

**S.O.P. HOLDER & CERTIFIED OR TRAINED EVENT WORKERS SCHEDULE**

**S.O.P. HOLDER AND/OR DESIGNATE(S):** \_\_\_\_\_

\_\_\_\_\_

(Please Print)

**CERTIFIED OR TRAINED EVENT WORKERS SCHEDULE:  
(MONITORS/BARTENDERS/SERVERS/TICKET SELLERS)**

(Please Print)

<b>Smart Server Name (Please Print)</b>	<b>Certification #</b>	<b>Date</b>	<b>Shift Start Time</b>	<b>Shift End Time</b>

**Note: To be submitted 4 weeks prior to the event and posted with S.O.P. at Bar Location(s).  
Copies of certificates of Smart Serve Program may be requested.**