

Program: MVFD Enrollment FAQs



Contents

Eligibility Requirements	3
1. Who can apply?.....	3
2. How is eligibility determined?	3
3. I've experienced a life changing event. How do I update my application?	3
4. I'm a spouse with survivor benefits, can I participate?	3
Application Process	3
5. What is the process? And what does my status mean?	3
6. When can I apply?.....	3
7. Where can I apply?	4
8. What documentation do I need to provide?	4
9. Do I need to apply every month?	4
10. How often do I need to submit my documents?	4
11. How is my information protected?.....	4
Program Changes	4
12. Why is the system changing?.....	4
13. Is my application approval guaranteed?	5
Income	5
14. Why am I being declined because of my income?	5
15. Does VA Disability and or SSI/SSDI count towards my annual income?	5
16. Can I submit monthly income instead?	5
Communication & Profile.....	5
17. How will I receive updates?	5
18. How can I view my status anytime?	5
19. I don't have a phone, phone number, computer, or email, what do I do? Can I still participate?	5
20. I forgot my login information. What do I do?.....	5
Monthly Distributions	5
21. How will I know if I've been selected for an MVFD event?	5
22. I have been assigned a time slot but I do not like it, can I change?	6
23. How long do I have to register for each month?	6
24. What if I miss multiple MVFD events?.....	6
25. Can I cancel up until the close of business the day before or do I have to provide 24 hours?.....	6

Program: MVFD Enrollment FAQs



26. When is the food distribution for my area? 6

Additional Resources 6

27. Can you direct me to other programs that I may receive support from? 6

28. How do I get in contact with the MVFD POC for my area? 6

APPENDIX 8

Appendix 1 – Tax Information 8

Appendix 2 – Acceptable Government Issued Identification Card Examples 8

Appendix 3 – MVFD Food Distribution Application Example 10

Program: MVFD Application FAQs

Eligibility Requirements

1. Who can apply?

- Veterans, Active Duty, Guard, and Reserve members who are at-risk or food-insecure.

2. How is eligibility determined?

- Based on annual household income (This includes all retirement, disability, SSI/SSDI, spousal, and current job income as well as any additional sources) and family size

3. I've experienced a life changing event. How do I update my application?

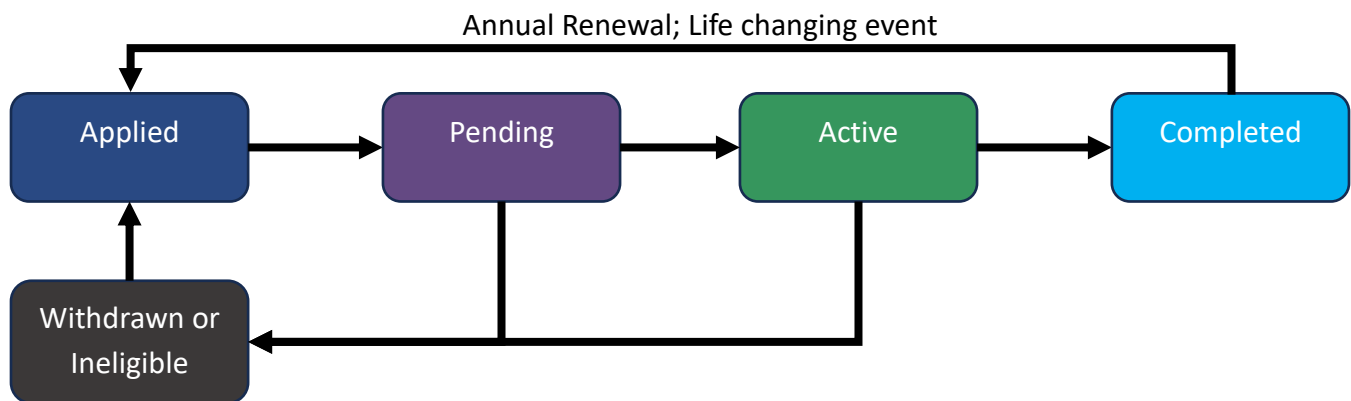
- Please reach out to your site MVFD Point of Contact (POC)

4. I'm a spouse with survivor benefits, can I participate?

- Unfortunately, a spouse with survivor benefits is ineligible for this program. There are other opportunities to receive support. Please see section on additional resources.

