

Division of WIC & Community Nutrition Services		
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<i>Subject:</i> Allowable Food Application Form	<i>Policy:</i> Appendix 12	
<i>Reference:</i> N / A	<i>Effective:</i> November 1, 2008	<i>Supersedes:</i> July 28 2003

I. Policy:

An Allowable Food Application for each item under consideration must be submitted to the Virginia WIC Program. Each food item must:

- 1) Meet WIC Program Food Selection Criteria and Standards in accordance with [FDS 01.1](#);
- 2) Be submitted by the food manufacturer or by the distributor;
- 3) Be available and stocked by suppliers or distributors in Virginia. Verification of product stocking and availability may be required before final product approval is granted; and
- 4) Be sent via certified mail by the due date listed on the website. Emailed applications will be considered ineligible.

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Subject: **Allowable Food Application Form**

Policy: **Appendix 12**

Reference: **N / A**

Effective: November 1, 2008

Supersedes: **July 28 2003**

Complete **ONE** application for each product or variation of product.

1. Company Name: _____

Company Address: _____

Contact Person: _____ Title: _____

Phone Number: _____ Email: _____

2. Food Category (check one):

- adult cereal
 bread
 brown rice
 canned fruit
 canned vegetable
 cheese
 dried beans
 eggs
 infant cereal
 juice
 milk
 peanut butter
 salmon
 soy milk
 tortilla
 tuna

3. a. Name of food item	b. Size(s) available in VA	c. Suggested retail price	d. Package type	e. UPC code	f. Distributor name and phone number
			<input type="checkbox"/> can <input type="checkbox"/> glass <input type="checkbox"/> paper <input type="checkbox"/> plastic <input type="checkbox"/> bag <input type="checkbox"/> other:		

4. Please identify the major distributors, suppliers or corporate stores this product is available through for Virginia authorized stores: _____

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- 5. Please include the following:
 - a. for dry cereals – state the iron content in mg per 100 grams:_____
 - b. for dry cereals- state the percentage of whole grains per product_____
 - c. for juices – state the vitamin C content in mg per 100 ml of juice:_____
 - d. an electronic image in a minimum 5” x 7” size with a resolution of at least 300 ppi or colored copies of the actual label, including the nutrition facts and ingredients, must be included with the application.

If approved for inclusion on the Virginia WIC Approved Food List, I agree to notify the Virginia WIC Program within 60 calendar days of product changes, including nutrition composition, distribution, availability, and labeling or packaging. Failure to do so may result in removal from the Virginia WIC Approved Food List.

Name/Title of Company Representative

Date

All products meeting WIC nutrition standards will be reviewed by the Allowable Food Committee for administrative standards approval and final acceptability or denial.

Mail application certified mail to:
Virginia WIC Program
Attn: Allowable Food Committee
109 Governor Street, 9th Floor
Richmond, VA 23219

WIC Office Use Only

Food Category: _____ Date Received:_____

Approved: Denied: Other: _____

Reason for Denial: _____