

Pregnant Women Application

Women, Infants, Children (WIC) Program, Alaska Department of Health & Social Services

Today's Date _____

1. Name (First, Middle, Last)	2. Birth Date	331 332 333	3. Due Date
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Current History

7. How is your pregnancy going? Please tell us if you have any concerns.

8. The date I started seeing a doctor for this pregnancy was? I have not started seeing a doctor for this pregnancy. 334
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9. When was your last pregnancy? (Month, Year) 10. How many babies are you expecting? 332
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11. How many times have you been pregnant? (Do not count this pregnancy)

12. How old are your children? 333

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33. Check the box if you are eating any these foods.

427.05

Raw sprouts: alfalfa, clover and radish

Raw or undercooked: PHDW FKLFNHQ WXUNH\ 4VK HJJV
Soft cheese made with unpasteurized milk:

Uncooked refrigerated smoked seafood