

NEIGHBOR INTAKE FORM

The data collected on this form about you and your household will be used by Harvesters to provide better service to our neighbors. By providing the information, you consent to it being transferred into our paperless system (Service Insights on MealConnect). Your data will be kept confidential and is not accessible to anyone besides our pantry network and Feeding America. Harvesters will use the information to compile neighbor reports that will include total numbers and will never include personal identifiable information.

If you have any questions, please contact Harvesters at serviceinsights@harvesters.org.

Visit Date: _____

Providing your name, date of birth and age is optional, but if not given, we will need to ask you to fill out the rest of the form each time you visit. Or, ask us about getting a Service Insights Intake Card, and you can remain anonymous at each visit.

1

First Name: _____ Last Name: _____

Date of Birth: _____ or Age: _____ ☐ Anonymous /prefer not to answer

CONTACT

2

County: _____ State: _____ Zip Code: _____ ☐ No fixed address

(Optional) Mobile Phone: _____ Ok to contact? ☐ yes ☐ no

GENDER

3

☐ Male

☐ Female

☐ Transgender

☐ None of these

☐ Don't know/
prefer not
to answer

RACE/ETHNICITY

4

☐ White

☐ Hispanic, Latino, or Spanish

☐ Black African American

☐ Asian

☐ American Indian/Alaska Native

☐ Middle Eastern/North African

☐ Hawaiian/Pacific Islander

☐ Other Race or Ethnicity

☐ Don't know/prefer not to answer

HOUSEHOLD

5

Please provide all household members names (optional) and ages (required), not including yourself. Or, ask us about getting a Service Insights Intake Card, and you can remain anonymous at each visit.

Number
of adults

Number
of children

Number of
seniors (65+)

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Any additional household members or information can be placed on the back of form.

SNAP

6

Is anyone in your household currently receiving SNAP or Food Stamps?

☐ yes

☐ no

☐ Don't know / prefer not to answer



HARVESTERS
COMMUNITY FOOD NETWORK