

			Date:							
We will need the	e following	informa	tion o	n your first v	visit ON	LY:				
NAME:				DA ⁻	TE OF B	IRTH:				
			ZIP CODE:							
PHONE:										
CURRENT MOOF	RPARK COLL	EGE STU	JDEN ⁻	Γ: YES NO	O					
FEMALE HEAD O	F HOUSE:	YES	NO	SEX: F/M	I HOI	MELESS:	YES	NO		
INCOME LEVEL (REQUIRED) (F E D FOOD BA			•			
Income	Unknown	\$1	10,000) - \$19,999	\$6	0,000 - \$	79,999)		
Less than \$5000		\$2	\$20,000 - \$39,999			\$80,000 and Above				
\$5000 - \$9999		\$4	\$40,000 - \$59,999			Decline to Answer				
ETHNICITY (Plea	se Circle Or	ne):								
•		•	N	lative Amerio	can	Hispani	c	Other		
TOTAL NUMBER AGE & SEX OF PE				LD:		-				
AGE: F /	M	AGE:		_ F / M	AGE	: <u></u>	_ F / N	1		
AGE: F /	M	AGE:		_ F / M	AGE	: <u></u>	_ F / N	1		
AGE: F /	′ M	AGE:_		_ F / M	AGE	: <u></u>	_ F / N	1		
Please contact m How did you hea				•		stro Char	rities:	YES	NO	
	STAFF	ONLY			_					

USDA Eligible: YES NO Sign Up Location: MPC CEC Intake Person:	
Date Entered: Entered By:	



This institution is an equal opportunity provider.