Cornell Scheduled Process Form for Acid, Acidified or Low Water Activity Foods

Please	e fill in the form to draft a se	cheduled process f	or approval, or co	py the format and l	ouild your own.
	Produc	t Name			
		Date			
Company Name (if chosen)					
Name of person responsible for product					
		Address			
	City, Sta				
	Telephon	-			
	relephon				
Requ	uired Analyses: Please 1	record values for a	ll that apply – See	Required Analyse	s Sheet
	pH		a _w	(Water Activity)	_
Ingr	edients: Remember to lis	st by weight		•	
	Ingredien	t*		scriptors	Weight
			(fresh, can	ned, sliced, etc.)	(oz, lb, g, kg, etc.)**
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
 * If using vinegar, note the acid strength (stated on the bottle) of the brand you use. Ex: Vinegar (5%). ** All ingredients, even liquids must be weighed. PLEASE do not assume that 1 cup = 8 oz; a cup of garlic powder weighs much less than a cup of molasses. 					
Procedure: List ALL steps necessary to make your product – use reverse side for additional steps. 1.					
2.					
3					
4					
5					
6.					
7					
8.					
9.					
10					
Con	tainer type and size: _				
How will product be sold? Likely buyers: Individuals		Shelf-stable Institutions	Refrigerated Restaurants	Frozen	