

***EXODUS
HOUSE
TULSA
APPLICATION***

**2624 E. Newton St., Apt. E
Tulsa, OK 74110**

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Rev: 04/2010

Answers to Frequently Asked Questions (FAQs)

Thank you for your interest in Exodus House Ministry. Before you complete the application, please read the following information carefully.

What is Exodus House Ministry?

Exodus House is an inter-denominational Christian organization established for the purpose of helping released ex-offenders and their dependent children to become productive, cohesive family units. We offer assistance in job placement, budgeting, homemaking, living skills, and parenting. Families and individuals selected for the program are given rent-free housing in our apartment community located at 2624 Newton Street, Tulsa, Oklahoma 74110.

During their stay at Exodus House, residents are required to find and maintain full-time employment, attend arranged evening meetings, and save money in order to be self-sufficient at the end of their residency. Each resident is given personalized guidance in regard to his or her other needs, such as family and/or individual counseling, drug after-care, and education. We strive to help those individuals who are committed to make positive changes in their lives and to achieve a level of success which will empower them to become self-motivated and able to stand alone as a family unit or individual who is an active church member and a productive member of a healthy community. The standard length of stay in the apartment that we provide is six months. Further assistance may be provided as deemed necessary by Exodus House.

We are a reintegration program. You will be required to follow all policies, procedures, and programs that are deemed necessary for your reintegration.

Mission Statement

Discipling ex-offenders and their families from captivity, through the wilderness, to freedom.

Vision Statement

Exodus House is a comprehensive residential care ministry of Redemption Church, Tulsa, and of the Criminal Justice and Mercy Ministries (CJAMM) Board of the Oklahoma Conference of the United Methodist Church. Our primary purpose is the provision of a disciplined and mutually accountable Christian community in which basic changes can be made and new ways of living tested and strengthened for persons desiring to make a new beginning after release from prison. We believe that with God's grace, change is possible and that, in Jesus Christ, creation begins anew. (*II Corinthians 5: 17*).

We envision and will work to develop the structures to empower the following:

- Parents reunited with their children and living fulfilling lives.
- Children nurtured and treasured by their parents, receiving affirmation and guidance from the whole Exodus House “family.”
- Christ-centered spiritual growth.
- Gainful and productive full-time employment for all residents.
- Networking with groups, agencies, corporations, and individuals of good will, for the sake of building a safer and more caring community.
- Providing congregations with the opportunity to share hope with “the least” of the brothers and sisters of Jesus Christ.

We offer a continuity of care, through Exodus House staff and activities, and through the ministries of Redemption Church, by which families who “graduate” from Exodus House may keep on growing and have a functional, supportive community in which to reach out and encourage others in their beginning journeys of faith and fellowship.

What are the apartments like?

The apartments are one bedroom with a living room, a kitchen, dining area, and one bath. Each apartment is fully furnished. Telephones are not provided for the individual apartments, but residents can get phone service started after they have obtained full-time employment.

What are the requirements to be involved with Exodus House ministry?

1. You must have a desire to change. This is a free housing program, with responsibilities required of the residents. If you are not willing to abide by strict rules and to live differently than you have in the past, you will not want to live here.
2. Adults who are able-bodied must work at a full-time job or the equivalent. Second-shift jobs may be worked with permission. No third-shift jobs are allowed.
3. The program and structure of Exodus House are set up for your family (dependent children under 18 years of age) to live with you. Due to space constraints at Exodus House Tulsa, more than two children is not feasible.
4. Those adults who are selected to live as part of the Exodus House community who do not have children living with them may be assigned to share space with a roommate. Mutual respect makes these arrangements positive and constructive for all concerned. Only parents with children will be permitted to take furniture with them after successful completion of the Exodus House program.

