Needham Community Council
Food Pantry Registration Form

Date: _____

Head of Household Information

_____ _____ _____
First name Last name Date of Birth

_____ _____ _____ _____
Address City State Zip

_____ _____ _____
Email address Phone Other phone

Primary Language: _____ Can you communicate in English: ☐ yes ☐ no

If you can not communicate in English, please list an English-speaking contact/phone: _____

Household Data: _____ _____ _____ _____
Total # in household # of adults 18 – 64 # of adults over 65 # of children 17 and under

Names of Adults in Household Age 18+	Birthdate		Names of Children in Household Under 18	Birthdate

Are you a female single-parent head of household with dependent minor children living with you? ☐ **Yes** ☐ **No**

Is anyone in your household disabled or handicapped? ☐ **Yes** ☐ **No** If yes, how many? _____

How do the members of your household identify gender?
Please enter the number of family members that fit the genders below.

____ Female
____ Male
____ Trans Female
____ Trans Male
____ Gender variant/Non-conforming
____ Not Listed _____
____ Prefer Not to Answer

Please provide the Number of persons living in your household who are part of the following demographic group(s):

____ White
____ Black/African-American
____ Asian
____ American Indian/Alaskan Native
____ Native Hawaiian/Pacific Islander
____ American Indian/Alaskan Native & White
____ Asian & White
____ Black/African-American & White
____ American Indian/Alaskan Native & Black/African American
____ Other Race(s)

Please provide the Number of persons living in your household who are **Hispanic/Latino** _____

Please provide the Number of persons living in your household who are **60 years or older** _____

Which of the following categories most nearly approximates the annual household income in the home where you currently reside? (Please check the appropriate line based on your household's size).

1 person	☐ $0 - $20,650	5 persons	☐ $0 - $31,850
	☐ $20,651 - 34,400		☐ $31,851 – 53,050
	☐ $34,401 – 54,950		☐ $53,051 - $84,800
	☐ over $54,950		☐ over $84,800
2 persons	☐ $0 - $23,600	6 persons	☐ $0 - $35,160
	☐ $23,601 – 39,300		☐ $35,160 – 57,000
	☐ $39,301 – 62,800		☐ $57,001 – 91,100
	☐ over $62,800		☐ over $91,100
3 persons	☐ $0 - $ 26,550	7 persons	☐ $0 - $39,640
	☐ $26,551 – 44,200		☐ $39,641 – 60,900
	☐ $44,201 – 70,650		☐ $60,901 – 97,350
	☐ over $70,651		☐ over $97,351
4 persons	☐ $0 - $29,450	8 persons	☐ $0 – $44,120
	☐ $29,451 – 49,100		☐ $44,121 – 64,850
	☐ $49,101 – 78,500		☐ $64,851 – 103,650
	☐ over $78,500		☐ over $103,650

I (WE) CERTIFY THAT THE ABOVE INFORMATION REGARDING MY (OUR) INCOME IS TRUE AND ACCURATE TO THE BEST OF MY (OUR) KNOWLEDGE.

I attest that my household is experiencing food insecurity currently. If anything changes about my need, I will communicate those changes to the Needham Community Council.

Applicant Name (please print): _____

Signature_____Date_____

Thank you for taking the time to complete this survey. This information will be held confidentially and used only for CDBG and the Council's compliance records. We will not report individual information, this form will be held for statistical reporting only.