



New Pantry Recipient Form

Dear Food Pantry Applicant,

This form will determine your eligibility as a recipient of food at the Sacred Heart Food Pantry. The food pantry conducts an initial review of all its participants.

To receive food, during your pantry visit you must

- Meet with an intake worker to review your status and
- Provide the documents that are listed below

1. **Proof of Residency** (circle one)

Electric, gas, phone, cable or Internet bill

Letter or notice from a government agency (federal, state or municipal)

Bank or credit card statement

Insurance or medical invoice / statement

NOTE: The residency document cannot be a photo copy, and must contain your ***name***, ***address***, and be ***dated within the last 60 days***.

2. **Personal IDs** for each member of the household

3. Completed information of **current household members and income** (see back)

Name:	_____
Street Address:	_____
ZIP Code:	_____

Complete the information above and on the back, and return this completed form with you.

Thank you for your cooperation.

The Sacred Heart Food Pantry
Middleboro, Massachusetts 02346

Current Household Members

	Name	Relationship *	Date of Birth	Employment Status
You		XXXXXXXXXXXX		
2				
3				
4				
5				
6				
7				
8				
9				
10				

* **Relationship** - relationship of the household member to the client. You must present a form of personal ID for all newly added household members.

Monthly Household Income (including ALL household members)

Wages	\$
Social Security	\$
Veterans Benefits	\$
Disability	\$
Child Support	\$
Alimony	\$
Workers Comp	\$
Unemployment	\$
Pensions	\$
Annuity	\$
Other	\$
TOTAL	\$