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**CATEGORY I-1, I-2, AND II FOOD ESTABLISHMENTS**  
*Mandatory Certified Food Protection Manager Schedule*

Name of Establishment: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

A Certified Food Protection Manager must be present at all times the facility is in operation for Category I-1, I-2 and II establishments. Provide two (2) weeks' worth of work schedules for these employees (see reverse side for schedule).

1) Name: \_\_\_\_\_ ID#: \_\_\_\_\_

Position: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

2) Name: \_\_\_\_\_ ID#: \_\_\_\_\_

Position: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

3) Name: \_\_\_\_\_ ID#: \_\_\_\_\_

Position: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

4) Name: \_\_\_\_\_ ID#: \_\_\_\_\_

Position: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

5) Name: \_\_\_\_\_ ID#: \_\_\_\_\_

Position: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

6) Name: \_\_\_\_\_ ID#: \_\_\_\_\_

Position: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

\_\_\_\_\_  
(Signature (Owner/Manager))

\_\_\_\_\_  
(Date)

# Certified Food Protection Manager Schedule

A Certified Food Protection Manager must be present at all times the facility is in operation

TIME	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
12:00 a.m.							
1:00 a.m.							
2:00 a.m.							
3:00 a.m.							
4:00 a.m.							
5:00 a.m.							
6:00 a.m.							
7:00 a.m.							
8:00 a.m.							
9:00 a.m.							
10:00 a.m.							
11:00 a.m.							
12:00 p.m.							
1:00 p.m.							
2:00 p.m.							
3:00 p.m.							
4:00 p.m.							
5:00 p.m.							
6:00 p.m.							
7:00 p.m.							
8:00 p.m.							
9:00 p.m.							
10:00 p.m.							
11:00 p.m.							

Date Reviewed: \_\_\_\_\_

Reviewed by: \_\_\_\_\_