



A member of **FEEDING AMERICA**

Pre-Application Checklist

- ___ You are a 501(c)3 not-for-profit or complete the IRS Church Qualifier
- ___ You have secured a location for your facility and it is not located in a person's home.
- ___ You have determined a budget for the program. Current budget is _____.
- ___ You have determined your hours of operation and days of service. You must operate regularly scheduled hours. Hours: _____
- ___ You must have personnel who are accountable for record keeping and inventory control. Number of staff/volunteers committed to the program _____
- ___ You can use sign-in sheets or another tracking system to keep record of the individuals served.
- ___ You have the ability to access and receive information via the internet and have a working email account.
- ___ You are willing to pay shared maintenance handling fees and delivery fees at current rates.
- ___ You are willing to adhere to food safety guidelines and to complete food safety training.
- ___ You have regular pest control services performed at your facility.
Company used: _____