

FOR CAMPUS CABINET USE ONLY:

Date Received: _____ Dated Filled: _____ Date Picked Up: _____
CC ID#: _____ Pounds Received: _____ Filled by: _____

NON-PERISHABLE FOOD PANTRY REQUEST FORM

To help the volunteers in the Campus Cabinet Food Pantry know better how to serve you, please fill out this form. We'll make every attempt to fulfill your requests, but please know that we are limited by the types of food donated/purchased. This form will provide to us an idea of the types of food/other items you would like to have.

Please submit this form by Monday prior to your visit on Wednesday so we can prepare your food before you arrive.

The information provided from this form only will be seen by the staff responsible for the food pantry. Personal information will be kept confidential.

Students and employees utilizing the Campus Cabinet Food Pantry must show a valid Northwestern ID at the pantry. 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. Please provide your number on the form below each time you fill it out after your first visit.

First & Last Name: _____ **NWOSU Email:** _____

Campus Cabinet ID Number: _____ **Date:** _____

How many persons in your NWOSU residence? _____ **How many under 18 years of age?** _____

Primary Campus Location: Alva Enid Woodward

I have access to: Stove Top Oven Microwave Running Water Pots/Pans Can Opener None

Please check which of the following NON-PERISHABLE items you will use. We want to be able to serve as many students and employees as possible, so we ask that you refrain from requesting items that you have left over from prior visits. Please note that some items may not be available, and we may substitute something we think could be similar. *It is YOUR responsibility to leave behind any foods/items you cannot use due to dietary restrictions or allergies.* A box will be provided outside the Pantry door for you to leave those items behind. This checklist will just help us to determine what types of items you would prefer.

SOUPS: Chili Chicken Noodle Tomato Cream Vegetable None Other _____

CANNED FRUIT/VEGETABLES: Mixed Vegetables Peas Green Beans Corn Tomatoes Carrots Tomato Sauce
 Potatoes Fruit (give specific) None Other _____

RAMEN NOODLES: Chicken Shrimp Beef Pork None Other _____

BEANS: Canned Dry None

CANNED MEAT: Tuna Chicken Beef Ham None Other _____

PACKAGED MEALS & SIDES: Beef Chicken Tuna Vegetarian Vegan Mac & Cheese Instant Potatoes Rice
 Pasta & Sauce Microwaveable Meals (not frozen) None Other _____

BREAKFAST: Cereal Oatmeal/Quick Oats Breakfast Bar Granola/snack bars Toaster Pastries Breakfast Drink
 None Other _____

SNACKS: Crackers Chips Popcorn Nuts Drinks None Other _____

CONDIMENTS: Mayonnaise Ketchup Mustard Salt Pepper Cooking Oil Peanut Butter (crunchy/smooth)
 Jelly (give kinds) None Other _____

TOILETRIES: Tooth Brush Toothpaste Soap Shampoo Conditioner Feminine Hygiene Products (note specifics below)
 Toilet Paper Tissues Deodorant Lotion None Other-be specific _____

PERISHABLES INTERESTED IN IF POSSIBLE: Milk Bread Fruits Vegetables None

Please provide any suggestions or other needs on the back of this form.

ACCEPTANCE OF FREE FOOD AND WAIVER OF LIABILITY

By signing this form, 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** _____