Requirements to be involved with Exodus House ministry (continued)

5. You must be drug and alcohol free, one day at a time, with a total commitment to stay that way. Random urinalysis tests are done at Exodus House. Refusal is considered a positive UA result.
6. Within the first 72 hours of arrival at Exodus House, each resident must complete an information packet from our local substance abuse counseling service, and call to make an appointment with an intake counselor. After an assessment, our counseling service partner will make a treatment plan for each resident. This treatment plan will become part of the resident's Exodus House reintegration plan.
7. Children must have responsible parental supervision and must be in the apartment by curfew. Children under age 13 must be in daycare when parent is working.
8. Each resident is expected to follow the house rules (attached) and to respect all neighbors and guests.
9. Residents are expected to save a minimum of \$500 during their residency at Exodus House. Residents are encouraged to save more than the minimum amount, with \$200 a month being a reasonable goal. (Remember: the value of the free apartment is at least \$250).
10. Each resident will secure their own residence by the end of their stay at Exodus House.
11. Each resident family will help with apartment and apartment community upkeep each month.
12. You must state in writing at the time of your application the full extent of your outstanding court costs, fines, assessments, and restitution due upon release, and to what jurisdictions you will be required to appear to make payment arrangements. If you are on probation/parole and leave this community, we are under obligation to notify the applicable authorities of your change in residency.

How do I apply to become a member of the Exodus House community?

Anyone interested in living as part of the Exodus House community must submit the enclosed written application. Applications are accepted for current vacancies. We maintain a waiting list. At the time of your acceptance into Exodus House, your name will be added to the waiting list. A staff member or volunteer person will conduct an initial interview at the time of application. It is mandatory for applicants to provide information regarding outstanding debts, sources of income, and both long- and short-term goals in writing on a separate sheet.

Application Process

1. Fill out and mail an application back to Exodus House no less than sixty (60) days before your release. Included with the application is a CRC information release form. Sign this and give it to your case manager. He or she will then mail the needed information to us. (We must have this information before we schedule an interview for you.)
2. After we have received your application with all information filled out and signed, along with your CRC and case manager information, then through your case manager, we can schedule an interview with you at your facility.
3. After your interview, all of your information will be presented to our board of directors. Upon their approval, if space is available or projected as being available at the time of your expected release, you will receive an acceptance letter and/or call of acceptance to your case manager. Only then can you use Exodus House as an official home offer. Be sure to give a copy of your acceptance letter to your case manager as your home offer for Parole.
4. If you are approved for acceptance into Exodus House, but no space is available, we will notify you of this by letter. You may be placed on the waiting list if you elect to do so in writing, by letter. From time to time, residents drop out of the program at our request or theirs, and a space can become available, so stay in touch! Remember that through God all things are possible. Remember: Exodus House can not be your home offer until space is available, and you have been accepted into the Exodus House program.
5. If your application is denied, we will notify you by letter and provide you with information on other ministries available in the Tulsa metro area where you might apply.

Other important information for you to be aware of:

Applicants please remember that you can not become employed without both of the following:

- A social security card;
- A valid Oklahoma state picture ID or driver's license.

You will need a certified copy of your birth certificate to obtain a state ID. Please try to obtain these through your reintegration officer at least sixty (60) days before your release.

Before your release, determine if you have any outstanding warrants for traffic tickets or any other unresolved court matters. If you do, write the applicable county office, court, or other authority before release to make arrangements for settling these issues. Keep any written agreements as an important paper. It is much easier to handle these matters in writing, before release, than it is if picked up after your release.

Exodus House Covenant

I agree to faithfully participate in the Exodus House Covenant Community.

As members of this community, we are committed to growing in our relationship with God and developing behavioral responses and spiritual patterns that will sustain us in our future life as full participants in God's plan and purpose for us. Our spiritual life in Jesus Christ and as participants in the Redemption / St. Luke's United Methodist Church are integral parts of our growth as members of this emerging experiment in Christian community life.

