



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
 WIC AND NUTRITION SERVICES  
**WIC PROOF OF ELIGIBILITY**

ASSESSMENT DATE: \_\_\_\_\_ RECERT DATE: \_\_\_\_\_

APPLICANT/PARTICIPANT TO FILL IN GRAY AREA ONLY		CATEGORICALLY ELIGIBLE	PHYSICALLY PRESENT							FOLLOW-UP						
FAMILY/ECONOMIC UNIT LIST ALL (FIRST AND LAST NAME)	AGE	CE	PP	PROOF OF ADJUNCT ELIGIBILITY			PROOF OF INCOME (PIN)	GROSS INCOME			PROOF OF IDENTITY (PID)	PROOF OF RESIDENCY (PRE)	30-DAY			30-DAY FOLLOW-UP DATE
				FS	TANF	M		(CHECK ONE)					PIN	PID	PRE	
		<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/> W	<input type="checkbox"/> M	<input type="checkbox"/> A						
		<input type="checkbox"/>	<input type="checkbox"/>													
		<input type="checkbox"/>	<input type="checkbox"/>													
		<input type="checkbox"/>	<input type="checkbox"/>													
		<input type="checkbox"/>	<input type="checkbox"/>													
		<input type="checkbox"/>	<input type="checkbox"/>													
		<input type="checkbox"/>	<input type="checkbox"/>													
ECONOMIC UNIT SIZE	SPECIFY REASONS FOR (NOT PHYSICALLY PRESENT, OTHER INCOME, OTHER IDENTITY)						TOTAL INCOME (CHECK ONE)				DOES ADJUNCT ELIGIBILITY APPLY?					
							<input type="checkbox"/> W <input type="checkbox"/> M <input type="checkbox"/> A				<input type="checkbox"/> YES <input type="checkbox"/> NO					
							\$				IF NO, IS APPLICANT(S) INCOME ELIGIBLE?					
											<input type="checkbox"/> YES <input type="checkbox"/> NO					
STAFF SIGNATURE(S)											DATE(S)					
<b>PROOF OF ADJUNCT ELIGIBILITY</b>				<b>PROOF OF INCOME (VERIFICATION)</b>												
H = HANDS Screens (HDFS/MCII)				FT = Federal tax forms/W-2, fees and tips								OS = Financial information provided to the Immigration and Naturalization Service, for foreign students, resident alien or temporary alien status				
W = Written Letter/IM Forms				ADJ = Adjunct Eligibility - Self Declare								BS = Copy of bank statement, Interest income				
C = Call				CS = Check stubs or copy of check								O = Other (specify)				
F = FAMIS (Food Stamps/TANF)				SB = Statement of benefits/Court awarded information/Child Support								Q = Questions (Open-Ended)				
				PC = Signed statement by the employer, if paid in cash												
<b>PROOF OF ADULT IDENTITY</b>				<b>PROOF OF CHILD/INFANT IDENTITY</b>				<b>PROOF OF RESIDENCY</b>								
DL = Drivers license		SR = WIC staff recognition		I = Immunization record		SR = WIC staff recognition		UB = Current utility bill, rent, or mortgage receipt for lodging/housing								
ID = ID Card (e.g., state, work, school)		(Allowed at recert only)		BC = Birth Certificate		(Allowed at recert only)		V = Victim of a disaster, a homeless individual, or a migrant must sign a statement attesting to his/her residency								
P = Passport		O = Other (specify)		SS = Social Services letter with identifying record		R = Hospital or other record		WS = Written statement from reliable third party								
				O = Other (specify)												