Forms should be uniform to create a consist look. The following Standards should be used.

**Forms Standards**

* Use the Form Template in the FCPHForms Drive to create a new form if you haven’t done so already. This form is created in Word.
* All forms should use the header as provided in the template. Under the Form Name always refer to your program (i.e.  Food Protection Program, Immunization Program, Water Quality Program).  Do not refer to them as sections, services or just include the name (like Food Protection).
* All forms must be in table format and should never be on letterhead.
* All rows of your table should be 0.4” high
* All tables should fill the width of the page and be 7.65” long
* Font for the text in the rows is Century Gothic and should be 8 pt
  + Document title size: 14 Bold
  + Section title size (excluding document titles): 12 Bold
* Text in the table is justified to the left and top of the cell (see templates)
* Margins: Top: 1.5” Bottom: 0.5” Left: 0.5” Right: 0.5”
* Other text on the document should follow the Layout Standards.
* No colons should be used following the words.
* The header for the form is only required on page one. If your form is two pages or longer, add appropriate word(s) to explain to the reader to see the next page. Suggested text is (**over →** ).
* The revision date should appear in the footer of all forms.
* The page number should also appear in the footer of all forms longer than one page

**Creating a Table by Copying and Pasting Rows**

Below are a variety of rows that you might use on a form. Follow the instructions below to create the table for your form.

1. [http://t2.gstatic.com/images?q=tbn:fHB-ds-fkZddDM:http://i.msdn.microsoft.com/Bb545459.mouse09(en-us,MSDN.10).png](http://www.google.com/imgres?imgurl=http://i.msdn.microsoft.com/Bb545459.mouse09(en-us,MSDN.10).png&imgrefurl=http://msdn.microsoft.com/en-us/library/bb545459.aspx&usg=__QwVueKhW4Y71-gTBLfZwHDsAV1M=&h=32&w=32&sz=4&hl=en&start=20&zoom=1&itbs=1&tbnid=fHB-ds-fkZddDM:&tbnh=32&tbnw=32&prev=/images?q=four+arrows&hl=en&sa=X&gbv=2&tbs=isch:1,isz:i)Move your cursor to the upper left hand corner of the row you want to copy.
2. Wait for the four directional arrows to appear.
3. Highlight the row by clicking on the arrows.
4. Copy the row. To copy the row, right click and select “copy” or hit Ctrl and “C” on the keyboard.
5. Paste the row.
   1. If this is the first row of the form, click your on the area of the page you want your row to appear. Right click and select “paste”.
   2. If you are adding your selected row to another row, click on the line below your existing row. Right click and select “paste”. Your row should be added to the table.

Single row

|  |
| --- |
| Text |

2 boxes

|  |  |
| --- | --- |
| **Text** | Text |

|  |  |
| --- | --- |
| Text | Text |

|  |  |
| --- | --- |
| Text | Text |

|  |  |
| --- | --- |
| Text | Text |

|  |  |
| --- | --- |
| Text | Text |

3 Boxes

|  |  |  |
| --- | --- | --- |
| Text | Text | Text |

|  |  |  |
| --- | --- | --- |
| Text | Text | Text |

|  |  |  |
| --- | --- | --- |
| Text | Text | Text |

|  |  |  |
| --- | --- | --- |
| Text | Text | Text |

4 Boxes

|  |  |  |  |
| --- | --- | --- | --- |
| Text | Text | Text | Text |

|  |  |  |  |
| --- | --- | --- | --- |
| Text | Text | Text | Text |

|  |  |  |  |
| --- | --- | --- | --- |
| Text | Text | Text | Text |

|  |  |  |  |
| --- | --- | --- | --- |
| Text | Text | Text | Text |

|  |  |  |  |
| --- | --- | --- | --- |
| Text | Text | Text | Text |

5 Boxes

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Text | Text | Text | Text | Text |

Check Boxes

|  |
| --- |
| Text € Text € Text € Text € Text € Text € Text |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Item | Qty | Item | Qty | Item | Qty |
| Text |  | Text |  | Text |  |
| Text |  | Text |  | Text |  |
| Text |  | Text |  | Text |  |

Address Block

|  |  |  |
| --- | --- | --- |
| Name | | Date |
| Mailing Address | City/ Township/ Village | |
| City | State | Postal Code |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Property Owner’s Name | | | | Date |
| Mailing Address | City | | State | Postal Code |
| Permit Number | Capacity | Phone Number  ( ) | | |
| City/ Township/ Village | System Contractor | | | |
| Details | | | | |
| Registration Number | Type of Dog | | | |