | Email: |
| Work Phone: | Home Phone: |
| Home Mailing Address: | |
| Facility Name: | |
| Business Address: | |
| The textbook is available in four languages; however, please note that which textbook you would prefer: English Spanish | all handouts and instructions are in English. Please indicate Chinese (Traditional Mandarin) Korean |
| The exam is offered in six languages and in large print. Please indicate Chinese (Traditional Mandarin) | |
| CLASS TIME: All classes begin at 8:30 a.m. Full day classes will he Contact our office at | |

Please make checks payable to "Oakland County Health Division." Mail this form with check or money order to:

Oakland County Health Division, Environmental Health Services • 1200 N Telegraph Rd, Bldg. 34E, Pontiac, MI 48341

Please submit this form at least seven (7) days prior to the first day of class. Pre-registration is required. Participants must attend all session dates for the class. You will receive a confirmation email with further instructions for the class and exam.