

Application - Declaratory Statement of Eligibility

Agency - Westlake UMC Food Pantry

Parish - Calcasieu

Agency Rep. _____ Date _____

All pre-registering households must complete an Application of Eligibility. An application must be approved and kept on file in order to receive commodities. This application expires on June 30th every year, but may be extended for an additional, consecutive two years provided the renewal form on the back of the original application is properly completed, approved and signed by all parties.

Name _____

(**PRINT CLEARLY**)

Address _____

Phone # (_____) _____

- I certify that I am a resident of the parish listed above
- The total income of my household is \$ _____ per (week, month, year)
- I receive the following - **Circle** - (SNAP) (TANF) (SSI) (None of these)
- I understand that my household will only receive food donations under this application
- I understand that I may be prosecuted for accepting food for which I am not eligible
- I am aware that my application may be selected for verification and agree to cooperate
- I understand that food received under this program is for my household only
- I certify that I will alert the agency of any changes in income, or household that may affect eligibility.
- I understand that I may only receive food from one food pantry
- I certify that the above information is true and correct

Signature of person filing application _____

Date ____/____/____

How many people are in your household? Please include 1st name and age.

Who else can pick up your food order? _____

It is the policy of this agency to ensure equal opportunity in all aspects of its programs and services without regard to race, national origin, age, sex, or disability.

Office use only

Client accepted for _____ USDA food donated by Second Harvest _____ WUMC Food Pantry donated food

_____ Client was denied due to _____