



# 2021 Application for a Food Service Manager's Certificate

**PLEASE PRINT CLEARLY**

**DUPLICATE CERTIFICATE:**  Attach a copy of a valid government issued photo ID such as a Driver's License.

**RECIPROCAL CERTIFICATE:**  Attach a copy of a valid government issued photo ID such as a Driver's License and a copy your Certificate of Examination from an accredited Food Manager's Program.

Date:

Name:

First

Initial

Last

Home Phone:

Driver's License #:

Date of Birth:

Male

Female

Home Address:

Preferred

#

Street

Apt.

City

State

Zip

Business Name:

Preferred

Business Address:

Street Address

Suite

City

State

Zip

Business Phone:

Email:

Signature:

## DO NOT WRITE BELOW THIS LINE

DUPLICATE CERTIFICATE:  Date Cert. Starts:  Ends:  Cert #:

RECIPROCAL CERTIFICATE:  Date Cert. Starts:  Ends:  Cert #:

Approved by:

Date:

SIGNATURE





## Instructions for Completing the Application for a Food Service Manager's Certificate

The following fields are required:

- ✓ Either check the box indicating that the application is for a reciprocal certificate from another agency or program or a duplicate of your existing City of Houston certificate.
  - If this application is for a copy of your existing City of Houston Food Manager's Certificate (\$29.72), a copy of a valid government issued photo id must be attached
  - If this application is for a reciprocal from another accredited teaching agency or program (\$41.61), a copy of a valid government issued photo id must be attached and a copy of your certificate of examination from that agency or program.
- ✓ Enter the date as "MM/DD/YYYY".
- ✓ Enter your name as it appears on your present certificate and photo ID.
  - if your name does not match on these two documents, enter your name as you want it to appear on your duplicate or reciprocal certificate and attach an explanation on a separate page and submit with your application.
- ✓ Check and enter your preferred mail address, either home or business.
- ✓ Clearly enter your email address
- ✓ Sign the application
- ✓ Submit the application:
  - By email (preferred) to: [CHS@houstontx.gov](mailto:CHS@houstontx.gov)
  - By postal mail to: Consumer Health Services Bureau P.O. Box 300008 Houston, TX 77230-0008

Your application will be processed within 2 business days of receipt and an invoice for \$29.72 for a duplicate or \$41.61 for a reciprocal will be emailed to the email address you provided on the application. Payment options will be included with the emailed invoice.

