

# Food Protection Manager Certification In-Person Class



**Where:** Sarah Bush Lincoln Health Center - Fleming & Osler Rooms on the North Wing of the Education Center

**When:** Monday, March 25, 2024  
8:00 am - 5:00 pm class time, exam following

**Cost:** \$120.00

**Contact the Coles County Health Department for more information and to enroll:**

Call: 217-348-0530  
or email Kim Ross  
kross@co.coles.il.us



**Public Health**  
Prevent. Promote. Protect.



**neha** National Environmental  
Health Association



**Coles County Health Department**  
**Food Protection Manager Certification In-Person Class**

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or email Kim Ross [kross@co.coles.il.us](mailto:kross@co.coles.il.us)

The Certified Food Protection Manager class and exam will be offered at this in person class. Registration is required and is first come, first serve.

Payment must be made upon enrollment with cash, check, or money order or can be paid online with Court Pay at:

[https://www.courtmoney.com/payments/info/form/Coles\\_IL\\_Health\\_Department\\_Payments](https://www.courtmoney.com/payments/info/form/Coles_IL_Health_Department_Payments)

Study books will be loaned out to study and collected on class day, please make arrangements to pick up a book to borrow, this will help you to prepare and pass the exam.

**Please fill out enrollment form with payment and submit to:**

Coles County Health Department

Environmental Health

825 18<sup>th</sup> Street

Charleston, IL 61920

**Food Protection Manager Certification In-Person Class Enrollment Form**

Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Email address: \_\_\_\_\_

Workplace/Business name: \_\_\_\_\_

Workplace/Business address: \_\_\_\_\_

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

Is this the first time you have taken this course? yes \_\_\_\_\_ no \_\_\_\_\_

Do you require special accommodations?

\_\_\_\_\_  
\_\_\_\_\_

*For office use only*

Fee paid \_\_\_\_\_

Book # \_\_\_\_\_ Book returned: yes \_\_\_\_\_ no \_\_\_\_\_ Certificate Issued: yes: \_\_\_\_\_ no: \_\_\_\_\_