



Contact Information

Full Name: Last First M.I. Date:

Address: Street Address Apartment/Unit # City State ZIP Code

Phone: Email

Student ID Number: Pantry ID Number: (To be assigned by pantry volunteer)

Household and Income Information

How many individuals live in your household?

Please note below how many individuals in each age group*

*Ages: 0-4 5-17 18-64 65 and older

Are you currently employed (yes/no)? If yes (part-time or full-time):

Your household total income:

Primary household income source (CHECK ONE)

- Employment • Unemployment • Social Security • TANF (EADC) • Other • None

Do you or someone in your household currently receive any of the following benefits?

- SNAP • TANF • WIC • School breakfast • School lunch • SFSP (Summer program)

During your time at MWCC, have you ever been to the Students SOS office?

Please note, your reported income is not going to impact your eligibility for the campus food pantry.

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge. I understand that I can receive up to 20 items from the campus food pantry each month (depending on availability). I understand that I am expected to meet monthly with a Student SOS Mentor (room 152) to stay eligible for services.

*By signing my name electronically below, I am agreeing that my electronic signature is the legal equivalent of my manual signature.

Signature: Date: