



STEPHANIE RAWLINGS-BLAKE
MAYOR

FOOD SERVICE MANAGER APPLICATION
 BALTIMORE CITY HEALTH DEPARTMENT
 BUREAU OF ENVIRONMENTAL HEALTH
 1001 E. Fayette Street
 Baltimore, Maryland 21202

410-396-4424 • food-service-manager@baltimorecity.gov



OXIRIS BARBOT, M.D.
COMMISSIONER OF HEALTH

Submit the following information with the application:

1. Proof of training within three years prior to the date of training certificate issuance
 - **New applicant** documents must state that the course taken was a 16-hour in class course.
 - **Renewal applicant** documents must state that the course taken was an 8-hour in class course.
 - Applicants who have NEVER applied through BCHD but have taken the 8-hour course must also bring verification of taking the 16-hour course.
2. Original, complete training certificate
3. Two passport-type photos no larger than 2 ¼ " x 2"
4. Check or money order payable to DIRECTOR OF FINANCE

CONTACT INFORMATION

Name	Contact Telephone
Home Address	Food Service Facility Name
Facility Address	Facility Telephone

Fee Listing

3-Year Certificate Application Fee	\$30.00	Replacement Processing Fee <i>For newly hired Food Service Manager.</i>	
Late Fee (per month)	\$10.00	<i>Replacement certificate applies for remainder of the original certificate's 3-year period.</i>	\$10.00

I hereby certify that the information on this application is complete, true, and correct to the best of my knowledge, and so indicate by signing below in the designated space. I also understand that providing any false information may result in the revocation of my food manager's certificate by the Baltimore City Health Department.

X _____ X _____ X _____
 Signature (Required) Print Name (Required) Date

↓ FOR OFFICE USE ONLY. PLEASE DO NOT WRITE IN THIS SECTION. ↓

Name of Trainer	Trade Name			
Address of Trainer				
Examination Results	Score	Date	Fee Paid	Check #
Remarks			<input type="checkbox"/> Approved	<input type="checkbox"/> Denied
Certificate Number	Reviewer	Date		