

Food Service Department Rules

1. Upon reporting to the facility, please put coat and personal belongings in the coat closet (get the key from supervisor), wash your hands, put on your apron, hairnet, and gloves and see the kitchen manager or cook on duty for any necessary supplies, information, or instructions.

2. Proper attire is required
 - clean clothing, **no revealing or sleeveless clothing, halters, midriff tops, shorts**
 - closed in nonslip shoes/boots--**no cloth shoes, sandals, high heels.**
 - socks/stockings -- **no bare legs**
 - No large or hanging jewelry-- earrings, necklaces, bracelets
 - You may wear:
 - wedding band
 - watch
 - small post earrings
 - hairnet/overseas cap (depending on length of hair)
 - aprons
 - gloves – wash hands before putting them on and change them if you sneeze or cough into them, touch your mouth face, hair, raw food, soiled items or garbage or when returning from the restroom.

4. **No chewing gum**
 No smoking
 No eating
In Food Preparation & Serving Areas

5. Your help is crucial. Please call me (963-2626 x222) or kitchen staff (963-2626 x214), or the client care supervisor (963-2626 x223) as soon as you know or at least 1 hour before you are scheduled if you will not be coming or will be late.

6. Please do not consume or remove any food from the refrigerators, freezers, pantry, or from the premises without the express permission of the Food Service Director, Kitchen Manager or cook on duty we have allocated food and supplies to other programs.

7. You are welcome to have a meal of whatever is on the menu for the soup kitchen lunch each day that you are here.

8. Each guest receives only 1 tray or serving of food, do not distribute additional food to anyone without the approval of the Food Service Director, Kitchen Manager, or cook on duty. We want to be sure that everyone gets served.

9. Let the Kitchen Manager or cook in charge know when you are leaving and please **lock the coat closet after you remove your belongings.**

These rules are required to meet the health and safety regulations of the Westchester County Department of Health and policies of The Sharing Community, Inc.

I UNDERSTAND THAT MY SIGNATURE BELOW INDICATES THAT I HAVE READ AND UNDERSTAND THE ABOVE RULES AND HAVE RECEIVED A COPY OF THE "Food Service Department Rules".

X _____
volunteer (print)

X _____
volunteer signature _____
Date

X _____
Supervisor Signature

Date