Application Process

5. What is the process? And what does my status mean?



- **Applied** – Application has been submitted is ready for review by Soldiers’ Angels.
- **Pending** – Application under review but additional documentation is needed. Please check your email, texts, and/or with your Site MVFD POC to complete. After three non-responses to outreach by Soldiers’ Angels, your application will be “Withdrawn” and you will need to reapply.
- **Active** – Application is complete and approved for participation in the program.
- **Completed** – Application is from the previous year. Please collect your documents and renew your application.
- **Withdrawn** – Application is withdrawn per Veteran/Service Member request or due to lack of responsiveness to outreach attempts.
- **Ineligible** – Application for Veteran/Service Member is ineligible for participation in the program

6. When can I apply?

Program: MVFD Application FAQs

- Once applications open in your area, you will be notified that applications are open and you may apply anytime thereafter. Please check your emails, phones, and/or with your Site MVFD POC for additional communication.
- After your initial application, you will be required to renew once a year.

7. Where can I apply?

- Please follow the link: <https://soldiersangels.tfaforms.net/20>

8. What documentation do I need to provide?

- Proof of Military Service (one):
 - o DD 214
 - o Military ID
 - o Retired Military ID
 - o VA ID
 - o Driver's License showing Veteran status
- Tax Information (taxable and non-taxable):
 - o Examples: See Appendix 1
 - W-2 Civilian/Military pay (annual), only if employed
 - Retirement (annual), (1099R or 1040)
 - SSI/SSDI (1099R)
 - Veteran Summary of Benefits Letter
 - Supplemental income: alimony, caregiver stipend, or spousal income
 - Bank Statement with Name, ACH details, deposit amount, and date

9. Do I need to apply every month?

- No. You will need to complete the full application only once per year. If approved, you'll receive a link to register for each month you are eligible to request to participate in the monthly distribution. You will not be able to select a time slot. One will be selected for you if you are approved for that month.

10. How often do I need to submit my documents?

- Annually, on the anniversary date of your approval for the program
- If there has been a life event, such as changes to employment, births, deaths, disability status, etc.

11. How is my information protected?

- All documents uploaded as part of your application are kept strictly confidential. They are used solely to verify eligibility for the program and are accessible only to authorized Soldiers' Angels staff and volunteers involved in the application review process.

Program Changes

12. Why is the system changing?

Program: MVFD Application FAQs

- Simplify and improve the process by only having to apply with income verification once a year. The monthly registration, once approved, will be a short form to be submitted monthly. The system will determine the most in need each month. This will avoid monthly rushes to prioritize those most in need.

13. Is my application approval guaranteed?

- No. Submitting an application does not guarantee approval nor eligibility. Once your application has been approved you will be notified prior to each MVFD event so you can register for that specific date.

Income

14. Why am I being declined because of my income?

- This program is designed as a critical assistance food program for active duty and veterans that are food insecure. The eligibility is determined by federal income eligibility guidelines and the number of people in your household.
 - Was there a change in income and/or # of people in your household? If so, you would contact your local MVFD POC to submit appropriate updated documentation

15. Does VA Disability and or SSI/SSDI count towards my annual income?

- Yes. You will be asked to upload proof to validate this information.

16. Can I submit monthly income instead?

- Yes. But it may delay review of your application and/or denial. Annual income is preferred.

Communication & Profile

17. How will I receive updates?

- Through email and possibly text—make sure your contact info is current!

18. How can I view my status anytime?

- Log in to your online profile to view your eligibility and updates.

19. I don't have a phone, phone number, computer, or email, what do I do? Can I still participate?

- Please contact your Site MVFD POC

20. I forgot my login information. What do I do?

- Please email admin@soldiersangels.org

Monthly Distributions

21. How will I know if I've been selected for an MVFD event?

Program: MVFD Application FAQs

- If approved and eligible for a given month, you'll receive a time slot via email or text.

22. I have been assigned a time slot but I do not like it, can I change?

- This may not always be an option but you may contact your Site MVFD POC to inquire a change.

23. How long do I have to register for each month?

- You have 24 hours to request consideration once notified.

24. What if I miss multiple MVFD events?

- Your application will be withdrawn and you will need to reapply the following year if you miss three events in the year and fail to provide 24 hours' notice. If you feel that you have been marked as a no-show in error, please contact your Site MVFD POC.

25. Can I cancel up until the close of business the day before or do I have to provide 24 hours?

- To avoid being marked as a "no-show", you must contact Soldiers' Angels 24 hours in advance. If you receive 3 no-shows in a calendar year, you will not be able to attend for the remainder of that year.

