



## Scituate Food Pantry Application for Assistance

The Scituate Food Pantry provides assistance to all Scituate residents who are in need of food. Evidence of residency will be required at the time of initial application and on a periodic basis after acceptance. Some of the information requested below is necessary for the Scituate Food Pantry to remain eligible for aid from private and government agencies. *No personal information will be shared with those or any other agency.*

**Primary contact information:**

Name:	DOB (required):
Street Address:	Gender: male <input type="checkbox"/> female <input type="checkbox"/> nonbinary <input type="checkbox"/>
Home Phone:	Veteran: yes <input type="checkbox"/> no <input type="checkbox"/>
Mobile Phone:	Marital status:
Email:	Nationality/ race:

**Other household member information:** (if additional members of household, please list on back of sheet)

Name:	Relationship to primary contact:	DOB (required):

**Proof of Scituate residency (required):**

- Driver's license    
  Property tax statement    
  Rental agreement or receipt    
  Utility bill  
 Other \_\_\_\_\_

By submitting this application, I hereby certify:

- The information I have provided is true and accurate
- I am a resident of Scituate, and
- I need the assistance of the Scituate Food Pantry

Signature \_\_\_\_\_

Date \_\_\_\_\_