

CAFETERIA VOLUNTEERS 2023-24 SCHOOL YEAR

Chairperson: Tina Caldwell (304) 546-3081 tscurlly@suddenlink.net

- Three volunteers are needed Monday-Friday
- Lunch Duty is 10:30 AM – 1:00 PM. The third volunteer works .
from 11:15 AM – 1:00 PM.
- Return this form to the CCHS office

VOLUNTEER'S NAME: _____

PHONE: _____

E-MAIL: _____ (**Please print legibly—this is how we will communicate with you** along with the Group Me App)

Preferred Day(s):

___ MONDAY ___ TUESDAY ___ WEDNESDAY ___ THURSDAY ___ FRIDAY (If no preferred day is checked, you will be scheduled when needed)

have completed the online test for food handlers as required by the Kanawha County Health Dept. (see below)*

Are there volunteers you wish to work with monthly?

NAME(S): _____ (Please confirm preferred day with these volunteers) _____

***The Kanawha County Health Department requires all cafeteria volunteers to successfully complete an online test before handling and serving food to students. You will be added to the schedules *after* you have successfully completed the test. Please contact the school office to obtain a voucher number that you will use to sign in before beginning the online test. Cards are good for two years.**

Go to: www.statefoodsafety.com/CustomPortal/KanawhaCharlestonCounty and proceed as follows:

Click Food Handler

Select 2-year card

Select Language and then Proceed to Cart

Enter Voucher Code

Complete A or B:

A. _____ I completed VIRTUS training in ___ (month)/ _____ (year)

@ _____ school Specify _____

_____ church Specify _____

_____ pastoral center Specify _____

_____ other Specify _____

Print Name _____ Signature _____

B. _____ I have not yet completed VIRTUS training. I understand that VIRTUS training is mandatory for all adults volunteering at CCHS as well as throughout the Diocese of Wheeling – Charleston. I will complete this training as soon as possible and will not be placed in any volunteer capacity at CCHS until I complete my VIRTUS training.

Print name _____ Signature _____