



Interfaith Food Bank Emergency Food Application

PLEASE PRINT CLEARLY

| |
|----------------------|
| Client # _____ |
| Today's Date _____ |
| Volunteer name _____ |

Full Name: _____ Date of Birth: _____ Verified Yes__No__

Home address (**physical**): _____ E-mail address _____ Nationality/Race _____

City _____ Zip Code _____ Verified Yes__No__

Phone/Message number: _____ Language spoken in home? _____

Please list names and birthdates of all individuals at this address.

| Name (first and last) | Gender | Birthdate | Verified |
|-----------------------|--------|-----------|-----------|
| | | | Yes__No__ |
| | | | Yes__No__ |
| | | | Yes__No__ |
| | | | Yes__No__ |
| | | | Yes__No__ |
| | | | Yes__No__ |
| | | | Yes__No__ |
| | | | Yes__No__ |

Interfaith Maximum Income Eligibility

| | Total Monthly Income | Max. Yearly Income | Number in Household | Number in Household | Max. Yearly Income |
|---|----------------------|--------------------|---------------------|---------------------|--------------------|
| 1 | \$2,855.25 | \$34,263 | 7 | \$8,894.75 | \$106,737 |
| 2 | \$3,861.83 | \$46,342 | 8 | \$9,901.33 | \$118,816 |
| 3 | \$4,868.42 | \$58,421 | 9 | \$10,907.92 | \$130,895 |
| 4 | \$5,875.00 | \$70,500 | 10 | \$11,914.51 | \$142,974 |
| 5 | \$6,881.58 | \$82,579 | Over 10 | Add \$1,006.59 each | Add \$12,079 each |
| 6 | \$7,888.17 | \$94,658 | | | |

EFAP Maximum Income Eligibility Table

| | Total Monthly Income | Max. Yearly Income | Number in Household | Total Monthly Income | Max. Yearly Income |
|---|----------------------|--------------------|---------------------|----------------------|--------------------|
| 1 | \$2,949.25 | \$35,391 | 7 | \$9,270.75 | \$111,249 |
| 2 | \$4,002.83 | \$48,034 | 8 | \$10,324.33 | \$123,892 |
| 3 | \$5,056.42 | \$60,677 | 9 | \$11,439.93 | \$136,535 |
| 4 | \$6,110.00 | \$73,320 | 10 | \$12,493.51 | \$149,178 |
| 5 | \$6,967.75 | \$83,613 | Over 10 | Add \$1,053.59 each | Add \$12,643 each |
| 6 | \$8,217.17 | \$98,606 | | | |

I certify that the total income at this address is approximately \$ _____ per month for the number of adults (____) and number of children (____) living at this address.

Signature _____ Date _____