

ATTESTATION FORM

Please review the Compliance Training requirements for participation in the 2024 Summer Food Service Program:

By signing below, I am certifying I have attended the mandatory 2-hour site training, reviewed the contents of the referenced materials below, and agree to abide by all regulatory laws and procedures as outlined in these documents.

- SFSP 2024 Training PowerPoint & FDACS Civil Rights
- FDACS Food Safety Video
- 2024 Meal Tracking Record guidance provided by the FLIPANY office
- SFSP 2024 Addendum provided by the FLIPANY office
- SFSP 2024 Fiscal Responsibility Agreement

I attest that I have received and reviewed with my staff and will communicate any/all suspected violations.

PRINT NAME:	

SIGNATURE: ______

SITE-PROGRAM NAME: _____

DATE ATTENDED TRAINING: _____