26. When is the food distribution for my area?

- Atlanta: 4th, Friday
- Charleston: 2nd, Tuesday
- Cincinnati: 4th, Friday
- Dallas: 2nd, Friday
- DC Metro: 4th, Tuesday
- Denver: 1st, Friday
- Orlando: 3rd, Friday
- San Antonio: 3rd, Thursday

Additional Resources

27. Can you direct me to other programs that I may receive support from?

- Refer to the Soldiers' Angels website for resources in your area: [Food Assistance - Soldiers' Angels](https://soldiersangels.org/get-support/food/) (<https://soldiersangels.org/get-support/food/>)

28. How do I get in contact with the MVFD POC for my area?

Area	MVFD POC	Email	Phone
Atlanta	John Harris	jharris@soldiersangels.org	(404) 719-5981
Charleston	Rodney Hargrove	rhargrove@soldiersangels.org	(210) 819-4100
Cincinnati	Jana Evans	jevans@soldiersangels.org	(210) 960-4501
Dallas	Thomas Straley	tstraley@soldiersangels.org	(972) 532-3696
Denver	Gina Manke-Zink	gzink@soldiersangels.org	(720) 262-3588

Program: MVFD Application FAQs

Orlando	Rodney Hargrove	rhargrove@soldiersangels.org	(210) 819-4100
San Antonio	Amanda Gonzalez	agonzalez@soldiersangels.org	(210) 538-2118
Washington DC	Rodney Hargrove	rhargrove@soldiersangels.org	(210) 819-4100

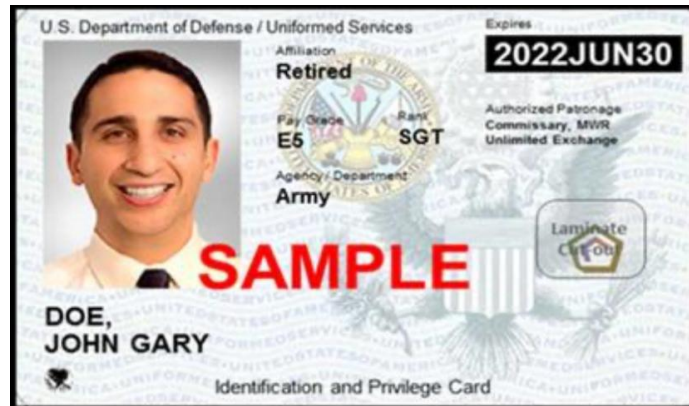
APPENDIX

Appendix 1 – Tax Information

WORK in PROGRESS

Appendix 2 – Acceptable Government Issued Identification Card Examples

Retired Military Identification Card



VA Identification Card



State Driver's License with
Veteran/Military Designation



Program: MVFD Application FAQs

Active Military Identification Card



Program: MVFD Application FAQs

Appendix 3 – MVFD Food Distribution Application Example



Soldiers' Angels Military and Veteran Food Distribution Program Annual Application

Soldiers' Angels Hunger Relief Program is proud to host a Military and Veteran Food Distribution event, providing food assistance to low-income veteran families, active-duty service members, members of the National Guard, and reservists - ensuring support for all who serve or have served.

Please be advised: Individuals with three documented no-shows within a calendar year will become ineligible for future Soldiers' Angels military and veteran food distributions.

Service Member or Veteran's Name

First Name *

Last Name *

Last 4 of Service Member or Veteran's SSN *

Service Member or Veteran's Date of Birth *

The birthdate entered must equal or be greater than 18 years of age.

Site Location *

Address

Address Line 1 *

City *

State *

Zip Code *

Phone (Mobile Preferred) *

Email *

Some of the questions below are being asked so Soldiers' Angels can better serve and support your needs with resources and referrals.

Status *

- ☐ Active Duty
- ☐ Guard/Reserves
- ☐ Veteran

Proof of Military/Veteran Status I will be bringing with me to the event: *

- ☐ Active Duty Military ID
- ☐ Guard/Reserve Military ID
- ☐ Retired Military ID
- ☐ VA ID
- ☐ DD214

Military/Veteran Status Documentation

[Choose File](#) No file chosen

Upload document to verify proof of military/veteran status.

Branch of Service LAST or CURRENTLY Served/Serving *

- ☐ Air Force
- ☐ Army
- ☐ Coast Guard
- ☐ Marines
- ☐ Navy
- ☐ Space Force

Were you DISCHARGED pre-9/11 or post-9/11? *

- ☐ Pre - 9/11
- ☐ Post - 9/11
- ☐ Not applicable

Current Rank or Rank at DISCHARGE *

- | | | |
|--------------------------|--------------------------|--------------------------|
| <input type="radio"/> E1 | <input type="radio"/> E2 | <input type="radio"/> E3 |
| <input type="radio"/> E4 | <input type="radio"/> E5 | <input type="radio"/> E6 |
| <input type="radio"/> E7 | <input type="radio"/> E8 | <input type="radio"/> E9 |
| <input type="radio"/> W1 | <input type="radio"/> W2 | <input type="radio"/> W3 |
| <input type="radio"/> W4 | <input type="radio"/> W5 | <input type="radio"/> O1 |
| <input type="radio"/> O2 | <input type="radio"/> O3 | <input type="radio"/> O4 |
| <input type="radio"/> O5 | <input type="radio"/> O6 | |

