

**Food Protection Hearing Advisory Board (FPHAB) Application**

**I am interested in volunteering with the Food Protection Hearing and Advisory Board:**

**Name:** Diana Christensen

**Address:** [REDACTED]

**Phone:** [REDACTED]

**Email:** [REDACTED]

**Reason for interest in joining the Food Protection Hearing and Advisory Board:**

I think we need to be watchful in maintaining a high standard in all areas where food is sold to the public. Citizens often seek to alter, ignore or misinterpret laws and ordinances to their personal advantage. This is often in direct violation of the law.

**Please list your relevant qualifications:**

1. I have a degree in Medical Technology. That included several microbiology classes. It also included a year's internship in a hospital laboratory.
2. I worked in medical laboratories for many years.
3. The last 16 years of my career I worked at the Northern Nevada Mental Adult Health Facility on Galletti Way as the only laboratory technologist and as the Infection Control Officer. I was responsible for maintaining Joint Commission compliance in the Laboratory and for Infection Control at NNAMH during that time. I wrote all SOPs. I was responsible for Quality control in these 2 areas. We were always in compliance.

**RECEIVED**

**JUN 13 2024**