- _____ I will be faithful to the community, the staff, and residents.
- _____ I will be honest in my presentation of my struggles, my needs, my accomplishments, and myself.
- _____ I will be accountable for my words and actions, both in group meetings and in my interpersonal relationships.
- _____ I will refrain from the use of any mood-altering chemical not prescribed by my physician and will use prescribed medications as instructed by a physician.
- _____ I will seek the consent of the entire community before inviting any new persons or former residents into our home.
- _____ If I plan to entertain visitors, I will use the community room. I will notify staff for its use the day prior to my entertaining.
- _____ I will clean up after I have used the community room, and my guest will leave at curfew.
- _____ I understand that breaking curfew or not returning to the community without staff notification could result in my termination from the program.
- _____ I accept responsibility for my own life and accept the consequences of my choices.
- _____ I will participate in all of the activities of the Exodus House community as agreed upon for my future growth, development, and recovery.
- _____ I will accept feedback from my peers when it is offered in a caring, kind, and helpful manner.
- _____ I will accept responsibility for being accountable to the community as I learn to set healthy limits and boundaries for myself.
- _____ I will invite overnight guests only with the consent of the community (including staff), and I will take responsibility for their abiding by the spirit of the community.

_____ To encourage the peace and well being of the community, I will respect the weekday curfew of 10 PM and the weekend curfew of midnight. In the event of unforeseen circumstances, I will inform a staff member as soon as possible before curfew of where I am and when I expect to return home.

_____ I will build up a savings account for myself and my future needs, as well as paying for my own living expenses and utility bills while residing at Exodus House.

_____ I will submit myself to random urinalysis and/or other standard drug and alcohol testing as deemed appropriate by the staff.

_____ I understand refusal to submit to a UA is considered a positive test result, and I will accept the consequences.

_____ I will accept responsibility for meeting my intimacy needs and accept the restriction that I will not act out sexually with any member of the community as long as I am a resident.

_____ I understand that sexual interaction with another resident will result in the dismissal of both parties from the community.

_____ I will take responsibility for being an advocate of the Exodus House Covenant Community in consultation with the staff and the community as a whole.

_____ I will contact staff for assignment to duty that benefits the current upkeep needs.

_____ I will accept the consequences of any failure on my part to fully abide by the covenants stated above. Consequences will be determined by staff and representatives of the community working together with me, with the goal of restoring me to full participation in patterns of healthy Christian living.

Additional Covenant Commitments for individual participants and family units:

1. _____

2. _____

3. _____

Signed _____ **Date** _____

Witnessed _____ **Date** _____

Rules and Conditions of Residency at Exodus House

The following rules of conduct shall be in effect during the participation of any resident in the Exodus House program at 2624 Newton Street, Tulsa, OK 74110. Violation of any rule, at the sole discretion of the Board or Executive Committee, may be cause for immediate dismissal from the building, and immediate termination from the program.

- ____ 1. You and your family (dependent children) are participants in the ministry of Exodus House during your residency. Residency is dependent upon participation in the ministry as outlined in the rules, policies, and procedures. Choosing to not comply with the rules or to not participate in the program ministry of Exodus House will result in termination of your residency.
- ____ 2. You are not allowed to give Exodus House apartment keys to anyone except those who live in the apartment with you.
- ____ 3. Resident participants will not pay rent, but will be held responsible for paying the utility bills monthly on their apartment unit.
- ____ 4. Unpaid utility bills, sixty (60) days past due, can be ground for termination.
- ____ 5. You must start your savings account with the conference office within sixty days of residency.
- ____ 6. In consideration of living at Exodus House, all residents agree and understand that they are considered to be participants in the Exodus House Ministry program and that violation of any of the following rules and conditions will result in termination of the relationship between the Ministry and the resident. Upon request by the Board of Staff/Volunteers of Exodus House, the resident will immediately leave the premises. The failure of the resident to do so will constitute criminal trespass. The refusal of the trespasser to vacate the premises will subject him or her to arrest. Additionally, we are not a storage facility. If you choose to leave this program, take your personal items with you. If you are asked to leave, take your personal items with you. Anything left over thirty (30) days will be sold for charges or given away.
- ____ 7. The Exodus House Board or Staff may enter and inspect any unit on the property at any time during your residency, without advance notification.
- ____ 8. No illegal activity of any kind will ever be permitted or tolerated.
- ____ 9. Alcohol, drugs, and firearms are prohibited. Zero tolerance! Referrals will be made to detox centers or drug/alcohol treatment facilities as needed.
- ____ 10. No pornography! Pornography is disrespectful. There is no place for it in this community.

