

**CERTIFICATE APPLICATION
FULLERTON COLLEGE
NATURAL SCIENCE DIVISION**

Applying for: **Dietary Manager Certificate**

State Control # 2C42394

Instructions:

Date _____

- 1) Please print clearly when completing this application.
- 2) Please send your completed application and your unofficial transcripts to the Dietary Manager Faculty Advisor rhiggins@fullcoll.edu and the Natural Sciences Division Office atriefenbach@fullcoll.edu

LAST NAME _____ **FIRST NAME** _____

Address _____ **City** _____ **Zip** _____

Phone Number (____) _____ **FC Student ID #** _____

First Year Enrolled at FC _____ **Claiming Catalog Rights? Y/N** **If Yes, what year?** _____

REQUIRED COURSES (16 units)	Units	Grade	Term	Currently Enrolled	Taken at FC	Other College
NUTR 210 F: Human Nutrition or NUTR 210HF: Honors Human Nutrition	3					
NUTR 230 F: Introduction to Medical Nutrition Therapy	3					
NUTR 295 F: Nutrition and Foods Internship	4					
FOOD 110 F: Food Safety and Sanitation	3					
FOOD 120 F: Food Service Management	3					

Transcripts must be on file at FC. A minimum grade of "C" is required for each course taken.

Office Use Only: Transcript Request _____ Dean of Natural Sciences _____ President of Fullerton College _____	To A & R _____ Issue Date _____ Mail Date _____
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