

[Company Header/Logo]

[Date]

[Recipient Name]

[Recipient Title/Department]

[Organization Name]

[Address]

Subject: Verification of Food Safety Manager Certification

To Whom It May Concern,

This letter is to formally verify that [Employee Full Name] is currently employed at [Establishment Name] as [Job Title] and holds a valid Food Safety Manager Certification.

The certification details are as follows:

- **Issuing Organization:** [e.g., ServSafe, National Registry of Food Safety Professionals]
- **Certificate Number:** [Number]
- **Issue Date:** [Date]
- **Expiration Date:** [Date]

This certification confirms that [Employee Name] has successfully met the requirements and demonstrated the knowledge necessary to manage food safety risks within a retail food establishment, in compliance with [Local/State Health Department] regulations.

Please find a copy of the original certificate attached to this letter for your records. If you require any further information or additional documentation, please contact me at [Phone Number] or [Email Address].

Sincerely,

[Signature]

[Printed Name]

[Title]

[Establishment Name]