



## APPLICATION FOR PARTNERSHIP - PARTNER AGENCY- FOOD PANTRIES

Thank you for your interest in partnering with El Pasoans Fighting Hunger Food Bank (EPFH). We are the only food bank serving El Paso, Hudspeth, and Culberson counties. To combat the hunger crisis in our region, we rely on our partnerships with agencies like yours to distribute nutritious food and ensure access to emergency food assistance for those in need. Your support is vital in achieving our mission of making sure that no one goes hungry.

We seek partnerships with organizations that share our mission to end hunger in our region and demonstrate thoughtful and organized intentions. As a Partner Agency, you will play a crucial role in this effort, not only by volunteering your services but also by coordinating, distributing, and contributing to your agency's success. Please read and complete this application packet in its entirety before submission. It contains important contact information for our Agency Relations staff, a checklist of required documents, details about operational requirements, and general information about El Pasoans Fighting Hunger Food Bank.

Rest assured, we are here to guide you through the process and answer any questions you may have about the application. We are eager to learn more about the work you do in the community and explore ways we can work together to increase food access.

Cordially,

Gloria J Siller  
Partner Agency Manager

## To become a Partner Agency, please take note of the following:

If your organization is located in El Paso, Hudspeth, or Culberson counties, please contact Gloria J Siller, Agency Relations Manager, at (915) 224-1271 or [gjsiller@epfgfb.org](mailto:gjsiller@epfgfb.org), or Karmela Galicia, Director of Programs, at (915) 229-4738 or [kgalicia@epfhfb.org](mailto:kgalicia@epfhfb.org).

**Applications** can be submitted at any time, and new partner onboarding trainings are scheduled throughout the year. Please allow three (3) weeks for your application to be processed before the next onboarding session.

While we understand that not all programs are the same, please don't hesitate to reach out if you have any questions after reading the attached information.

**Please note** while we value all partnership applications, there are certain factors that may lead to an application not being approved. Some common reasons include:

- **Limited Availability:** At times, our geographical coverage may be at capacity, and there might not be immediate openings for new partner agencies in specific areas.
- **Incomplete Information:** If the application is missing essential documents or required details, it may not meet the necessary criteria for approval.
- **Non-Alignment with Mission:** Our focus is on organizations that share our mission to combat hunger in our region. If the applicant's objectives do not align with this goal, it may impact the partnership decision.
- **Non-Profit Status:** Eligibility requires applicant organizations to have a 501(c)(3) status or operate under an umbrella organization with proper authorization.
- **Inadequate Resources:** Lack of appropriate storage space, insufficient personnel for coordination, and challenges in maintaining food safety standards can also affect the approval process.
- **Non-Compliance:** Failure to meet operational requirements, eligibility criteria, or adherence to food safety guidelines may result in a partnership application not being approved.

We encourage all applicants to carefully review and submit a comprehensive application. If an application is not approved at a given time, we remain open to revisiting partnerships in the future or exploring other ways to collaborate in serving our community.

Our selection process is based on various factors, and we continuously evaluate our partnerships to ensure the most effective and impactful distribution of food assistance to those in need

**El Pasoans Fighting Hunger Food Bank does not partner with organizations for one-time events or special occasions.**



**Agency Categories We Work With**

- Emergency Pantry: Provide food items for individuals to prepare at home or deliver groceries to clients.
- Meal Provider: Prepare, serve, or deliver meals or snacks to individuals in need, adhering to Department of Health standards.
- Residential Program: A type of meal program that serves permanent or temporary residents of a program.
- Commodity Supplemental Food Program: Distribute non-perishable food items to individuals over 60 years of age meeting income guidelines (distributed monthly).

As a standard procedure, all new pantry and CSFP partners are required to adopt electronic intake. To facilitate this transition for our partners, the food bank provides the necessary software, barcodes, and training completely free of charge. We are committed to supporting our partners in their implementation of electronic intake.

While the food bank covers the costs of the software and training, we would like to inform our partners that they will need to provide their own equipment and internet service. Any maintenance or ongoing expenses related to the equipment and internet service will also be the responsibility of the partner agency.

We understand the importance of effective and efficient intake procedures, and we are here to assist our partners throughout this process. Please feel free to reach out if you have any questions or require further clarification. We value our partnership and are dedicated to ensuring a smooth and successful experience for all involved.