Rules and Conditions of Residency at Exodus House
(Continued)

- _____ 11. There is a 10 PM curfew enforced every weekday. There is a midnight curfew enforced on Friday and Saturday night.

- _____ 12. Weekend passes are required. Pass forms are available in the Exodus House office. They must be filled out and approved before you leave. No weekend passes are given to residents during the first thirty days.

- _____ 13. Quiet hours are in effect between 10 PM and 7 AM. During these hours, keep the noise levels to a minimum. No outside activities are permitted during quiet hours. Zero tolerance.

- _____ 14. Visitors will be expected to abide by the same rules as residents. Visitors are allowed only between the hours of 5 PM through 10 PM Monday-Thursday; 5 PM through midnight on Fridays; 8 AM through midnight on Saturdays; and 8 AM through 10 PM on Sundays. **No** overnight guests are allowed unless permission is obtained through Staff/Volunteers. Single female residents are not allowed any male guests in their apartments and single male residents are not allowed any female guests. A community room is available for visitation and entertainment purposes. Each resident is financially responsible for any damage caused by his or her visitor(s). Any sexual acts at Exodus House can be grounds for termination.

- _____ 15. **No** visitors will be allowed in resident apartments when the resident is not home.

- _____ 16. A parent or legal guardian must attend children at all times. Parents or legal guardians are responsible for any damages caused by their child. Children under age 13 must be in daycare while you are at work.

- _____ 17. Vehicles must be parked only in designated areas. Do not park in the fire zones.

- _____ 18. Any maintenance or repair, damage or hazards will be reported at once to the Exodus House managers. No structural changes may be made on the premises, inside or out.

- _____ 19. All passageways and common areas will be kept free and clear of personal belongings.

- _____ 20. Each resident is required to do four (4) hours of work per month at Exodus House. There are many different tasks available to choose from. This is a way of giving back to the program while assisting with necessary upkeep.

Rules and Conditions of Residency at Exodus House
(Continued)

- _____ 21. All furnishings and other property on the premises that belong to Exodus House are not to be damaged or removed.
- _____ 22. The premises will be kept neat and clean. This includes common areas as well as personal vacuuming, sweeping and mopping floors, cleaning the oven and stove, cleaning the bathtub, toilet, and sinks, as well as keeping the outside of your apartment neat and clean.
- _____ 23. Residents must clean their apartment before moving out, and all furnishings will be left intact and in good condition. You must schedule an exit interview with staff.
- _____ 24. No fighting, violence, menacing, or threats of violence of any kind will be tolerated. These are grounds for immediate termination of residency.
- _____ 25. No pets of any kind are allowed.
- _____ 26. No long distance calls can be made from the office phone. For calling your family and matters pertaining to courts outside the Tulsa metro area, you are responsible for buying a long distance phone card. We recommend you do this when you cash your discharge check.
- _____ 27. Residents are required to meet with volunteers for evening meeting concerning any Exodus House programs. Group meetings and meeting times may be added or changed at any time.
- _____ 28. The facilities manager will collect savings, utilities, and other money owed as they come due. These must be paid by money order only (not cash or check). Utilities are past due sixty days after posted to the resident ledger.
- _____ 29. It is the responsibility of the residents to secure and prepare for relocation no less than one (1) month prior to move-out/graduation. The Exodus House staff will not do this for you.
- _____ 30. The basic residential program is six (6) months. Residents will be evaluated at five months to assess any further need of assistance. Additional assistance may be provided on a case-by-case basis, as deemed necessary by the Board and Staff of Exodus House.

