



FOR OFFFICE US	<u>SE:</u>
Date Received: _	
Interview Date:	

Thank you for your interest in Redeemed Home! We are a residential home for women who desire healing from past trauma and an opportunity to live a quality life of sustainable recovery. We are a faith-based, 12-15-month program. Successful candidates are committed to change and willing to try new approaches to their recovery ("willing to go to any lengths"). Please review *this* page so you understand what is included in this packet, and how to complete our application. We look forward to speaking with you soon!

Blessings,

Judy A Shelton Program Director, Redeemed Home

The Intake Process at Redeemed Home

There are several steps that help the staff at Redeemed Home and women who are interested in living in the house to mutually decide if Redeemed Home is a place where she can heal and thrive. The process is outlined below:

- 1. A referral is made from various community partners (or the woman is self-referred). A Redeemed Home staff member explains that the woman must meet the following basic criteria identified above.
- 2. If the woman meets all these basic criteria, the staff at the Redeemed Home will send the referring partner/potential applicant an application within 3 days.
- 3. The woman completes the application and returns it to the Redeemed Home <u>along with a brief summary of her</u> <u>life story (2-3 pages).</u>
- 4. If there are open spaces at the house, Redeemed Home staff will schedule an assessment. This assessment typically takes 75-90 minutes to complete. If there are no open spaces, the application will be put on a waiting list, to be considered by the date of application when space becomes available.
- 5. Redeemed Home staff will conduct the assessment and provide the woman with an overview of the expectations for living at the house. A follow-up meeting is scheduled for within 5 days for both parties to communicate the final decision.
- 6. If both Redeemed Home staff and the woman feel that the house will be a place that she can heal and grow, they will move ahead with setting the arrival date, arranging details of the move and signing any necessary paperwork. If the applicant is currently incarcerated, the decision and details for the move will be communicated via the referring partner. INTAKES INTO THE PROGRAM OCCUR ON MONDAYS AND TUESDAYS OF EACH WEEK.

Profile of the Ideal Candidate

Would she qualify to be a resident at the Redeemed Home?

Redeemed Home is open to all qualified women regardless of ethnicity, religious affiliation, or sexual orientation. The ideal resident is the woman who is open to community living and is ready to do the hard work of healing and restoring her life. **Our program demands that a woman commit to at least full year of instruction and guidance.** She must be willing to fully participate in the transformation process that comes through education, skill development, self-discovery, and feedback and assessment from the community. And she must have the following qualifications:

- Female
- Age: 18+
- Not currently the primary caregiver for any children
- Mentally and emotionally stable; no reported suicide attempts in 3 months.
- Can pass a urine drug test and alcohol swab.

- Unless you are coming from a recovery program, you will be asked to complete a drug & alcohol assessment within the 7-10 days of admittance into the program.
- Does not have a history of violence, not a registered sex offender
- Must be willing to recover in community
- Must take responsibility of their recovery
- Must meet change with a positive attitude
- Must be motivated and committed to their change
- Must be willing to give up cellphone during Orientation and Phase 1 of program

All applicants must complete the following application and submit at 2-3-page document addressing the following questions:

- ❖ How and/or why did you begin using?
- ♦ How many times have you tried to get clean?
- ❖ Why is this time different?
- Why Redeemed Home?

Is there anything else that is important to your story?

Service Areas Outline

What does Redeemed Home provide?

Physical

- -Stable Housing
- -Nutritious food
- -Exercise
- -Medical appointments
- -Smoking Cessation
- -Wellness Class

Emotional

- -16-week emotional skills training
- -Weekly support groups
- -Referral for Individual/Trauma Counseling

Relational

- -Eating meals together
- -Relational Groups
- -Referral to Marriage Resource Center for classes on Healthy Relationships
- -Family Activities
- -Structured family visits

Spiritual

- -Weekly Bible Study
- -Prayer before meals
- -Personal Mentor
- -Church involvement
- -Group Evening Devotions

Life Skills

- -Life Coaching
- -Cooking
- -Meal Planning
- -Cleaning
- -Gardening
- -Finance Coaching
- -Art/Sewing
- -Access to budgeting software

Education/Employment

- -GED Tutoring (as needed)
- -Educational Coaching
- -Computer Skills classes
- -Employment readiness training
- -Community Service opportunities

Redeemed Home

Program Admission Application



Thank you for your interest in coming to live at Redeemed Home! Please fill out this form and write out and attach as much of your life story as you feel comfortable sharing and why you believe Redeemed Home can help you. 2-3 pgs.

