

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2015

Policy No. CS:20.0

Certification Forms

Purpose

To document the eligibility of each participant.

Authority

7 CFR Part 246.7(h)

Policy

All eligibility data for each person certified for WIC shall be recorded on the appropriate forms. The forms shall be maintained on file in each participant's or family's record.

Procedures

- I. The following forms shall be on file in the participant's or family's record:
 - A. One of each of the following forms. The Local Agency (LA) shall determine where the forms shall be maintained in the record.
 1. Family Certification Form;
 2. Supplemental Information Form;
 3. WIC Income Questionnaire; and
 4. VENA Family Documentation Tool.
 - B. For information regarding WIC Forms or signed written statements used to determine residency and income eligibility or identification, refer to [Policy CS:05.0](#), [Policy CS:06.0](#), and [Policy CS:07.0](#).
 - C. The appropriate Health History form from the following:
 1. Diet Health History for Infants;
 2. Health History for Children; or
 3. Health History for Pregnant/ Breastfeeding/Postpartum Women.

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- D. The appropriate nutrition risk assessment form from the following:
 - 1. Infant Participant Form/WIC Infant Nutritional Risk Codes;
 - 2. Child Participant Form/WIC Child Nutritional Risk Codes;
 - 3. Pregnant Participant Form/WIC Pregnant Nutritional Risk Codes;
 - 4. Breastfeeding Participant Form/WIC Breastfeeding Nutritional Risk Codes; or
 - 5. Postpartum Participant Form/WIC Postpartum Nutritional Risk Codes.

- E. The appropriate growth chart from the following:
 - 1. Prenatal Weight Gain-Singleton;
 - 2. Prenatal Weight Gain Grid-Multifetal;
 - 3. Girls: Birth to 24 Months;
 - 4. Boys: Birth to 24 Months;
 - 5. Girls: 2-5 Years; or
 - 6. Boys: 2-5 Years.

- II. Enter participants' certification data into the Texas WIC Information Network (WIN) system using the Family Certification Form and the appropriate Participant Form(s).