Do you have a VA disability rating? *

- ☐ Yes
- ☐ No
- ☐ It is under appeal
- ☐ Not applicable

Are you currently enrolled with the VA to receive benefits? (enrollment is not required to participate in this event) *

- ☐ Yes
- ☐ No
- ☐ Not Yet

Will you be driving your vehicle to pick up your food? *

- ☐ Yes
- ☐ No

Are you currently homeless? *

- ☐ Yes
- ☐ No

Are you part of the VA HUD/VASH program? *

- ☐ Yes
- ☐ No

Ethnicity

- ☐ Hispanic or Latino
- ☐ Not Hispanic or Latino

Race

- ☐ American Indian or Alaskan Native
- ☐ Asian
- ☐ Black or African American
- ☐ Native Hawaiian or Pacific Islander
- ☐ White

Military Pay - Annual *

This should reflect your annual income

Retirement (military or civilian) - Annual *

This should reflect your annual income

VA Disability - Annual *

This should reflect your annual income

SSDI or SSI - Annual *

This should reflect your annual income

Spouse/Partner Income - Annual *

This should reflect your annual income

Housing Stipend - Annual *

This should reflect your annual income

Do you have any additional sources of Income? *

- ☐ Yes
- ☐ No

Alimony, child support, caregiver stipend, CRDP/CRSC

Total Annual Household Income**Confirm the Household Annual Income Total ***

☐ Total Household Income Confirmed

Review the calculated Total Annual Household Income amount and check this box to confirm the total.

Total # household Males ***Total # household Females *****Total # household****Total # household aged 0-17 ***

Total # household aged 18-59 *

Total # household aged 60+ *

Total # household Active Military *

Total # household Retired Military *

Total # household Guard/Reserve Military *

Total # household Veteran *

Are you currently enrolled in any of the following programs? *

- ☐ SNAP
- ☐ TANF
- ☐ SSI
- ☐ NSLP
- ☐ Medicaid
- ☐ None

LIABILITY AND RELEASES:

As consideration for being allowed to participate in the event(s) described below, I agree:

1. I hereby assume all of the risks of participating in this event. I realize that liability may arise from negligence or carelessness on the part of the persons or entities organizing or conducting this event and hereby release them of all possible liability. I certify I am at least 18 years old. I promise not to sue and agree to pay all court costs and all attorney fees that result from my action, civil or otherwise.
2. In consideration of my being permitted to participate in this event, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows: (A) Waive, Release and Discharge from any and all liability for my death, disability, personal injury, property damage, property theft or actions of any kind which may hereafter accrue to me during the event or during my traveling to and from this event, THE FOLLOWING ENTITIES OR PERSONS: Soldiers' Angels, officers, donors, sponsors, employees, representatives, agents, volunteers and (B) indemnify and hold harmless the entities or persons mentioned in this paragraph from any and all liabilities or claims made by other individuals or entities as a result of any of my actions during this event.
3. I hereby release Soldiers' Angels and their donors from any and all claims based upon or arising out of the use, reproduction, distribution, display or performance of all or any part of the photographs or recording, or any derivative thereof, including any claim of invasion of privacy or right of publicity.
4. I understand Soldiers' Angels may release information pertaining to my participation or registration for this event to the servicing VA and the servicing food bank.
5. I understand Soldiers' Angels and their donors intend to utilize photographs, recordings, and media interviews for marketing purposes.

AGREEMENT TO NOT SELL OR EXCHANGE:

I certify I will not offer for sale, sell, transfer nor barter the items supplied by Soldiers' Angels in exchange for money, other properties or services either directly in person, through other agents, auctions, the internet, or any other avenues or means of social media.

AGREEMENT TO RECEIVE TEXT MESSAGES

I agree by providing a mobile phone number on this application I am consenting to receiving text messages from Soldiers' Angels related to this event and other Soldiers' Angels events and activities.

Soldiers' Angels would like to know if you would like to receive cards on your birthday.

☐ I want to receive cards on my birthday

Check the box below to accept the releases and agreements.*

☐ By checking this box, I acknowledge I have read, understand, and agree to the terms of this liability and photo release, the agreement to not sell or exchange, and the agreement to allow receipt of text messages.

Submit