



# Pickens County Meals on Wheels

349 Edgemont Avenue, Liberty, SC 29657

Phone: 864-855-3770 Web: PCMOW.org

## Home Delivered Meal Program Application

The **Home Delivered Meal** Program provides a nutritious meal Monday-Friday delivered by caring volunteers. Space is limited. All new applicants will go through an assessment process. Clients are added based on need and as space becomes available.

### PRIMARY ELIGIBILITY REQUIREMENTS:

- \*Homebound with little/limited ability to drive
- \*Mental or Physical limitation that prevents the preparation of meals
- \*Lack of support from others who can provide a mid-day meal

Date: \_\_\_\_\_

Applicants Name: \_\_\_\_\_ Applicant's Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_ Marital Status: \_\_\_\_\_ Veteran: ☐ Yes ☐ No

Emergency Contact: \_\_\_\_\_ Relationship to Applicant: \_\_\_\_\_

Emergency Phone: \_\_\_\_\_ Duration of Services Requested: ☐ Ongoing ☐ Temporary

Medical problems prohibiting ability to prepare meals due to a recent hospitalization, a chronic and/or debilitating illness, insufficient nutritional intake or respite need: \_\_\_\_\_

### Pre-Assessment Questionnaire:

Do you live alone? ☐ Yes ☐ No

How would you rate yourself on meal preparation? ☐ Independent ☐ Needs some Assistance ☐ Dependent

Diabetic: ☐ Yes ☐ No

Special Diet: \_\_\_\_\_

Oxygen: ☐ Yes ☐ No

Ambulation: ☐ No assistive device ☐ Walker ☐ Cane ☐ Wheelchair ☐ non-ambulatory

Vision: ☐ No vision problem ☐ Glasses ☐ Blind one eye ☐ Blind both eyes

Hearing: ☐ No hearing problem ☐ Difficulty hearing, no aids ☐ Hearing aids worn ☐ Deaf

Speech: ☐ No problem communicating ☐ Communicates with difficulty ☐ Unable to speak

Mental Health: ☐ Diagnosed condition \_\_\_\_\_