

ACFSA

Certified Correctional Foodservice Professional

Re-certification CEU Tracker

Name: _____ Date: _____

Complete this form and submit to ACFSA headquarters with the necessary documentation, completed application, and re-certification fee by the expiration date of your certification. An additional fee will be required if re-certification packet is received past the expiration date. Additional sheets may be added if necessary.

Current CCFP Level: _____ Requesting CCFP Level: 3 2 1 (circle one)

All CEUs must be job related and completed within the four-year certification period.

Attach verification of the following:

- Current food safety certification
- Verification documents of all requested CEUs

Elective / Experience / Training (Course Name, Sponsoring Organization)	Date(s)	CEUs Requested
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1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____
11. _____
12. _____
13. _____
14. _____
15. _____

Total CEUs Requested: _____