



Department of Health

Women, Infants, and
Children Program (WIC)

Referral Form

Please fax completed referrals to 330-493-9932

Parent/Guardian Name: _____ Child's Name: _____

Child's Birthdate: _____ Home address: _____

Phone: _____ Email: _____ Referral source: _____

Ohio WIC Program Income Guidelines 2025

Family Size	Annual*	Monthly	Weekly
1	\$28,953	\$2,413	\$557
2	\$39,128	\$3,261	\$753
3	\$49,303	\$4,109	\$949
4	\$59,478	\$2,479	\$1,144
5	\$69,653	\$5,805	\$1,340
6	\$79,828	\$6,653	\$1,536
7	\$90,003	\$7,501	\$1,731
8	\$100,178	\$8,349	\$1,927

*Note: If you have more than 8 persons in your household, please contact our WIC clinic for guidelines.

What is WIC?

- Supplemental Nutrition Program for Women, Infants, and Children.
- WIC is for income eligible pregnant, breastfeeding, non-breastfeeding postpartum women, infants, and children up to 5 years of age with a medical or nutrition risk.

This institution is an equal
opportunity provider.