## AMERICAN CULINARY FEDERATION SCHENECTADY COUNTY COMMUNITY COLLEGE STUDENT EQUIPMENT WORKSHEET

STUDENT :		<del> </del>	
Circle your PROGRAM OF STUDY : _	_CULINARY	<b>ARTS or HOTEL</b>	& RESTAURANT

NAME OF EQUIPMENT	DATE OF TRAINING	STUDENTS INTIALS	INSTRUCTOR'S INTIALS
3 Compartment Sink / Chemical Usage			
Alto -Sham Oven			
Buffalo Chopper			
Chocolate Tempering Machine			
Coffee Grinder			
Coffee Maker			
Combi-Oven / Steamer			
Convection Oven			
Cryovac Machine			
Deep Fat Fryer - Electric / Gas			
Dishwashing Machine			
Electric Slicer			
Espresso Machine			
Floor Mixer / Attachments			
Garbage Disposal			
Gas Burner Range			
Gas Grill			
Gas Range/Oven Lighting Ignite System			
Ice Cream Machine / Freezer			
Immersion Blender			
Kitchen Aid 3 Qt Mixer			
Mandoline			
Meat Grinder			
Microwave			
Mop Bucket / Chemical Usage			
Pasta Maker			
Quick Chiller			
Robot Coupe / Food Processor			
Salamander / Broiler			
Sharpening Stone			
Sheeter			
Smoker			
Steam Kettle			
Steamer - Electric / Gas			
Table Mounted Can Opener			
Tilting Skillet			
Vertical Mixer			

This completed form should be signed by your academic advisor and attached to your 600 hour work experience form.