## **Operational Requirements for Partnership**

To become a partner, your organization must meet the following minimum operational requirements:

- Not run out of a person's home.
- Pass a site inspection prior to approval and once a year thereafter.
- Have responsible personnel for record keeping, reporting, distribution, food safety, and inventory control.
- Proper and adequate physical storage space (unless you receive and distribute food on the same day).
- Regularly operate with scheduled hours, open at least once a month for a minimum of two hours each time.
- Ability and willingness to access and submit service numbers via the internet.
- Use Link2Feed software system to track individuals enrolled and served (training and access provided by EPFH at no cost).
- Follow eligibility criteria provided by the Texas Department of Agriculture and audited by EPFH Food Bank.
- Adhere to food safety guidelines at all times.
- Agencies are non-profit organizations or churches that distribute to individuals and families; product cannot be redistributed to other non-profit or for-profit entities.

### **Initial Site Inspection**

Before granting approval, I'm excited to have the opportunity to visit your organization! This visit will serve as a chance for us to get to know each other better and for me to become familiar with your location and distribution plan. It's also an excellent time for us to address any questions or concerns you may have.

As part of the partnership process, all potential partner sites are required to undergo a site inspection. This inspection ensures that everything is set up correctly to maintain the highest standards of food safety and distribution efficiency.

Once the partnership is established, we will conduct an annual site inspection to ensure that we continue to maintain the highest level of service and safety standards. This ongoing evaluation helps us ensure that our partnership remains strong and successful.

## **New Partner Agency Onboarding**

Upon partnership approval, I'm thrilled to invite your organization to attend the New Partner Agency Onboarding. This comprehensive session provides valuable insights into our policies and procedures for being a Partner Agency. It's a fantastic opportunity for your representatives to familiarize themselves with the process and gain essential knowledge to ensure a successful partnership.

To ensure a smooth and seamless transition, we kindly request that at least one representative from your organization attend this onboarding. This representative will be equipped with the necessary information to manage your food distribution effectively.

If someone other than the mentioned representatives will be responsible for managing your food distribution, we encourage them to attend the training as well. This way, we can ensure that everyone involved is well-informed and ready to serve the community efficiently.

Normally, the onboarding takes place at our food bank, where we can provide a hands-on and interactive experience. However, we understand that this may not always be feasible. If needed, we are more than happy to make arrangements for on-site sessions, ensuring that your representatives receive the necessary training in a way that suits your organization's needs.

We value your partnership and are committed to ensuring a successful and impactful collaboration. The New Partner Agency Onboarding is designed to empower your team and set the foundation for a strong and enduring partnership. Together, we can make a significant difference in the lives of those we serve, and I'm excited to embark on this journey with your organization!

### **Scheduling for agency pick -up or delivery.**

Our transportation resources are limited, and we want to ensure that our distribution efforts are efficient and effective for all our partner agencies. As part of our commitment to serving the community, we offer delivery services to some agencies. This allows us to efficiently support larger-scale operations and ensure that the food reaches those in need.

For our partner agencies serving fewer households per month or on a limited basis per month, we kindly request that they arrange their own transportation for picking up food from the food bank. We believe this approach will allow us to extend our reach to more organizations and better allocate our resources to meet the diverse needs of the community.

If your agency falls within the category of those who need to arrange their own transportation, we encourage you to make an appointment for food pick-up at the food bank. By scheduling appointments, we can ensure that your visit is as smooth and convenient as possible. Our team is here to assist you in coordinating the pick-up process and providing any necessary support.

We value all our partner agencies, regardless of size, and our aim is to work together in the most efficient way to make a positive impact on hunger in our community. If you have any questions or need assistance with arranging food pick-up, please don't hesitate to contact us. We are here to support you and ensure that our partnership is successful and beneficial to all involved. Thank you for your dedication to serving those in need, and we look forward to continuing our collaborative efforts.

# Partner Agency Application



## SECTION 1: General Information

1. NAME OF AGENCY/ORGANIZATION: \_\_\_\_\_

2. ADDRESS OF AGENCY: \_\_\_\_\_

3. CITY/STATE: \_\_\_\_\_ ZIP \_\_\_\_\_

4. MAILING ADDRESS: (if different) \_\_\_\_\_

5. CERTIFYING OFFICIAL/DIRECTOR: \_\_\_\_\_

6. PERSON COMPLETING THIS APPLICATION/CONTACT PERSON:  
\_\_\_\_\_

7. Phone: \_\_\_\_\_ Emergency: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Website: \_\_\_\_\_

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Briefly state the purpose (mission) of your agency/organization.

