

**EVERYONE using the Food Bank  
is REQUIRED TO HAVE ID / INCOME STATEMENT  
Children's Current ID MUST BE SHOWN**

**Client Information Form - Gleaners Food Bank**

1. **name:** \_\_\_\_\_ (Last Name) (First Name) **D.O.B.:** \_\_\_\_\_ (DD/MM/YY)  
2. **Name:** \_\_\_\_\_ **D.O.B.:** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **Tel:** \_\_\_\_\_

**No. of Children:** \_\_\_\_\_ **Ages:** \_\_\_\_\_  
**No. of Adults:** \_\_\_\_\_

**Client Info.**     Women - Age 18+     Senior - Age 65+  
                   Post Sec. Student 18+     Native/First Nations

**Comments/Special Needs:** \_\_\_\_\_  
\_\_\_\_\_

**TYPE OF HOUSEHOLD**

**Other:**     Single Parent Family     Two-Parent Family  
           Single Person             Couples - NO Children

**ACCOMMODATIONS**

Own Home/Mortgage                     Band-Owned Housing  
 On the Street                             Emergency Shelter  
 Private Rental                             Social (Public) Rental Housing  
 Group Home/Shelter for Youth         Temp. with Family or Friends

**INCOME SOURCES**

Employment     ODSP     OSAP     CAS     EI - Empl Ins.  
 WSIB     OW     Pension     No Income     Other/CTC

**OTHER**

Cat Food     Dog Food                     Fresh Produce

**\*\*\* For Intake Worker ONLY \*\*\***

**Date:** \_\_\_\_\_ **Initial:** \_\_\_\_\_

**Computer Input:** Yes / No    **Hamper Size:** \_\_\_\_\_

**First Visit:**     **Last Visit:** \_\_\_\_\_