

SAMPLE Food Safety Log Week 1

Week Commencing: _____ Checked by: _____ Date: _____

	Date		Date		Date		Date		Date	
	Mon		Tues		Wed		Thurs		Fri	
(Sign Daily/ Record Temperatures)	Time/ Signature	Temp:	Time/ Signature	Temp:	Time/ Signature	Temp:	Time/ Signature	Temp:	Time/ Signature	Temp:
Fridge 1 (0° - 5°C)										
Freezer (-15° / - / -18°C)										
Dishwasher temp. 82°C< (Day Dots)										
Good personal hygiene observed										
Hand washing/ correct use gloves										
Cleaning schedule completed										
Good storage practices										
Good food handling practices observed										
Signed: (Initial)										

Reheating/ Cooking/ Holding Temperatures

Date	Cooking/ Reheating			Service						Corrective Action	Sign	
	Item	Time	Temp	Hot Meal			Cold Meal					
Item				Time	°C	Item	Time	°C				

Corrective Action Summary

Date	Problem / Non Conformance	Corrective Action Taken	By who	Date Completed