

NEW REVERIFICATION

2023/2024 Supplemental EFAP Registration

BOX

Applicant Name: _____

Street Address: _____

City/Town (Required): _____ **Zip Code:** _____

Primary Phone: () _____ **Alternate Phone:** () _____

Mailing Address: (if different) _____



Income Eligibility

Please X next to the number of people in your household.

___ 1 person - \$34,992 ___ 2 people - \$47,328 ___ 3 people - \$59,664 ___ 4 people - \$72,000 ___ 5 people - \$84,336

___ 6 people - \$96,672 ___ 7 people - \$109,008 ___ 8 people - \$121,344 ___ 9 people - \$133,680 ___ 10 people - \$146,016

Is your household TOTAL Yearly Income less than the amount next to the family size? Yes ___ No ___

Program Eligibility

Please X all assistance programs, that any household member is currently receiving.

- | | |
|---|--|
| ___ Aid to Needy Blind | ___ Aid to Permanently and Totally Disabled (APTD) |
| ___ Commodity Supplemental Food Program | ___ County, City or Town Welfare |
| ___ Electrical Assistance / Fuel Assistance | ___ Food Stamps |
| ___ Free/Reduced School Meals Assistance | ___ Head Start |
| ___ Medicaid / Children's Medicaid | ___ SSI, SSDI or Social Security Income |
| ___ Subsidized Housing (Rental Subsidy) | ___ Temporary Assistance to Needy Families (TANF) |
| ___ Women, Infants and Children (WIC) | ___ Other _____ |

Household Information

Please list ALL members of household, beginning with Applicant Name

Name	Date of Birth
1 _____	_____
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____
7 _____	_____
8 _____	_____
9 _____	_____
10 _____	_____

The above information is true and correct. I understand that this will be kept confidential and is needed to verify my household eligibility to receive food each week. **This food is not to be sold or exchanged.**

Signature of Applicant: _____ **Date** _____

The Community Kitchen, Inc. , Keene N.H. is a -Monadnock United Way Agency

Revised 4/13/2023

2023/2024 Annual Registration

July 12, 2022 - September 8, 2022

Applicant will need **One Proof of Residence**

Examples:

- Driver's license/ID
- Lease
- Recent mail sent to your home
- Note from landlord
- Utility bill
- Car Registration

Permission Note:

If you want someone who is not in your household to pick up your box, please give them a note saying they may pick up your box "today" or on a specific date, or that they may pick up your box "any time". We will put "any time" notes in the computer so the person does not need a note every week. Please use the space below to update your "any time" note because any old notes will be deleted.

(Name) _____

has permission to pick up my food box any time.

(Signed) _____

Date: _____