Rules and Conditions of Residency at Exodus House
(Continued)

- _____ 31. Each resident is required to save a portion of each full paycheck. Residents are required to save a total of \$500 during their residency at Exodus House. All savings will be returned to the resident at the time they either successfully complete the program or leave the program for any other reason. Utilities and any other amounts owed to Exodus House such as additional charges for damages to the apartment, if any, will be withheld from the resident's savings. In consideration of accepting this application, the Applicant understands and agrees that any funds held in Applicant's name or account at Exodus House constitute a security deposit against applicant's proper use and treatment of the Exodus House facilities, and acknowledges that such security deposit may, on reasonable notice, be applied to reimburse Exodus House and/or third parties for losses caused by applicant or applicant's invitees, at the sole discretion of Exodus House. The security deposit shall not apply to reasonable and ordinary wear and tear.
- _____ 32. In consideration of the services provided by Exodus House, all residents must and do promise and agree, as a condition of their participation in the program, not to file a claim, complaint, or suit of any kind against the Ministry, Board of Directors, Staff, Volunteers, or Hosts for negligence or any other reason, arising from or during the resident's use of any unit at 2624 Newton Street, Tulsa, Oklahoma 74110, and hereby releases, by signing this application, the Exodus House, Board of Directors, Staff, Volunteers, and Hosts from any such claim, complaint, or suit.
- _____ 33. We believe the week is too long to not have contact with God in the joined fellowship of God's people. Therefore, we meet every Thursday and Sunday for this purpose. We meet each Thursday and Sunday for worship services. Additionally, various classes are offered on Thursdays, and there is a weekly Exodus House Community dinner. Exodus House is a program, and these events are part of the program. You will be required to attend these regularly scheduled program events and activities.

Applicant Agreement to the Rules and Conditions of Residency at Exodus House and Authorization of Release of Personal Information to Exodus House

I request consideration for residence to Exodus House. I have read, signed, and agreed to all the conditions of the accompanying pages. I have initialed every rule and covenant that I agree to follow. I have read the rules and agree to full cooperation and participation in this program. Furthermore, I authorize the release and exchange of any personal information or files to Exodus House from any agency, including, but not limited to, the Department of Corrections, the Pardon and Parole Board, any Courts and the Justice System and/or any Law Enforcement Agency.

Name (print)

Signature

Date

DOC Number

Program Information

Remember that we are a program!

You will be required to attend the following scheduled events:

- ◆ Redemption Church at St. Luke's/Redemption United Methodist Church on Sunday evening.
- ◆ Redemption Church at St. Luke's/Redemption United Methodist Church on Thursday night. This includes one-hour worship and a class (AA, NA, Bible Study, Anger Management, etc.) assigned to you at orientation.
- ◆ Individual and/or group counseling and drug testing at our local substance abuse treatment center that we are partnering with to provide this service. Attendance depends on your treatment plan.
- ◆ Weekly Exodus House Community meetings.

These are held once per week for approximately two hour. At these meetings, we discuss community issues, enjoy fellowship together, share a meal, and have other scheduled events from time to time, such as Bible study, movie night, or a guest speaker.

IMPORTANT NOTICE TO EXODUS HOUSE APPLICANTS

Please be advised that all information regarding criminal history, psychiatric evaluations, and progress at Exodus House, as well as performance and conduct while incarcerated, may be provided to potential and current employers after you become a resident of Exodus House.

After you have completed the Exodus House program, information in your file will be strictly confidential. However, Exodus House will cooperate fully in any criminal investigations of current and previous residents.

In general, Exodus House resident records are kept confidential and not shared with outside parties other than in the exceptions noted above.

Authorization to Release Information

Inmate Name _____ DOC # _____

Address _____

Social Security Number _____ Date of Birth _____

This will authorize _____
to release information from my clinical record in accordance with **Oklahoma State Law Title 43 – A, Section I-109**. I understand that my records have a privileged and confidential status. I am waiving that status for the purpose contained within this authorization.

The release of any information concerning AIDS, HIV, AIDS-related Complex, and the performance of any tests, counseling, and the results and treatment thereof are also authorized.

Specific information to be released: CRC and psychiatric records or any medical records. Any medication taken. Substance abuse evaluation and Treatment Plan

For the specific purpose of: Assessing admission criteria and program development

Information is to be released to: An Exodus House Authorized Agent

I understand that I have the right to refuse to sign this authorization. I further understand that I am authorizing the release of information for the records whose confidentiality and status are protected by Federal Regulation (42 CRF, Section 2.13) and Oklahoma Law, and that redisclosure of this information by the receiving agency is prohibited.

