关于举办2018年学校食堂从业人员培训班的通知

各中小学、幼儿园：

 为进一步贯彻落实《食品安全法》、《学校食堂与学生用餐卫生管理规定》等法律法规，提高学校食堂从业人员的食品安全意识和业务能力，预防学校食堂食品安全事故的发生，确保师生身体健康和生命安全。经研究，决定举办我区2018年学校食堂从业人员培训班，现将有关事项通知如下：

一、参训人员

1.各中小学分管校长、总务主任、食堂食品安全管理员；各幼儿园分管园长、食堂食品安全管理员。

2.学校食堂部分从业人员。

二、培训时间

8月29日（星期三），会期一天，上午8:15前报到。

三、培训地点：

华罗庚实验学校新城分校

四、学习培训内容：

1.学习《食品安全法》、《学校食堂与学生集体用餐卫生管理规定》等相关法律法规；

2.对学校食堂从业人员进行食品安全知识、规范操作及事故处置等培训。

五、培训要求

1、各校食品安全管理员报到时上交学校食堂从业人员培训登记表；

2、参训人员必须带上笔记本，认真做好学习笔记；

3、严肃培训纪律，全体参训人员不得缺席，不得迟到、早退。

附件1：金坛区2018年学校食堂从业人员培训安排表

 附件2：学校食堂从业人员培训登记表

 二〇一八年八月二十一日

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| 附件1：金坛区2018年学校食堂从业人员培训安排表**各校参加会议人数安排表**

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| --- | --- | --- | --- | --- | --- |
| 学校 | 人员 | 学校 | 人员 | 学校 | 人员 |
| 华罗庚中学 | 6 | 尧塘小学 | 4 | 东方幼儿园 | 2 |
| 一中 | 6 | 水北小学 | 3 | 河头幼儿园 | 2 |
| 四中 | 6 | 汤庄小学 | 3 | 尧塘中心幼儿园 | 2 |
| 金沙中学 | 6 | 后阳小学 | 4 | 水北幼儿园 | 2 |
| 省金坛中专 | 6 | 白塔小学 | 3 | 水北新欣幼儿园 | 2 |
| 华罗庚实验学校 | 8 | 薛埠小学 | 4 | 康苗幼儿园 | 2 |
| 二中 | 5 | 罗村小学 | 3 | 尧塘东榭幼儿园 | 2 |
| 三中 | 5 | 花山小学 | 3 | 金城镇中心幼儿园 | 2 |
| 五中 | 5 | 茅麓小学 | 3 | 后阳幼儿园 | 1 |
| 段玉裁中学 | 3 | 西旸小学 | 3 | 白龙荡幼儿园 | 2 |
| 少体校 | 3 | 直溪小学 | 4 | 白塔幼儿园 | 2 |
| 华实新城分校 | 4 | 明珍实验 | 3 | 指前镇中心幼儿园 | 2 |
| 西城小学 | 4 | 建昌小学 | 3 | 洮西幼儿园 | 1 |
| 东城小学 | 4 | 朱林小学 | 4 | 社头幼儿园 | 1 |
| 段玉裁小学 | 4 | 西岗小学 | 3 | 儒林镇中心幼儿园 | 2 |
| 华城小学 | 4 | 唐王小学 | 3 | 五叶幼儿园 | 2 |
| 河滨小学 | 4 | 社头小学 | 3 | 直溪镇中心幼儿园 | 2 |
| 常胜小学 | 4 | 洮西小学 | 3 | 建昌幼儿园 | 1 |
| 朝阳小学 | 4 | 儒林小学 | 4 | 登冠幼儿园 | 2 |
| 城西小学 | 4 | 五叶小学 | 3 | 朱林镇中心幼儿园 | 2 |
| 启智学校 | 3 | 涑渎小学 | 3 | 西岗幼儿园 | 2 |
| 综合实践基地 | 4 | 河头小学 | 4 | 唐王幼儿园 | 2 |
| 岸头实验 | 4 | 实验幼儿园 | 4 | 薛埠镇中心幼儿园 | 2 |
| 尧塘中学 | 3 | 实幼文萃分园 | 2 | 西旸幼儿园 | 1 |
| 河头中学 | 3 | 春风幼儿园 | 2 | 罗村幼儿园 | 1 |
| 水北中学 | 3 | 虹桥幼儿园 | 2 | 花山幼儿园 | 1 |
| 白塔中学 | 3 | 翠园幼儿园 | 2 | 茅麓幼儿园 | 1 |
| 薛埠中学 | 3 | 卫生幼儿园 | 2 | 涑渎小学幼儿园 | 1 |
| 茅麓中学 | 3 | 金谷新语幼稚园 | 2 | 岸头幼儿园 | 1 |
| 直溪中学 | 3 | 红太阳幼儿园 | 3 | 希望幼儿园 | 2 |
| 建昌中学 | 3 | 美地蓝庭幼儿园 | 2 | 南洲幼儿园 | 2 |
| 朱林中学 | 3 | 新城幼儿园 | 3 |   |   |
| 西岗中学 | 3 | 华城幼儿园 | 4 |   |   |
| 指前实验 | 4 | 华城二村分园 | 1 |   |   |
| 社头中学 | 3 | 华城华胜分园 | 1 |   |   |
| 洮西中学 | 3 | 华城景潭分园 | 1 |   |   |
| 儒林中学 | 3 | 慧乐幼儿园 | 2 |   |   |

附件2： 学校食堂从业人员培训登记表 |  |
| 学校名称（盖章）： | 　 |  |
|  |  |  |  |
|  | 序号 | 姓 名 | 性别 | 年龄 | 健康体检年月 | 备注 |
| 区培训人员 | 　 | 　 | 　 | 　 | 　 |  |
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| **注：此表报到时上交。** |  |