

PENNSTATE



Name: _____

Job title: _____

Place of employment: _____

Address: _____

Phone: _____

Fax: _____

E-mail: _____

Work Experience beginning with your current position:
(Please identify, verify, and document your past three years of culinary experience and identify an additional two years of documented supervisory experience-total= 5 years.)

Education:
(Please identify, verify, and document your educational background in chronological order, including American Culinary Federation Certification updates, such as ServSafe, HACCP Training, and Management Workshops.)

Other Activities:
(Please site any activities or information that you believe has accentuated your work experience and education.)

***Attach documentation of current American Culinary Federation level of certification**