

CITY OF PATERSON
DEPARTMENT OF HEALTH & HUMAN
SERVICES
Joel D. Ramirez, MBA. *Director*



ENVIRONMENTAL DEPT.
176 BROADWAY
PATERSON, NEW JERSEY 07505

DIVISION OF HEALTH
Thakur "Paul" D. Persaud, M.D., M.P.H., PhD
Health Officer

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André Sayegh
Mayor

2025 APPLICATION FOR FOOD HANDLERS' CERTIFICATE

PLEASE WRITE LEGIBLY

CHECK APPLICABLE:

ATTENDING CITY OF PATERSON FOOD HANDLER'S COURSE (FHC). COST: \$30.00

EXEMPT FROM ATTENDING THE CITY OF PATERSON FHC BECAUSE I
HAVE MET THE CONDITION LISTED ON PAGE 2.

<p>NAME: _____ (PRINT) FIRST LAST</p> <p>PHONE NUMBER: _____</p> <p>EMPLOYED BY: _____ NAME OF RETAIL FOOD ESTABLISHMENT OR INSTITUTION</p> <p>EMPLOYER'S ADDRESS: _____</p> <p>SIGNATURE: _____</p>

DATE OF CLASS (FECHA DE LA CLASE): _____

Class Starts at: 9:30 a.m.

ENGLISH CLASS

SPANISH CLASS

***** PARKING IS NOT ALLOWED IN THE DIVISION OF HEALTH PARKING LOT THE DAY OF CLASS *****

CONDITIONS FOR EXEMPTION FROM ATTENDING CITY OF PATERSON FHC

Holds a certificate from a state approved Food Handler’s Course. Sources available upon request. (FHC certificate from other sources will need to be converted to a Paterson DOH Food Handlers certificate at a cost of \$30.00)

EXEMPTION			
PROOF OF ATTENDANCE	YES	NO	COMMENTS

You MUST present this as a receipt the day of the class as proof of registration. Registration fee is \$30.00 and non-refundable if you fail to attend. Cancellation, rescheduling and /or refund requests must be made in person 48 hours in advance or by determination of a supervisor. The certificate will be valid for 3 years from the date issue.

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-----*(FOR OFFICIAL USE ONLY, PLEASE DO NOT WRITE BELOW THIS LINE)*-----

Received by: _____ **Date:** _____

Amount: _____ **Payment Type:** _____