

2025 WA Senior Farmers Market Nutrition Program Application & Affidavit

Applicants Must Apply Every Year

*Name: _____ *Birthdate (month/day/year): _____
(First Name) (Last Name) (Month) (Day) (Year)

*Address: _____ Apt #: _____

*City: _____ *Zipcode: _____ *County: _____ *Phone: _____

*Required

The Senior Farmers Market Nutrition Program (SFMNP) provides fresh fruit and vegetables to lower-income seniors with the goal of improving their health and nutritional status. It also supports local farming by increasing the use of farmers' markets and roadside stands.

To be eligible for the SFMNP, you must meet all of the following:

- 1. You must be 60 years old or older (55+ if you are Native American/Alaska Native)**
- 2. Your income must be below 185% of the Federal Poverty Level. That means:**
 - \$28,953 Annual or \$2,413 Monthly Income for 1 person
 - \$39,128 Annual or \$3,261 Monthly Income for 2 people
 - For larger households, add \$848 for each additional person

3. You must be a resident of Spokane County

By signing this form, you certify that you meet all the eligibility requirements above and acknowledge that you have been given SFMNP Rights and Responsibilities information.

* _____ * _____
Participant Signature Date

Please answer the questions below—your responses are voluntary:

1. Do you consider yourself Hispanic/Latino? Yes No

Please check all that apply:

- American Indian or Alaska Native Asian African American Caucasian
 Native Hawaiian or Other Pacific Islander

Submission Details

Drop Off:

Catholic Charities FFA 12 East 5th
Avenue Spokane, WA
Monday-Thursday 9am to 4pm

Mail:

Catholic Charities FFA
PO Box 2253
Spokane, WA 99210-2253

Mail or Drop Off

ALTCEW
1313 N Atlantic St. Ste. 3000
Spokane, WA 99201
Monday-Friday 8:30am to 5pm

Fax:

Catholic Charities FFA
(509)358-4259

For More Information:

Catholic Charities FFA
Phone (509) 459-6163
Email sfmnp@cceasternwa.org

In accordance with Federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, disability or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA. Please see below for more information.

Nondiscrimination

Freedom from discrimination

This institution is prohibited from discriminating on the basis of sex, race, creed, religion, color, national origin, age, veteran or military status, sexual orientation, disability, or the use of a dog guide or trained service animal (a service animal is an animal that is individually trained to do work or perform tasks for the benefit of an individual with a disability). (RCW 49.60.030)

USDA Nondiscrimination Statement

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the responsible state or local agency that administers the program or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at:

<https://www.usda.gov/sites/default/files/documents/ad-3027.pdf>, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by:

1. **mail:**
U.S. Department of Agriculture
Office of the Assistant Secretary for Civil
Rights 1400 Independence Avenue, SW
Washington, D.C. 20250-9410; or
DO NOT MAIL SFMNP Application to this address.
2. **fax:**
(833) 256-1665 or (202) 690-7442; or
3. **email:**
program.intake@usda.gov.
DO NOT FAX SFMNP Application to this address.

This institution is an equal opportunity provider.