

Todas las solicitudes deben enviarse antes de las 12pm del día antes de la fecha deseada.  
Por favor, rellene este formulario completamente. Los formularios incompletos requerirán una llamada de regreso y podría retrasar la asistencia alimentaria.

Las solicitudes deben coincidir con el día y la hora que se encuentran en este calendario.

Lunes	Martes	Miércoles	Jueves	Viernes	Sábado
<p><b>Market @ Old Columbia Pike (OCP)</b> 12301 Old Columbia Pike, Silver Spring 20904 <b>10a-12pm</b></p> <hr/> <p><b>3er Lunes de cada mes</b> <b>*SOLAMENTE*</b> <b>Market @ Pilgrim Church United Church of Christ (PCUCC)</b> 2206 Briggs Rd Silver Spring 20906 <b>2:30p-5:00p</b></p> <hr/> <p><b>Church of the Redeemer (COR)</b> 19425 Woodfield Rd. Gaithersburg, 20879 <b>2:00 pm - 4:30pm</b></p>	<p><b>Market @ Old Columbia Pike (OCP)</b> 12301 Old Columbia Pike, Silver Spring 20904 <b>10a-12p &amp; 2p-5p</b></p> <hr/> <p><b>Glenmont United Methodist Church (GLEN)</b> 12901 Georgia Ave, Silver Spring, 20906 <b>3p-6p</b></p>	<p><b>Market @ Old Columbia Pike (OCP)</b> 12301 Old Columbia Pike, Silver Spring 20904 <b>10a-12pm</b></p> <hr/> <p><b>Market @ the Grove (USG) Universities at Shady Grove*</b> 9631 Gudelsky Drive USG Lot 2 Rockville 20850 <b>*Distribución de selección, adentro*</b> USG Edificio IV, Cuarto G318 <b>3p-6p</b> <b>*2ndo Miércoles de cada mes</b> <b>*SOLAMENTE*</b></p> <hr/> <p><b>Montgomery College (GERM), 20200</b> Observation Dr, Germantown 20876 <b>2p-5p</b></p>	<p><b>Market @ Old Columbia Pike (OCP)</b> 12301 Old Columbia Pike, Silver Spring 20904 <b>10a-12p &amp; 2p-5p</b></p> <hr/> <p><b>Gaithersburg Middle School (GMS)</b> 2 Teachers Way, Gaithersburg 20877 <b>5p-7p</b></p>	<p><b>Market @ Old Columbia Pike (OCP)</b> 12301 Old Columbia Pike, Silver Spring 20904 <b>10a-12p &amp; 1p-3p</b></p>	<p><b>1er Sábado de cada mes</b> <b>*SOLAMENTE*</b> <b>Market @ Old Columbia Pike (OCP)</b> 9a-12p</p> <hr/> <p><b>3er Sábado de cada mes</b> <b>Colesville Presbyterian Church (CPC)</b> 12800 New Hampshire Ave, Silver Spring 20904 <b>10a-12p</b></p>
<b>Solo trabajadores sociales pueden recoger en la bodega de Manna (WARE) Lun-Mier- Vier 8 am-2:30 pm</b>					

**\*\*Si selecciona USG, por favor asegurese de indicar si la persona referida es trabajador o estudiante de la Universidad. Seleccione "Other" para cualquier residente del Condado de Montgomery que no este afiliado con USG.**

**Manna ofrece un número limitado de entregas a domicilio para las personas que califien.**

**Tenga en cuenta:** Si selecciona la opción de entrega, proporcione las instrucciones de entrega específicas (por ejemplo, el código de entrada del edificio, número de apartamento).

**Las solicitudes de entrega serán consideradas incompletas si este información hace falta.**

Las citas estan sujetas a cambios sin notificación previa. Por favor visite nuestra [website](#) regularmente para cualquier actualizacion.

En caso de mal tiempo, llame al [301-424-1130](tel:301-424-1130) o consulte las [redes sociales](#) de Manna para obtener la información más actualizada sobre cierres o cambios en nuestro horario.



## Agency Information

Agency Name \_\_\_\_\_  
 Contact \_\_\_\_\_  
 Phone \_\_\_\_\_

## Participant Information

Last Name \_\_\_\_\_  
As it appears on ID  
 First Name \_\_\_\_\_  
As it appears on ID  
 Birth Date \_\_\_\_\_  
MM/DD/YYYY  
 Street Address \_\_\_\_\_  
 Apt/Unit # \_\_\_\_\_  
 City, Zip Code \_\_\_\_\_  
 Email \_\_\_\_\_  
 Phone \_\_\_\_\_  
 Number of Adults \_\_\_\_\_ Number of Children \_\_\_\_\_  
 Transportation

Own Vehicle      Ride: Friend/Family      Other  
 Metro              Walk              Bus Taxi

## Emergency Contact

Name \_\_\_\_\_  
 Phone \_\_\_\_\_  
 Relationship \_\_\_\_\_

## Eligibility Details

Employment      Employed      Unemployed      Seasonal  
                          Full Time      Part Time  
                          Permanent      Temporary

Income \$ \_\_\_\_\_ Monthly \$ \_\_\_\_\_ Yearly  
 \$ \_\_\_\_\_ Weekly      \$ \_\_\_\_\_ Biweekly  
 \$ \_\_\_\_\_ SNAP      \$ \_\_\_\_\_ Unemployment  
 \$ \_\_\_\_\_ SSI, Supplemental Security Income  
 \$ \_\_\_\_\_ SSDI, Social Security Disability Income  
 \$ \_\_\_\_\_ TANF, Temp. Assistance for Needy Families  
 \$ \_\_\_\_\_ Other Income (e.g. child support)  
 \$ \_\_\_\_\_ Social Security Retirement

Energy Assistance              Medicaid  
 Rental Assistance (HOC)      WIC

## Participant Demographics

Primary Language \_\_\_\_\_  
 Gender      Female      Male      \_\_\_\_\_  
 Ethnicity      Hispanic or Latino      Prefer Not To Answer  
                          Not Hispanic or Latino  
 Race  
                  American Indian or Alaskan Native  
                  Black/African American  
                  Hawaiian or Pacific Islander  
                  White              Asian              Prefer Not To Answer  
 Military/Veteran Status  
                  No Military Service              Prefer Not to Answer  
                  Active Duty, Uniformed Service              Reserves  
                  Active Duty, National Guard              Veterans

## Pickup/Delivery Details

Dietary Needs  
 Diabetic/Vegetarian-friendly  
(more whole grains, plant protein, less sodium, canned fish)  
 Limited food storage or refrigeration  
Limited food storage or lack of cooking equipment  
 Specific medical or religious needs (describe below)

Please provide details below:

Pickup Date (MM/DD/YY) \_\_\_\_\_

Pickup Location (Select One)

CPC	GLEN	OCP	
GERM	GMS	WARE	
USG	PCUCC	COR	
Faculty	Staff	Student	Other

**Please review Page 1 of this document for our current distribution schedule.**

If your client needs delivery please, select a qualification below.

Senior (65+) living alone              Disability

Please provide delivery instructions below:  
(e.g. access/entry code, apartment #)