

KEY HOLDERS TO SCHOOL NUTRITION OPERATION

Identify the individuals who will have keys to the school nutrition operation. Post this list in a common location.

Feeding Site _____

Food Service Director or Manager _____

**SCHOOL
NUTRITION
OPERATION
MASTER
KEY(S)**

1. Name _____

Position _____ E-mail _____

(H) Phone _____ (W) Phone _____ Cell Phone _____

Home Address _____

2. Name _____

Position _____ E-mail _____

(H) Phone _____ (W) Phone _____ Cell Phone _____

Home Address _____

**SCHOOL
NUTRITION
OFFICE
KEY(S)**

1. Name _____

Position _____ E-mail _____

(H) Phone _____ (W) Phone _____ Cell Phone _____

Home Address _____

2. Name _____

Position _____ E-mail _____

(H) Phone _____ (W) Phone _____ Cell Phone _____

Home Address _____

Form Developed on _____ Form Revised on _____



KEY HOLDERS TO SCHOOL NUTRITION OPERATION (CONTINUED)

Feeding Site _____

Food Service Director or Manager _____

REFRIGERATOR KEY(S)

1. Name _____

Position _____ E-mail _____

(H) Phone _____ (W) Phone _____ Cell Phone _____

Home Address _____

2. Name _____

Position _____ E-mail _____

(H) Phone _____ (W) Phone _____ Cell Phone _____

Home Address _____

MILK COOLER KEY(S)

1. Name _____

Position _____ E-mail _____

(H) Phone _____ (W) Phone _____ Cell Phone _____

Home Address _____

2. Name _____

Position _____ E-mail _____

(H) Phone _____ (W) Phone _____ Cell Phone _____

Home Address _____

Form Developed on _____ Form Revised on _____



KEY HOLDERS TO SCHOOL NUTRITION OPERATION (CONTINUED)

Feeding Site _____

Food Service Director or Manager _____

STOREROOM KEY(S)

1. Name _____

Position _____ E-mail _____

(H) Phone _____ (W) Phone _____ Cell Phone _____

Home Address _____

2. Name _____

Position _____ E-mail _____

(H) Phone _____ (W) Phone _____ Cell Phone _____

Home Address _____

FREEZER KEY(S)

1. Name _____

Position _____ E-mail _____

(H) Phone _____ (W) Phone _____ Cell Phone _____

Home Address _____

2. Name _____

Position _____ E-mail _____

(H) Phone _____ (W) Phone _____ Cell Phone _____

Home Address _____

Form Developed on _____ Form Revised on _____

