

School District of Clear Lake Kitchen Use Form

(To be completed in conjunction with the Building Request Form)

Date:					
Organization and Responsible Party					
Phone #	E-ma	E-mail Address:			
Requested Use Date:	Time:	to	Elementary	High School	
Kitchen Equipment requesting to	o use/borrow: (plea	se be specific):			
Stahan Haa Cuitania					
(itchen Use Criteria	ywaaks priar ta ayar	at boing bold			
Request permission two Request prior permission		=	e food in refrigerator/freeze	ar	
			d using soap and water.	-1.	
The equipment used will		- ,	• .		
 Serving utensils need to 	be left on the count	ter in the dish roo	om to be sanitized by the Fo	ood Service Staff	
prior to next use.					
 Floors must be swept ar 	• •				
Make sure all ovens, sto	• •				
Make sure cooler and fr No shildren under age 1	_	•			
 No children under age 1 	.2 allowed in kitchen				
Yes, I agree to the abo	ve criteria.	Contact's Signa	ature		
		Or			
A member of the Food Service equipment during a function/e	=			_	
jacketed kettle, mixer, and stea	•	•	0 , , , , ,	1,	
Approved by:					
Elementary Principal		_	High School Principal		
· '					

Cc: to District Office when billing is required.

Food Service Director