This authorization is for: a single disclosure _____ or continuing disclosure _____. Valid for one hundred-eighty (180) days after the date of my signature as it appears below.

The client or signatory may revoke this authorization at any time upon written notification, but revocation has no effect on action previously taken.

Signature of Client _____ Date _____

Signature of Witness _____ Date _____

For a minor: Signature of parent or guardian _____

Relationship to Client _____ Date _____

Exodus House Reference Form
To be completed by your Case Manager

Applicant's Name (print) _____

Social Security Number _____ DOC # _____

To the applicant: Give this form to your Case Manager. References will not be accepted, except from your Case Manager. Ask your Case Manager to please complete and return this form to Exodus House, or you may send your application in yourself after your Case Manager has completed it.

Sign on the line below to waive your right to access to the complete recommendation and to any accompanying letter or comments.

I waive any right to access to this recommendation (including any accompanying comments or letter as completed).

Signature _____
Date

To the recommender: Please respond to the following questions. If possible, type or print. After completing this form, please return it to Exodus House, or allow the inmate to send it to us. This recommendation is a required and an important part of the application, so a prompt return is important.

Exodus House places a great deal of importance on comments from references. We realize this requires time and effort on your part, and we appreciate your assistance. Thank you in advance for your cooperation.

How long have you known the applicant and in what capacity?

How long have you been involved with the Criminal Justice System and in what capacity?

Comment on the applicant's interpersonal skills:

Comment on your perception of the applicant's attitude and desire to make positive changes in his/her life:

Recommendation Form

Personal Trait	Excellent	Average	Unable to Rate
Leadership Potential			
Maturity			
Motivation			
Ability to work with others			
Planning Skills			
Personal Skills			
Personal Integrity			
Self-confidence			
Goal-directedness			
Attitude			
Willingness to follow rules and guidelines			
Willingness to take personal responsibility for own actions			
Desires and seeks positive changes.			

Recommend with confidence: _____ Recommend with reservation: _____

Recommend: _____ Do not recommend: _____

Additional comments on recommendation:

Signature _____ Date _____

Name _____ Institution _____

Address _____

If you have additional comments, you may attach additional pages or call Exodus House Tulsa at 918.382.0905.

Return to: Exodus House Tulsa
2624 E. Newton St., Apt. E
Tulsa, OK 74110

Exodus House Reference Form

To be completed by your Chaplain

Applicant's Name (print): _____

Social Security: _____ DOC#: _____

To the Applicant: Give this form to your Chaplain. References will not be accepted, except from your case manager. Ask your Chaplain to please complete and return this form to Exodus House, or you do so, as you send your application in.

Sign on the line below to waive your right to access to the complete recommendation and to any accompanying letter or comments.

I waive any right to access to this recommendation (including any accompanying comments or letter as completed).

Signature

Date

To the recommender: Please respond to the questions below. If possible, type or print. After completing this form, please return to Exodus House, or allow inmate to send to us.

Exodus House places a great deal of importance on comments from references. We realize this requires time and effort on your part, and we appreciate your assistance. Thank you in advance.

=====
How long have you known the applicant, and in what capacity?

How long have you been involved with the Criminal Justice System and in what capacity?

Comment on the applicant's interpersonal skills.

Comment on your perception of the applicant's attitude and desire to make positive changes in his/her life:

Recommendation Form

Personal Trait	Excellent	Average	Unable to Rate
Leadership Potential			
Maturity			
Motivation			
Ability to work with others			
Planning Skills			
Personal Skills			
Personal Integrity			
Self-confidence			
Goal-directedness			
Attitude			
Willingness to follow rules and guidelines			
Willingness to take personal responsibility for own actions			
Desires and seeks positive changes.			

Recommend with confidence: _____ Recommend with reservation: _____

Recommend: _____ Do not recommend: _____

Additional comments on recommendation:

Signature _____ Date _____

Name _____ Institution _____

Address _____

If you have additional comments, you may attach additional pages or call Exodus House Tulsa at 918.382.0905.

