Sample WIC Information Letter #1

(Local Agency Letterhead)

(Date)
(Name)
(Agency)
(Title)
(Address)
(City, State, Zip Code)

Dear (Contact Name),

The (Local Agency Name) WIC Program is a federally funded, supplemental food and nutrition education program. The mission of the WIC Program is to improve the overall health status of the target population. Services are provided to low-income pregnant women, breastfeeding women, postpartum women, infants and children to five years of age residing in the (County) area.

Services provided by the WIC Program include: nutrition counseling; group nutrition education; nutritious foods; and referrals to other health, education and social service programs in the community. The WIC participants are screened in a clinic setting where WIC staff weigh, measure and check the hemoglobin value, discuss their health histories and assess their diet.

Once the participants are found to be eligible they are provided with food vouchers that are redeemed at local WIC-approved grocery stores. The participants are scheduled for periodic WIC clinic visits for follow-up counseling and group nutrition education classes. They also receive food vouchers during the WIC clinic visits.

If you are already aware of the positive impact that the WIC Program has on the WIC participants, this information will serve as a reminder. However, if you are not familiar with this information, it will assist your agency in understanding the WIC Program.

I look forward to working with your agency to promote the WIC Program in our community. Please feel free to contact me at (Phone Number) for more information.

Sincerely,

(Name)
(Title)