



# School Kitchen Usage Request Form

WESD Nutrition Services 602-896-5235

(RETURN FORM TO YOUR SCHOOL'S CAFETERIA FOR APPROVAL 3 weeks prior to event.)

|                                      |                                      |                                   |
|--------------------------------------|--------------------------------------|-----------------------------------|
| WESD Site/School:                    | Organization Requesting Kitchen Use: | Today's Date:                     |
| Organization Representative/Contact: | Contact Number:                      | Contact E-mail:                   |
| Type of Event:                       | Date of Event:                       | Purchase Order # (if applicable): |
| Time Event Begins:                   | Time Event Ends:                     | Number Attending:                 |

**Type of Food and Drink to be Prepared and Served:**

**A:** Equipment to be used: *\*May not be available at all sites.*

No Equipment to be used   
  Oven   
  Hot Holding Cart   
  Grill\*(permit/variance may be required)  
 Mixer   
  Steamer\*   
  Kettle\*   
  Sheet Pans   
  Full-Size Pans   
  Spoons   
  Knives  
 Serving Line with Hot/Cold Wells

**B:** Storage area(s) to be used:

No Storage Required   
  Storeroom   
  Freezer   
  Walk-In Refrigerator   
  Prep Area

**C:** Access to Kitchen is requested: **NO** food service equipment, smallware or storage areas will be used.

Hand Sinks   
  3-compartment Sinks   
  Carts   
  Serving Line (without heat/cooling)

**D:** Expendable products in Kitchen that can be ordered at a cost to you:

Disposable Trays   
  Plastic Utensils   
  Paper Goods   
  Disposable Gloves   
  Plastic Wrap/Foil  
 Dish Soap/Cleaning supplies   
 Additional Items Needed \_\_\_\_\_

❖ Please do not use expendable products that are available in Kitchen that you did not order, fees will apply.

- When specified equipment is used (Section A) use of the Kitchen is not permitted unless an authorized WESD Nutrition Staff Employee is present to supervise the operation of equipment and safeguard food and supplies.
- A Kitchen Facilities usage fee of \$26.00 per hour will be charged for each Nutrition Service Employee needed for the event. There is a 2-hour minimum.
- When specified equipment or storage areas (Section B and/or C) are used, a Nutrition Service Employee does not have to be on duty. **A Kitchen Usage Form is still required** and the organization representative assures safeguarding equipment and cleaning the premises. Additional fees may apply if additional cleaning by Nutrition Services is needed or losses due to damages.
- Food brought into the Kitchen must come from an approved food vendor.
- **A confirmation e-mail will be sent to you regarding approval of Kitchen Usage and fees.**

For all other special events held outside of the Kitchen area, the organization representative should contact Maricopa County Environmental Services Department, 602-506-6980, <http://maricopa.gov/EnvSvc/> to obtain permit/variance.

**FOOD PRODUCED IN PRIVATE HOMES MAY NOT BE USED OR OFFERED FOR HUMAN CONSUMPTION IN A SCHOOL KITCHEN AS A LICENSED FOOD ESTABLISHMENT. (MARICOPA COUNTY HEALTH CODE 3-201-11)**

**I AGREE to all terms and conditions listed above.**

Signature of Organization Representative: \_\_\_\_\_ Date: \_\_\_\_\_

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| <p><i>WESD Nutrition Services Use Only:</i><br/>                 Nutrition Services Staff Assigned/Time : _____,<br/>                 Total Estimated Fees: Total Hours X \$26.00 = \$ _____ + Supplies _____ = Total \$ _____<br/>                 Approval Nutrition Services: _____</p> |
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