

NO SHOWS

1ST _____

2ND _____



APPLICATION # _____ - _____

DATE CERTIFIED _____

EXPIRATION DATE _____

**MONTGOMERY COUNTY
ENVIRONMENTAL HEALTH SERVICES**

501 N. THOMPSON, SUITE 100
CONROE, TEXAS 77301

(936) 539-7836 • (281) 364-4200 EXT 7836 • FAX (936) 788-8388

**APPLICATION FOR
FOOD MANAGER PERMIT**

PLEASE TYPE OR PRINT CLEARLY

DATE: ____/____/____

NAME: _____ TELEPHONE #: (____) _____

MAILING ADDRESS: _____ TX _____
Number Street City Zip

DRIVERS LICENSES #: _____ STATE: _____

EMAIL ADDRESS (REQUIRED): _____

NON-REFUNDABLE APPLICATION FEE:

8 HOUR COURSE: \$50.00 [] CLASS DATE REQUESTED _____

RECIPROCITY: \$25.00 [] ****ENCLOSE COPY OF STATE APPROVED CERTIFICATION****
(Transferring State approved Food Management Certification to Montgomery County)

SIGNATURE

- *Must submit application and payment in advance of requested class. You must verify class availability.
- *Confirmation letters will be issued to **email** address or in person unless requested otherwise.
- *One reschedule allowed per applicant on emergency bases only (**approved by this office**). Course must be taken within three (3) months of application date.
- *Replacement applications must be submitted with three (3) days of class to replace original applicant.