Return to: Exodus House Tulsa
2624 E. Newton St., Apt. E
Tulsa, OK 74110

Personal Information Questionnaire

Send Completed Application to:

Exodus House Use Only:

Exodus House Tulsa
2624 E. Newton St., Apt. E
Tulsa, OK 74110

Instructions:

1. Be HONEST! Fill out the entire application. Use N/A (Not Applicable) rather than leaving a blank. Incomplete applications may be returned for completion. CRC and both references must be received before your application can be considered.
2. Sign and date your application. Mail all completed applications to the address above.
3. Please type or print legibly.

Name (First, Last)

Date

Social Security Number

Date of Birth

Age

DOC Number

Institution

Parole/Release Date

Offense/Reason for Incarceration

Case Worker's Name

Case Worker's Phone

Have you made parole? ____ Yes ____ No Parole Date _____

Discharge Date _____

Personal Information Questionnaire

Confidential

This form is intended to increase our understanding of you so that we may better help you in your recovery. If you don't know or can't recall answers to some of the questions, make your best guess or estimation. **ANSWER EVERY QUESTION** to the best of your ability. Please type or print legibly.

In your own words, what led to your decision to apply for residency at Exodus House?

Cultural Background:

1. Where were you born? _____

What is your nationality? _____

2. How old were you when you left your parents' home for good? _____

What did you do then? _____

3. In what city or town did you live last (prior to your incarceration)? _____

4. Briefly describe what you have been doing in the last few years. _____

Personal Information Questionnaire

Confidential

Social Life:

1. About how many close friends do you have? _____ Wish you had? _____
2. Do you belong to a gang? _____ If yes, what sort of activities did your gang engage in? _____

3. What clubs, teams, or organizations do you belong to? _____

4. What kind of social events do you like to attend? _____

5. How were drinking and drugs a part of your social life? _____

Chemical Usage:

1. When did you begin using alcohol and/or drugs? _____
2. What was happening in your life at this time? _____

Personal Information Questionnaire

Confidential

Chemical Usage: (continued)

3. What kinds of alcohol and/or drugs have you used? _____

4. How much drugs or alcohol did/do you use and how often during an average week?

5. What is your behavior like when you do drugs and/or alcohol? _____

6. What kinds of trouble has your use of alcohol and/or drugs gotten you into? _____

7. If in recovery, what is your clean date? _____

Personal Information Questionnaire

Confidential

Previous Treatment:

1. Have you ever been in treatment for psychiatric, emotional, or family problems before? _____

2. Have you ever been in treatment for alcohol or drug usage before? _____
If yes, where and when? _____

3. What were your experiences in previous treatment? _____

4. What are your experiences with Alcoholics Anonymous/Narcotics Anonymous?

Personal Information Questionnaire

Confidential

Legal:

Describe your legal record history by filling out the appropriate blanks.

Date	City & State	Charge	Outcome

1. How many DUI/DWI's have you had in the past? _____ When? _____

2. What charges (if any) are pending at the present time? _____

3. Do you have a court appearance? _____ When? _____

4. Will you be on Probation or Parole? _____ How long? _____

5. Who is your Probation/Parole officer? _____

Phone # _____ District _____

Personal Information Questionnaire

Confidential

Educational Background:

1. What is the highest grade you completed in school? _____
2. What were your average grades in school? _____
3. Did you graduate from high school? _____ If yes, what year? _____
If not, did you complete your GED? _____ If yes, what year? _____
4. What were your best subjects in school? _____

5. Were you ever suspended, expelled, etc? _____ If so, for what? _____

Vocational Background:

1. What is your occupation at present? _____
2. What was your occupation prior to your incarceration? _____

3. How long at this type of work? _____
4. What is your current employer's name, or if not currently employed, what was the name of your last employer? _____
5. What sort of work would you like to do? _____

6. What are your career plans for the future? _____

Personal Information Questionnaire

Confidential

Military:

1. Have you been in the armed forces? _____ If yes, complete this section.
2. Branch? _____ Rank at discharge _____
3. Time in service: From _____ To _____
4. Type of discharge? _____
5. Do you have a service-related disability? _____ If yes, what is the nature of the disability? _____

Financial:

1. How much do you owe in court costs, fines, etc., once released? _____
2. What counties or other jurisdictions will you be obligated to make payments to?

