



FOR OFFICE USE ONLY

Date of Application _____ / _____ / _____ Route
Number: _____ District: _____

FEED MORE'S MEALS ON WHEELS APPLICATION

Feed More's Meals on Wheels provides home delivered meal services to homebound individuals with no reliable means of getting groceries or safely preparing meals, regardless of the individual's ability to pay. To be eligible, applicants must:

- Be 18 years or older
- Be homebound* and unable to meet basic nutritional needs** either temporarily or long term
- Have no other reliable means of obtaining your daily meals
- Reside in the cities of Richmond, Petersburg, Colonial Heights or Hopewell, or the counties of Charles City, Chesterfield, Dinwiddie, Goochland, Hanover, Henrico, Louisa, New Kent, Powhatan or Prince George

** Definition of "homebound": Unable to leave the home without considerable difficulty and/or assistance. A person may leave home for medical treatment or short, infrequent absences for non-medical reasons, such as a trip to the barber or religious services.*

*** Definition of "unable to meet basic nutritional needs": Unable to prepare/have difficulty preparing at least one nutritious meal daily because of physical or mental limitations, or unable to obtain/have difficulty obtaining necessary food.*

APPLICANT INFORMATION (only one person per application, please)

Name _____ Date of Birth _____ / _____ / _____

Address _____
Street Apt. # City Zip

County _____ Phone _____ Email _____

Gender _____ Race _____

REFERRAL INFORMATION (Agency or individual filling out application):

Name _____ Relationship to applicant _____

Phone _____ Fax _____

Agency name (if applicable) _____

Is applicant aware of and agree to this referral? Yes __No__ Is the applicant in hospice care? Yes __No__

APPLICANT NEEDS ASSESSMENT

Please tell us about the meal recipients nutritional needs, physical condition and reliance on others. This information will help our Client Services team assess the individual for specific care needs.

What type of therapeutic diet does the recipient require?

Please note, all Feed More's Meals on Wheels diets have no salt added and are heart healthy.

General/ Regular _____ Bland _____ Diabetic _____ Renal _____
Renal/ Diabetic _____ Pureed _____ Soft _____ Vegetarian _____

Does the applicant have any severe food allergies? _____

What is the reason for needing Feed More's Meals on Wheels meals service? Please describe physical condition:

Is applicant homebound? (please see homebound guidelines above) Yes _____ No _____

Without wanting to, has the applicant lost weight recently? Yes _____ No _____

Does the recipient have any of the following disabilities?

Speech _____ Respiratory (on oxygen) _____ Hearing _____ Visual _____ None _____

Please describe the applicant's level of mobility.

Ambulatory/able to walk _____ Uses a wheelchair _____ Uses a cane or walker _____ Bedridden _____

Does the applicant currently receive home health services? Yes _____ No _____

What is the applicant's living arrangements?

Lives alone _____ Lives with relative(s) _____ Lives with spouse/partner _____ Other _____

Please check any and all appliances that currently work in the home.

Microwave _____ Oven _____ Refrigerator _____ Freezer _____

Does the applicant drive? Yes _____ No _____

Does the applicant depend on any of the following for transportation?

Van service _____ Public transportation _____ Family/friends _____

Other (please list) _____

EMERGENCY CONTACT

Please list those we can discuss the recipient's well-being with or contact for emergency purposes.

Name _____ Relationship _____ Phone _____

Name _____ Relationship _____ Phone _____

Physician Name _____ Phone _____

MEALS FOR PETS PROGRAM

Feed More's Meals on Wheels has a Meals for Pets Program! Pet food, when available, is delivered once a month during regular meal delivery for a recipient. All pet food is donated and free of charge.

Do you need pet food delivered? Yes _____ No _____ Number of pets _____ dog(s) _____ cat(s)

COST OF MEAL SERVICE

Feed More's Meals on Wheels service fee is either \$6 or \$11, based on the level of service associated with meal delivery. A limited number of sponsorship opportunities are available through Senior Connections, Jefferson Area Board for Aging (JABA), Crater District Area Agency on Aging and directly through Feed More. Applicants may request a reduced or waived service fee and will be required to provide additional information to support their request. No one will be turned away based on income.

Would you like Meals on Wheels to evaluate you for a reduced fee? Yes _____ No _____

By completing this form, applicant certifies that consent is given for Feed More's Meals on Wheels to share information with partner agencies.

Please mail completed application to:

Feed More's Meals on Wheels

1415 Rhoadmiller Street Richmond, VA 23220

Phone: (804) 673-5035 | Fax: (804) 673-5045 | ClientServices@FeedMore.org