



**Jefferson County Department of Health
Referral for WIC Program Eligibility Determination**

Child

Child's Name _____ DOB _____

Mother's Name _____ Telephone _____

Measurements	Date Taken
Height _____ in/cm	_____
Weight _____ lbs/kg	_____
Hgb/Hct _____ %/gm	_____
Lead Screening Date _____	

**Height and Weight cannot be more than 60 days old for WIC certification. Hgb/Hct must conform to WIC anemia screening schedule for children.
Immunization Record is required.**

Check all conditions that apply:

- | | |
|---|---|
| <input type="checkbox"/> Failure to thrive | <input type="checkbox"/> Food allergy |
| <input type="checkbox"/> 12 months old gained \leq 3 lbs in last 6 months | Specify _____ |
| <i>Previous weight</i> _____ <i>Date taken</i> _____ | <input type="checkbox"/> Lactose intolerance (dairy products) |
| <input type="checkbox"/> 18 months old gained $<$ 1 lb in last 6 months | <input type="checkbox"/> Medical condition(s) |
| <i>Previous weight</i> _____ <i>Date taken</i> _____ | Specify _____ |
| <input type="checkbox"/> Blood lead level \geq 10 mcg./deciliter | |
| Specify _____ | |

Non-contract formula for special feedings must be documented by physician on the Special Formula Prescription form (ADPH-WIC-111).

Physician's Name _____ Telephone _____
Please Print

Address _____
City State Zip Code

Physician's Signature _____

Please call the WIC office to make an appointment:

- | | | | |
|-------------------------------|--------------------------------|-------------------------------|----------------------------------|
| Bessemer Health Center | (205) 497-3727 | Morris Health Center | (205) 933-4231 / 933-4232 |
| | (205) 497-9300 option 4 | West End Health Center | (205) 715-6121 option 4 |
| Central Health Center | (205) 558-2144 | Western Health Center | (205) 778-3321 option 4 |
| Eastern Health Center | (205) 591-5180 option 3 | | |

Patient must be present at appointment. Bring identification, proof of residence and income, and completed form to WIC office on appointment day.

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, or disability.

To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, Room 326-W, Whitten Building, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410 or call (202) 720-5964 (voice and TDD). USDA is an equal opportunity provider and employer.