Name(s)

Has/have a WIC appointment for certification/recertification eligibility. Please fill out paperwork before coming in for appointment.

PLEASE BRING THE FOLLOWING WITH YOU:

_____ Proof of income for everyone in family: current pay stubs from last 2 pay periods and current Ohio medical card.

_____ Proof of residency: any item with current mailing address (such as a utility bill, lease agreement, envelope with WIC paperwork)

_____ Identification for you and your child: WIC ID folder, birth certificate, Ohio driver’s license, crib card.

_____ If pregnant, you need a doctor’s statement with your due date.

_____ Bring child (ren).

_____ Completed paperwork

_____ Bring child’s shot records, if available.

_____ Formula prescription

_____ Other: ______________________________________________

_________________  ___________  ____________  _________ A.M. /P.M.
Clinic                   Date                 Day                     Time

IF YOU NEED TO RESCHEDULE OR NEED PAPERWORK, PLEASE CALL: 419-354-9661 OR 866-861-9338. You can print paperwork for your visit our website at http://woodcountyhealth.org

USDA is an equal opportunity provider and employer.