CRAVEN COUNTY
HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH

2818 Neuse Blvd
New Bern, NC 28562
(252) 636-4936

FOOD SAFETY ADVISORY COUNCIL MEMBER APPLICATION

Food Program Application

Submit application via email to envhealth@cravencountync.gov or regular mail. For more information about the Food Safety Advisory Council (FSAC), see our website at cravencountync.gov. Contact Margareta Slagle at (252) 636-4936 if you have any questions or concerns.

APPLICANT INFORMATION	
First and last name	*Contact phone*
Mailing street address	

City	State	Zip code

Email address

MEMBERSHIP CATEGORY (SELECT WHICH CATEGORY APPLIES TO YOU)

Owner or manager of a:
- ☐ Full-Service restaurant
- ☐ Limited-service restaurant
- ☐ Fast food restaurant
- ☐ Temporary event
- ☐ Catering company
- ☐ Mobile unit
- ☐ School
- ☐ Commissary kitchen
- ☐ Other _____

Name of food establishment:
_____

Public:
- ☐ General public member with an interest in food sanitation, safety, and operation
- ☐ Non-managerial food service employee
- ☐ Public interest group
- ☐ Food education
- ☐ Legislature
- ☐ Health care professional
- ☐ Other _____

Name of organization (if applicable):
_____

Why are you interested in being a member of the FSAC?

CERTIFICATION AND ACKNOWLEDGEMENT

By signing this document, I certify that the above information is provided as true and accurate to the best of my knowledge. I understand that:
- ☐ I will be expected to attend FSAC meetings regularly.
- ☐ I will notify the Health Department if my membership category changes.

Owner/ Applicant name printed   *Owner/ Applicant signature*   *Date*