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**FSMA Produce Safety Alliance Grower Training**

Friday, June 8, 2018; 8:30AM- 5PM

Held at: Missouri Department of Health and Senior Services State Office

930 Wildwood, Jefferson City, MO 65109

***Who should attend:***

Fruit and vegetable growers and others interested in learning about produce safety, the Food Safety Modernization Act (FSMA) Produce Safety Rule and Good Agricultural Practices (GAPs). The PSA Grower Course is one way to satisfy the FSMA Produce Safety Rule requirement that requires “At least one supervisor or responsible party for your farm must have successfully completed food safety training at least equivalent to that received under standardized curriculum recognized as adequate by the Food and Drug Administration.”

***What you will learn:***

Participants will learn about produce safety practices and key parts of the FSMA Produce Safety Rule as outlined within each of seven modules as listed below. There will also be time for questions.

* *Introduction to Produce Safety*
* *Worker Health, Hygiene, and Training*
* *Soil Amendments*
* *Wildlife, Domesticated Animals, Land Use*
* *Agricultural Water (Production and Postharvest)*
* *Postharvest Handling and Sanitation*
* *How to Develop a Farm Food Safety Plan*

*\*\*In order to receive the AFDO certificate, participants must attend all seven modules.*

***For more information, contact:***

Londa Nwadike, KSU/MU Extension Food Safety Specialist

105 E 5th St, Suite 200, Kansas City, MO 64016

Tel: 816 482- 5860

Email: [nwadikel@missouri.edu](mailto:nwadikel@missouri.edu)

***Registration:***Register online at[www.ksre.k-state.edu/foodsafety/produce/](http://www.ksre.k-state.edu/foodsafety/produce/) or fill the printed registration (reverse side) and return to Londa Nwadike at the address listed above.

***Cost*** *is $20/ person, which includes lunch. Cost includes PSA training manual, Association of Food and Drug Officials (AFDO) certificate of completion, light refreshments, lunch, and speaker travel provided by the Extension Service.*

***\*\*\*Reimbursements*** *of up to $150 for up to 25 applicants will be available through the Missouri Food Safety Task Force to go towards the cost of travel expenses such as hotels and mileage to attend the training. Contact Nancy Beyer (by email* [*Nancy.Beyer@health.mo.gov*](mailto:Nancy.Beyer@health.mo.gov) *or call (573)751-6095) with the Missouri Department of Health and Senior Services to request a letter of agreement that must be issued prior to the training in order to qualify for reimbursement.*

This training is generously financially supported by the Missouri Food Safety Task Force, the Missouri Department of Agriculture, and MU Extension. MU Extension will be conducting the training.

*MU Extension is committed to making its services, activities and programs accessible to all participants. If you have special requirements due to physical, visual, or hearing disability, please contact Londa Nwadike at* [*nwadikel@missouri.edu*](mailto:nwadikel@missouri.edu)

*Workshop costs supported by MO and KS Dept. of Ag Specialty Crop Block Grants. Additional funding for travel reimbursement will be made possible through the Food Protection Task Force Grant, provided by the Food and Drug Administration through grant number5R18FD005957-02. The views expressed in written conference materials or publications and by speakers and moderators do not necessarily reflect the official policies of the Department of Health and Human Services; nor does any mention of trade names, commercial practices, or organizations imply endorsement by the United States Government.*



Registration Form-

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* Registration can be done online at: <http://www.ksre.k-state.edu/foodsafety/produce/> or print the registration form and mail it with payment to Londa Nwadike, MU Extension, 105 E 5th St, Suite 200, Kansas City, MO 64106.

*\* Please use the address where your certificate should be mailed.*Please register by June 4, 2018 so that we can prepare enough materials for the course. If you do not enter a valid e-mail address, you will not receive a confirmation of your registration.

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| First Name\* |  |
| Last Name\* |  |
| Street Address\* |  |
| City\* |  |
| State\* |  |
| Postal Code\* |  |
| Country |  |
| Daytime Phone |  |
| Evening Phone |  |
| E-mail Address |  |
| What is the name of your farm? |  |
| Any Dietary Restrictions? |  |