

Handwash Sink Checklist

DATE: _____	Monday	DATE: _____	Tuesday	DATE: _____	Wednesday
Time	Employee Initials	Time	Employee Initials	Time	Employee Initials
7:00 AM		7:00 AM		7:00 AM	
11:00 AM		11:00 AM		11:00 AM	
5:00 PM		5:00 PM		5:00 PM	

DATE: _____	Thursday	DATE: _____	Friday	DATE: _____	Saturday
Time	Employee Initials	Time	Employee Initials	Time	Employee Initials
7:00 AM		7:00 AM		7:00 AM	
11:00 AM		11:00 AM		11:00 AM	
5:00 PM		5:00 PM		5:00 PM	

DATE: _____	Sunday
Time	Employee Initials
7:00 AM	
11:00 AM	
5:00 PM	

DATE: _____	Monday	DATE: _____	Tuesday	DATE: _____	Wednesday
Time	Employee Initials	Time	Employee Initials	Time	Employee Initials
7:00 AM		7:00 AM		7:00 AM	
11:00 AM		11:00 AM		11:00 AM	
5:00 PM		5:00 PM		5:00 PM	

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7:00 AM		7:00 AM		7:00 AM	
11:00 AM		11:00 AM		11:00 AM	
5:00 PM		5:00 PM		5:00 PM	

DATE: _____	Sunday
Time	Employee Initials
7:00 AM	
11:00 AM	
5:00 PM	

SANITATION CHECKLIST:

- 1) HANDSOAP IS FULL / EL JABON PARA LOS ESTA LLENO
- 2) PAPERTOWELS ARE FULL / LAS TOALLIAS ESTAN LLENAS
- 3) SINK IS CLEAN - NO FOOD WASTE / EL LAVABO ESTA LIMPIA

