# ServSafe® Registration Registration deadline is 3 weeks prior to the class date and/or as soon as the class is full.

Date of Class:	Location of Class:		
Name:	Company:		
Address:			
City:	State:_	Z	Zip Code:
Phone number:	number:E-mail:		
Are you a member of the Iowa Restau	urant Association (check one):	Yes	No
lowa county where employed:			
Mailing address to send book (if different	rent than above):		
Type of food establishment (check on	ne):		
		Commercial (food packaging, manufacturing)	
· · · · · · · · · · · · · · · · · · ·		Education (K-12 school, college, university)	
Retail (restaurant, tavern, conve	enience store, etc.)	_Other (self-employ	ved, city/state government)
Type of class (check one):	Full class (\$150)Re-testing (\$50) (\$160 after July 1, 2020) (\$60 after July 1, 2020)		
<b>Language of book needed</b> : Note: Books are written solely in the language	indicated, they are not bilingual.		
English	Chinese	Korean	Spanish
Language of exam needed: Note: All exams other than English are bilingua	al. This means the questions are writte	n in both English and th	ne selected foreign language.
English only	Chinese/English	French Canadian/English	
Instructor (in English only)	Japanese/English	Korean/English	
Large print (in English only)	Spanish/English		
Will participant be requesting any exe Examples of Exam Accommodations: scribe, extra time, sign language inter	reader (have exam read to you		
Interpreter needed? (check one)	YesNo		
Will participant use a bilingual Englis	sh-native language dictionary?	(check one)	Yes No

## ServSafe® Registration, cont.

#### **Payment and Mailing Instructions**

\*\* Registration is not complete until payment is received! \*\* Complete form and mail/fax with payment to:

\*\*Iowa State University, Registration Services, 1601 Golden Aspen Dr, Ste 110, Ames, Iowa 50010 | Fax: 515-294-6223

OPTION 1 - PAYMENT ENCLOSED	OPTION 2 – SEND BILL/INVOICE TO EMPLOYER
☐ Check (payable to Iowa State University)	☐ Mail invoice to:
☐ Credit Card: ○ Visa ○ MasterCard ○ Discover	Name:
Card Number:	Company:
Exp. Date:CVV:	Address:
Cardholder Name:	
Signature:	
promotional, commercial, educational and research pur University (ISU) Extension and Outreach permission to photograph, image, or likeness, and/or a recording of me this form and participation in this event indicate my ass ISU. If you are the parent or legal guardian of the child granting permission as indicated in this form to ISU Ext registering a third party, your completion of the registrat to complete the registration on behalf of the organization or a represented party prefer not to be photographed, p submission and notify the event photographer or videographer.	ny voice or the event in whole or in part. My submission of ent to these terms without further obligation on behalf of being registered, by signature to this form you are tension and Outreach on their behalf. If you are tion form represents and warrants that you are authorized on/individual and grant the rights permitted therein. If you blease contact ISU Extension and Outreach prior to grapher.
Signature:	
Communication  I consent to receive related event communic  If you leave the box unchecked, you will not receive	ation via email from ISU Extension and Outreach. eive email messages about future events.

## IOWA STATE UNIVERSITY Extension and Outreach

Fees for service will be used to offset direct expenses and to support the Human Sciences County Extension Program. This institution is an equal opportunity provider. For the full non-discrimination statement or accommodation inquiries, go to <a href="https://www.extension.iastate.edu/diversity/ext">www.extension.iastate.edu/diversity/ext</a>. February 2020

### ServSafe® Registration, cont.

#### Reasonable accommodations may be available upon request.

Allow at least five weeks total prior to the class date for the accommodation request and instructor notification process.

- All exam accommodation requests are handled exclusively through ServSafe<sup>®</sup>.
  - o A link to accommodation request forms can be found below.
  - Allow at least two weeks for ServSafe® to process any accommodation request.
- ServSafe® will notify you via email of an approved or denied accommodation status. It is then YOUR responsibility to notify your instructor of an approved accommodation.
  - o Instructors need to be notified at least three weeks prior to the class date of your approved accommodation.
  - If you do NOT let your instructor know of a confirmed and granted Accommodation Request at least 3 weeks
    prior to the class date, you will NOT be allowed to take the exam on the class date. This means you would need
    to take the exam on another date -- at your expense. Adequate time is needed to make arrangements for an
    additional room and proctor.
  - Contact information for your instructor is provided in your registration confirmation e-mail. You will receive this
    confirmation e-mail from Iowa State University Registration Services as soon as your registration is complete
    and payment is received.

#### **Request Forms**

If you are requesting an accommodation(s), you will need to submit the Accommodation Forms directly to ServSafe®.

- 1. To access the forms, go to <a href="https://iastate.box.com/s/xu3l1c828ozfhl9uzlzm10qnr0ovkb2">www.servsafe.com/downloads/pdfs/handbooks/ssfs-exam-handbook</a> If you want more information on how to submit for an accommodation(s), first review these forms: <a href="https://iastate.box.com/s/xu3l1c828ozfhl9uzlzm10qnr0ovkb2">https://iastate.box.com/s/xu3l1c828ozfhl9uzlzm10qnr0ovkb2</a>j
  - How to Request Exam Accommodations-Guidelines and FAQs pages 26-27
  - How to Request Foreign Language Translations-Guidelines and FAQs pages 28-29
- 2. If you decide to apply for an accommodation(s), you need to submit the corresponding form: https://iastate.box.com/s/p79fjnrpp9kt40r3jjlt2uvy8so96brr
  - Exam Accommodation Form (Appendix F) pages 38-39
  - Request for Foreign Language Translation page 40 and Translator Nondisclosure & Confidentiality Agreement - page 41

#### **Dictionary Use**

Note from ServSafe® handbook page 9: Examinees who want to take the Exam in English are permitted to use a printed bilingual English-native language dictionary (e.g., English-Spanish) during the exam. The use of a dictionary needs to be reported by proctor. English-language dictionaries are not allowed. Dictionary will be inspected by the proctor at check-in.

## IOWA STATE UNIVERSITY Extension and Outreach

Tell Us About Yourself (optional)

#### What year were you born? Have you ever served on active duty in the U.S. Armed Forces, Reserves, or National Guard? Are you of Hispanic, Latino or Spanish origin? ■ Never served in the military Only on active duty training in the Reserves or ■ No National Guard ■ Now on active duty What is your racial background? (Check all that apply.) On active duty in the past, but not now ☐ American Indian or Alaskan Native □ Asian How would you describe your disability/ability status? (Check all that apply.) ■ Black or African-American ☐ I do not identify with a disability or impairment ■ Native Hawaiian or other Pacific Islander ☐ A sensory impairment (e.g., vision or hearing) ■ White ☐ A learning disability (e.g., ADHD, dyslexia) □ Other ☐ A long-term medical illness (e.g., epilepsy, cystic fibrosis) To which gender identity do you most identify? ■ A mobility impairment ☐ Female ■ A mental health disorder ■ Male ☐ A temporary impairment due to illness or injury ■ Prefer to self-identify (e.g., broken leg, surgery) Prefer not to respond ☐ A disability or impairment not listed above Prefer not to respond