

National Restaurant Association ManageFirst® Program Instructor and Proctor Application

Complete and sign all pages of this form to become a National Restaurant Association ManageFirst Instructor or Association ManageFirst Proctor for both paper-and-pencil and online* versions of the National Restaurant Association's (Association) ManageFirst Examinations after reading the Association's *ManageFirst Program Examination Administration Handbook*.

For information on becoming a ServSafe® and/or ServSafe Alcohol® Instructor/Proctor visit our website at ServSafe.com.

For information on purchasing the Association's ManageFirst Program textbooks with Examination Answer Sheets or Examination Vouchers, contact your National Restaurant Association Academic representative. Email postsecondary@restaurant.org or visit managefirst.restaurant.org.

Send the completed/signed application by:

Fax: 866.665.9570 or 312.583.9853

-OR-

Email: managefirst@restaurant.org

-OR-

Mail: Attn: Customer Care, 233 S. Wacker Drive, Suite 3600, Chicago, IL 60606-6383

Please allow 3-5 business days for application processing.

Section 1: Applicant Information (complete all fields)

Name _____

Title _____

Employed by (organization name) _____

Address _____

City _____ State _____ ZIP Code _____

Telephone _____ Fax _____

Email* _____

***All communication for approval is done via email. Make sure the email address you provide accepts incoming outside email.**

I am registering as a ManageFirst **Instructor** **Proctor (Please complete Section 3)**

- ManageFirst Instructors are authorized to instruct ManageFirst courses and to proctor ManageFirst Examinations.
- ManageFirst Proctors can proctor ManageFirst Examinations and cannot instruct ManageFirst courses.

Please check class(es) you intend to instruct and/or administer examination(s) for:

- | | |
|---|---|
| <input type="checkbox"/> Hospitality and Restaurant Management | <input type="checkbox"/> Controlling Foodservice Costs |
| <input type="checkbox"/> Hospitality Human Resources Management and Supervision | <input type="checkbox"/> Hospitality Accounting |
| <input type="checkbox"/> Purchasing | <input type="checkbox"/> Customer Service |
| <input type="checkbox"/> Bar and Beverage Management | <input type="checkbox"/> Principles of Food and Beverage Management |
| <input type="checkbox"/> Hospitality and Restaurant Marketing | <input type="checkbox"/> Nutrition |

Note: The ServSafe and ServSafe Alcohol courses are also part of the ManageFirst Program. Individuals must register separately to become instructors/proctors for these two certification courses.

Section 2: Professional References — 2 REQUIRED (List only references we may contact at this time)

Name Title

Organization Phone

Email

Name Title

Organization Phone

Email

Section 3: Class Instructor Information (Complete only if registering as a ManageFirst Proctor)

Name of instructor of ManageFirst course

Title

Employed by (organization name)

Address

City State ZIP Code

Telephone Fax

Email

Section 4: Terms of Agreement

I hereby affirm that the information provided on this application (and accompanying materials, if any) is true and complete to the best of my knowledge. I acknowledge and agree that false information, omissions or misleading information or misrepresentations given in my application may disqualify me from further consideration for proctoring privileges and may be considered justification for revocation of proctoring privileges if discovered at a later date.

I authorize any references named in this application or accompanying materials, to provide the National Restaurant Association with any information that may be requested to arrive at an approval decision. I release all such persons and entities and NRAEF from all liability that may arise from such investigation and release of information.

By my signature on this application, I acknowledge that I have read, understood, and will follow the examination policies and procedures in the *ManageFirst Examination Administration Handbook*, which ensure the confidentiality of examination contents and adherence to the ethics of exam administration. In addition, I will comply with procedures for handling any breach of security that may occur, and will not reveal the contents of any examination or proctor an examination for anyone who is a conflict of interest (this includes relatives). I understand NRAEF has the right to audit my exam administrations at any time and to investigate any allegation of violation of the guidelines. I will be accountable for performing within these guidelines. Furthermore I understand NRAEF may revoke my instructor and or proctor privileges at will. I know that I am responsible for keeping current with changes and new policies implemented by NRAEF.

Signature Date

Section 5: Mutual Nondisclosure and Confidentiality Agreement

This Mutual Nondisclosure and Confidentiality Agreement (hereafter "Agreement") is made this _____ day of _____, 20____, by and between the National Restaurant Association Educational Foundation (NRAEF) and _____ as follows:

Score reports are considered privileged and strictly confidential information. The only individuals authorized by the Association to distribute scores and certificates to examinees are as follows: NRAEF or its designee, the examinees' registered Instructor/Proctor, the examinees' employer, appropriate health/regulatory agencies.

Proctors will hold the score reports in strictest confidentiality and will not divulge the score of any candidate to anyone other than the candidate, the representative of the sponsoring organization, or a health department official in the jurisdiction of the individual candidate. The Proctor or Association will be held liable for any breach of this Agreement.

All information gathered on examinees requiring special arrangements or accommodations in accordance with the Americans with Disabilities Act (ADA) will be considered proprietary and confidential information. This includes information on individuals who assist candidates with special needs. The Association shall not disclose to any person other than the class Instructor/Proctor any confidential information on examinees needing special accommodations as defined under the ADA.

The Instructor/Proctor/Organization will treat all information with reference to any candidate with special needs, or any individual assisting a special-needs candidate, as strictly confidential and privileged information. The Instructor/Proctor/Organization will be held liable for any breach of this Agreement.

The NRA Solutions and Instructor/Proctor/Organization agree to exercise reasonable diligence in maintaining all confidential information. This Agreement will remain in full force and effect for a period of ten (10) years from the date of signing.

This Agreement shall be governed by, construed in accordance with, and enforced solely in the state of Illinois. Each party agrees any claim or action relating to the Agreement shall be commenced exclusively in an appropriate court in the state of Illinois, and each party waives any objection to personal jurisdiction in such the party might otherwise have.

The parties agree that this Agreement shall be interpreted and enforced according to the state of Illinois.

The Agreement represents the entire agreement between the parties and supersedes any prior oral or written agreement, understanding or communication on the subject matter. The provisions hereof shall be binding upon and inure to the benefit of the parties and their successors.

Instructor/Proctor/Organization

By _____

Title _____

Date _____

Organization _____

National Restaurant Association Solutions

By _____

Title _____

Date _____