

Food Safety Management System Forms



Site Name: Alternate Box Salad		Food Allergen Record Form (to be completed minimum weekly/ or as required) Note: State the name of the cereal(s) containing gluten* and the name of the nut(s)** in the appropriate column <input checked="" type="checkbox"/> Tick where the menu item contains this allergic ingredient Insert 'MC' where the label states 'May contain X' or 'May have traces of X' or similar																
These Allergens are subject to change dependent on individual items. All allergens are correct at time of planning.																		
<input checked="" type="checkbox"/> Tick the allergens that are in the dish Insert 'MC' where the label states 'May Contain'		Celery	Cereal containing gluten *	Crustaceans	Eggs	Fish	Lupin	Milk	Molluscs	Mustard	Nuts**	Peanuts	Sesame seeds	Soya	Sulphur Dioxide &	Record completed By Initials:	Date record completion:	Allergen Champion Check Initials:
Moroccan Falafel	N/A															OF	21.2.25	HS
Red Pepper Hummus													✓			OF	21.2.25	HS
Olives	N/A															OF	21.2.25	HS
Onion Bhaji			MC gluten, wheat													OF	21.2.25	HS
Bombay Rice Salad	N/A															OF	21.2.25	HS
Sweet Curry Dip											mc	mc	mc			OF	21.2.25	HS
Provençal salad															✓	OF	21.2.25	HS
Plant based Chicken														✓		OF	21.2.25	HS
Parsley Emulsion	N/A															OF	21.2.25	HS
House Salad	N/A															OF	21.2.25	HS



Toasted Seeds	N/A													OF	21.2.25	HS
Rocky Road Bites												✓		OF	21.2.25	HS
Strawberries	N/A													OF	21.2.25	HS