How long has your organization been in business?

- Less than 1 year
- 1 – 3 years
- 3-5 years
- 5-10 years
- More than 10 years

What are your principle sources of funds?

- General Revenue's \_\_\_\_\_%     Grants \_\_\_\_\_%     Government Contracts \_\_\_\_\_%
- Corporate Donations \_\_\_\_\_%     Individual Donations \_\_\_\_\_%

Describe services currently provided by your organization:

Indicate a breakdown of age groups served by your program.

0-5       6-18       19-40       41-60       OVER 60

Do you currently purchase food for distribution?    Yes     No

IF YES:

How much do you spend monthly (on average)?

How many people access that food currently per month (on average)?

## **SECTION 2: Partnership Criteria**

Does your agency have 501c3 non-profit status?    Yes     No

**If yes**, attach a copy of IRS Letter of Determination.

**If no**, Is your organization a public entity?    Yes     No

If Neither:

The agency may be under the umbrella of a parent organization which holds a 501 (c) 3 exemption. Submit the parent organization 501c3 and a letter authorizing the arrangement signed by authorized representative of the parent organization.

**OR**

Churches may attach a completed Church Qualifier Letter on church stationery, which is signed by Minister or authorized Church Representative.

## **SECTION 3: Food Program Profile**

**Check all that best describes the food program you want to start:**

- Emergency Food Pantry** - Provides groceries to those in need of food assistance
- Meal Program** - Cooking and serving meals to registered clientele: including Day Care, Rehabilitation, Half-Way Homes, Group Homes, Day Activity Programs
- Soup Kitchen** - Cooking and serving meals to walk-in guests on a regular basis

In order for your clients to receive meal/services, will your organization ask for a fee/donation?

- Yes  No

In order for your clients to receive food, will they have to complete any requirements?

- Attend church services or another unrelated event
- Receive prayer
- Volunteer
- Sign up for another service
- None
- Other (please describe):

If you become a partner agency, how often will you distribute food?

- Several Times a week
- Once a week
- Once a Month
- Other (be specific)

What Day/Days and times do you expect to distribute food?

Days	Mon. <input type="checkbox"/>	Tues. <input type="checkbox"/>	Wed. <input type="checkbox"/>	Thurs. <input type="checkbox"/>	Fri. <input type="checkbox"/>	Sat. <input type="checkbox"/>	Sun. <input type="checkbox"/>
Time							

What percentage of clients you will serve are

Low Income \_\_\_\_\_ %      In need of Emergency food assistance \_\_\_\_\_ %

How will you inform the community about your food distribution program?

How will you determine who will receive food from your program?

How many people do you anticipate serving?

Per Distribution: \_\_\_\_\_

Per Week: \_\_\_\_\_

Per Month: \_\_\_\_\_

How many **staff** will help with distributions?

How many **volunteers** will help with the distributions?



May we refer individuals who contact the El Pasoans Fighting Hunger Food Bank for food to your program and post you information on our website referral listing?

Yes     No

**Please note:** Applications are evaluated based on area need and frequency of distribution. Priority for partnership will be given to agencies serving areas with few emergency food distribution locations, and those that will have distribution hours available weekly.

#### **SECTION 4: Food Storage/Handling and Facility Information**

1. Do you have a refrigerator/freezer to use for food storage?  Yes  No  
Please list current temperature and dimensions of each unit that will be used for food program.

2. Do you have a secure area to store dry food products?  Yes  No

3. Can you accept pallets of food?  Yes  No

4. Do you have equipment available to use?  
Please  all that apply.  Truck/Van  Refrigerated Truck  Pallet Truck

5. If applicable, is the food storage separate from living quarters?  Yes  No

*Please note: Part of the application process is a site visit that includes a food-safety evaluation of the facility.*

**SECTION 5: Signature**

I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF ALL OF THE STATEMENTS CONTAINED HEREIN AND ON ANY ATTACHMENTS ARE TRUE, CORRECT, AND COMPLETE AND MADE IN GOOD FAITH.

\_\_\_\_\_  
Name of Representative filling out this application

\_\_\_\_\_  
Signature of Authorized Agency Representative

\_\_\_\_\_  
Date

**For EPFH use only**

Application received by the EPFH Food Bank \_\_\_\_\_

Date

Application:  Approved for Site Visit Evaluation       Not Approved

\_\_\_\_\_  
Signature of El Pasoans Fighting Hunger Personnel

\_\_\_\_\_  
Date