

First-Time Campus Cabinet User Application

The information provided from this form only will be seen by the staff responsible for the food pantry and used for internal reporting. Personal information will be kept confidential and only statistical information will be used. Information given on this application will not affect your use of the food pantry.

Students and employees utilizing the Campus Cabinet Food Pantry must show a valid Northwestern ID at the pantry for each visit. IDs are available via Student Services, first floor Fine Arts Building.

A Campus Cabinet ID Number and Card will be issued to you upon your first visit. You will continue to use this card during the school semester/year it was issued.

We respectfully ask that this form be submitted to us by Monday prior to your Wednesday visit for better service to you.

First & Last Name: _____ **Age:** ____ **Campus:** Alva Enid Woodward

NWOSU Email Address: _____ **Gender:** Male Female Other

Phone #: _____ **Major/Minor:** _____
write Employee if not a student

Classification: Freshman Soph Junior Senior Grad Student Non-Degree Seeking Employee

Ethnicity (Choose all that apply): African-American/Black Asian Caucasion Hispanic/Latino Middle Eastern
 Native American Pacific Islander Other _____

Citizenship: U.S. Citizen International Student - List Country: _____

Campus Status (Choose all that apply): Full-Time Part-Time Traditional Student Non-Traditional Student

Staff Faculty Veteran

Are you a first-generation student? *(A first generation student is someone who neither their parents nor grandparents attended college.)*

Yes No I'm an employee

What type of housing do you have? On-campus, private room On-campus, roommate Off-campus, live alone

Off-campus, roommate Other _____

Cafeteria Meal Plan: 8 Meals 12 Meals 17 Meals No plan, student off-campus No plan, employee

I have a 10-meal employee/commuter meal card

At NWOSU, how many people are you providing for at your residence? (Just yourself or other family, too?) _____ **# under 18?** _____

Do you have a vehicle or access to transportation? Yes No

Do you receive/use financial aid/scholarships? (choose all that apply) Work Study E&G Loans Scholarships

Pell Grant None-Student None-Employee Other _____

Employment Info: Not Employed Employed Full-time Employed Part-time

How many others that you are helping in your NWOSU residence are employed? _____

Government assistance benefits you or someone in your NWOSU residence receive? (choose all that apply)

SNAP (food stamps) TANF WIC Social Security None Other _____

Do you identify with any of the following: (choose all that apply) Homelessness Couch-surfer (staying with different friends)

Difficulty paying rent/mortgage Difficulty paying utility bills Difficulty paying tuition/room & board

Difficulty paying for prescription medicines None Other _____

Has a lack of funds for food caused you to do any of the following within the last year?

Skip meals to pay for bills or other needed items Miss Class Drop a class Drop out of college Did not buy a required textbook

None Other _____

How did you hear about the Campus Cabinet Food Pantry?

List needs, other than food, that you would like information on (counseling, food stamps, shelter, other forms of assistance, etc.) so we can try to help provide contact information for these areas. Please be very specific.

Comments/Questions:

Acceptance of Free Food and Waiver of Liability

By signing this application, I acknowledge that I will be receiving free food from the Campus Cabinet. I understand this is a gift and not a reoccurring obligation by the university, Campus Cabinet or fiscal sponsor. I further understand and agree that by accepting this donated food, I freely and voluntarily, with full knowledge, hold harmless and in no way liable or responsible for the quality, ingredients used in, condition or packaging of food, Northwestern, its officers, agents, employees, students, donors, volunteers and food suppliers. I also acknowledge that I may visit the Campus Cabinet one time per week.

Printed signature _____

Written signature _____

Date _____