General Info					
Name:					
		Phone Number:			
Current Address:					
Permanent Address: (if differ	ent than current)				
E-mail Address:					
Do You Have Any of the Following?		Education/Job History			
Birth Certificate	Yes No	Highest grade completed			
Social Security Card	Yes No	Last job worked			
Active Driver's License	Yes No	Date of last job			
State ID	Yes No	Marital Status: Married Single Divorced Widowed			
Food Stamps	Yes No	Religious Background Religious Affiliation			
Family Information: Emergency Contact: Name		Home Church Phone:			
Address					
Children and Ages:		Controller Assessment of			
Name:	Age	Custody Arrangements:			
Name:	Age				
Name:	Age				
Name:	Age				
Medical History Insurance Yes, No	Provider				
Current Physician		Phone:			
List any Current Health Issue	es				
		alth):			
Please circle any that are true		HEP A, B, C TB			
Is there a chance you are pre					
List all medications (including	ng MAT Treatment if	Papplicable			
List ony ollorgies					

List Your Goals and Expectations Criminal History Current Incarceration Yes No Have You Ever Been Convicted of a Crime? Yes No Do You Have any Pending Charges? Yes No Probation and/or Parole Officers Name: Phone: Phone: Treatment and Drug History Current Treatment: Past Inpatient Treatment: Past Outpatient Treatment: Past Outpatient Treatment in: (circle any that apply) NA AA Celebrate Recovery Other: Drug(s) of Choice Check if Applicable How Often Method Alcohol Marijuana Crack / Cocaine Opiates Prescription Drugs Fentanyl Benzodiazepines Heroin Methamphetamines Understanding To the best of my knowledge, I believe that all the information contained in this application and my autobiography true and complete. I understand that if I have knowingly made any false statements, this may disqualify me from eight por this program. If agree that the staff of Redeemed Home can check the accuracy of anything on this	Other Information How Did You Hear About Re	deemed Home?				
Current Incarceration Yes No List all Misdemeanors and Felonies: Previous Incarceration Yes No Have You Ever Been Convicted of a Crime? Yes No Do You Have any Pending Charges? Yes No Probation and/or Parole Officers Name: Phone: Treatment and Drug History Current Treatment: Past Inpatient Treatment: Past Outpatient Treatment: Current/Past Involvement in: (circle any that apply) NA AA Celebrate Recovery Other: Drug(s) of Choice Check if Applicable How Often Method Alcohol Marijuana Crack /Cocaine Opiates Prescription Drugs Fentanyl Benzodiazepines Heroin Methamphetamines Understanding To the best of my knowledge, I believe that all the information contained in this application and my autobiography true and complete. I understand that if I have knowingly made any false statements, this may disqualify me from b	List Your Goals and Expectati	ions				
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Do You Have any Pending Charges? Yes No Probation and/or Parole Officers Name: Phone:	Previous Incarceration		Yes	No		
Probation and/or Parole Officers Name:	Have You Ever Been Convicted of a Crime? Yes No			No		
Name:	Do You Have any Pending Ch	narges?	Yes	No		
Name:	Probation and/or Parole Offi	cers				
Treatment and Drug History Current Treatment: Past Inpatient Treatment: Past Outpatient Treatment: How Long Have You Been Clean? Current/Past Involvement in: (circle any that apply) NA AA Celebrate Recovery Other: Drug(s) of Choice Check if Applicable How Often Method Alcohol Marijuana Crack /Cocaine Opiates Prescription Drugs Fentanyl Benzodiazepines Heroin Methamphetamines Understanding To the best of my knowledge, I believe that all the information contained in this application and my autobiography true and complete. I understand that if I have knowingly made any false statements, this may disqualify me from b	Name:				Phone:	
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Past Outpatient Treatment:						
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Current/Past Involvement in: (circle any that apply) NA AA Celebrate Recovery Other: Drug(s) of Choice Check if Applicable How Often Method						
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Crack /Cocaine Opiates Prescription Drugs Fentanyl Benzodiazepines Heroin Methamphetamines Understanding To the best of my knowledge, I believe that all the information contained in this application and my autobiography true and complete. I understand that if I have knowingly made any false statements, this may disqualify me from be	Alcohol					
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Benzodiazepines Heroin Methamphetamines Understanding To the best of my knowledge, I believe that all the information contained in this application and my autobiography true and complete. I understand that if I have knowingly made any false statements, this may disqualify me from be	Prescription Drugs					
Heroin Methamphetamines Understanding To the best of my knowledge, I believe that all the information contained in this application and my autobiography true and complete. I understand that if I have knowingly made any false statements, this may disqualify me from be	Fentanyl					
Methamphetamines Understanding To the best of my knowledge, I believe that all the information contained in this application and my autobiography true and complete. I understand that if I have knowingly made any false statements, this may disqualify me from b	Benzodiazepines					
Understanding To the best of my knowledge, I believe that all the information contained in this application and my autobiography true and complete. I understand that if I have knowingly made any false statements, this may disqualify me from b	Heroin					
To the best of my knowledge, I believe that all the information contained in this application and my autobiography true and complete. I understand that if I have knowingly made any false statements, this may disqualify me from b	Methamphetamines					
application by looking at any public records they choose. I also understand that this application is not a guarantee t will be accepted at Redeemed Home, it is only the first step in the process. Signature Date	To the best of my knowledge true and complete. I underst eligible for the program. I a application by looking at any will be accepted at Redeeme	and that if I have gree that the staf y public records	e knowir f of Red they cho	ngly ma eemed l ose. I a	de any false statements, Home can check the acculso understand that this in the process.	this may disqualify me from being curacy of anything on this application is not a guarantee that