

ServSafe Certified Food Protection Manager COURSE / EXAM

Given by the Ledge Light Health District and Uncas Health District

When: Monday, September 15, 2025 (Class taught in **English**)

OR

Monday, September 22, 2025 (Class taught in **Spanish**)

Where: The Place for CommUNITY Wellbeing 74 Garfield Ave.,
New London, CT

Time: 9:00am – 3:00pm

Cost: \$175.00 (includes course book & exam)

Seating is Limited!

Spots will not be reserved without registration.

Participants must register with the Ledge Light Health District by
Monday – September 8, 2025, in order to attend.

860-448-4882

tdo@llhd.org

Are you compliant?

CERTIFIED FOOD PROTECTION MANAGER (CFPM): Sec. 19a-36h-4. Certified food protection manager and alternate person in charge. (a) Each Class 1, 2, 3, and 4 food establishment shall have a person in charge who meets the requirements of section 2-102.11 of the food code and who is on-site at the food establishment at all times the establishment is operating. **(b) At all times, a class 2, 3 and 4 food establishment is operating, the person in charge shall be a certified food protection manager.**

Exams may be available in other languages upon request
at time of registration.

A translator may be present during the course only.

Please let us know at the time of registration if you need any special accommodations.

**CERTIFIED FOOD PROTECTION MANAGER COURSE / EXAM
REGISTRATION FORM**

Course Dates: Please Select One

- ☐ Monday, September 15, 2025 (Taught in English)
- ☐ Monday, September 22, 2025 (Taught in Spanish)

*The Place for CommUNITY Wellbeing
74 Garfield Avenue, New London, CT 06320*

The fee for this course is \$175.00

Please make check payable to: *Ledge Light Health District*

Option to pay online at: www.llhd.org

Registration for the class is not complete until payment is received.

Please complete all information with phone number/email in case of cancellation

Name: _____

Address: _____

Phone: _____

Organization: _____

Email: _____

Book/Exam Language (Circle One): English Spanish Chinese Other _____

FOR OFFICE USE ONLY

Date Paid: _____

Check #: _____ Cash: _____ C/C: _____ Invoiced: _____ Receipt #: _____

Received ServSafe Course Book: ☐ YES ☐ NO

Course book received by (please print name): _____