3. Do you have difficulty handling money? _____ If yes, what kind? _____

4. What are your priorities when you handle money? _____

5. Are you having financial difficulties at this time? _____ If yes, what kind of difficulties? _____

6. Do you support anyone else other than yourself? _____ If yes, who? _____

Personal Information Questionnaire

Confidential

Family Information:

Complete the following section on your immediate family, including your father, mother, sisters, brothers, stepbrothers, etc.

Family Member's Name	Age	Relationship	Date of Death	Education

1. Who in your family (if anyone) currently has or has had a prescription drug or other drug/alcohol problem? _____

2. Are they still using? _____ Are they currently or have they ever been in treatment? _____

3. Were your father and mother healthy during your childhood? _____ If not, what were the illnesses? _____

Personal Information Questionnaire

Confidential

Family Information (continued):

4. Did you live with both parents during your childhood? _____

5. If not, explain. _____

6. To whom in your family did you feel closest as a child? _____

7. Was either of your parents married more than one time? _____

If yes, how many times? _____

8. If your parents divorced, how do you feel about their divorces? _____

9. What do you remember most about your childhood and family life? _____

10. Was there any sexual, physical, or other form of abuse in your family? _____

If yes, by whom? _____

If yes, which family member(s) were abused? _____

11. Describe how your family members got along with each other. _____

12. What kinds of activities did your family participate in together? _____

Personal Information Questionnaire

Confidential

Family Information (continued):

Circle the word which best describes your marital status.

- Single Engaged Married Separated
Divorced Remarried Widow Widowed, Remarried

13. How many times have you been married? _____ How many children do you have? _____

Please provide the marital information indicated in the chart below:

Spouse's Name	Age	Marriage Date	Separation/ Divorce Date	Number of Children

14. How is your relationship with your present spouse? _____

15. What effect has your substance abuse had on your relationship? _____

Personal Information Questionnaire

Confidential

Family Information (continued):

16. How does your family feel about your living at Exodus House? _____

Please provide the information regarding your children as indicated in the chart below.

Children's Name(s)	Age	Education	Marital Status	Living with Whom?

17. Who (spouse and/or children) would be living with you at Exodus House?

Name	Age	Relationship

Personal Information Questionnaire

Confidential

Family Information (concluded):

18. Are any of your children in DHS custody? _____

If yes, in what county or counties? _____

19. Do you have a DHS reunification plan? _____

20. If your children are with family members, please provide the information indicated in the chart below:

Name	Address	Phone

21. How would you describe your relationship with your children? _____

Personal Information Questionnaire

Confidential

Spiritual:

1. What religion do you follow? _____

2. How active are you in your religion? _____

3. What does "Higher Power" mean to you? _____

4. How often do you attend religious services and with whom? _____

5. What are your religious views about alcohol and drugs? _____

Leisure:

1. What do you do for fun? _____

2. What kind of sports are you presently involved in? _____

3. What are your hobbies? _____

Personal Information Questionnaire

Confidential

Leisure (continued):

4. When was the last time you participated in your hobbies? _____

5. How would you spend a few free hours? _____

6. How would you spend a few free days? _____

7. Who would you spend your free time with? _____

8. What new interests would you be interested in pursuing? _____

9. What would you like to learn that is new to you? _____

Health:

1. How is your overall health at this time? _____

2. Are you taking any prescribed medication from a doctor at this time? _____

Personal Information Questionnaire

Confidential

Health (continued):

If the answer to the previous question was “Yes,” please list medications below.

Name of Medication	Dosage	How Often Taken?	What is medication prescribed for?

3. Does you or anyone in your family suffer from any of the conditions listed below?

Medical Condition	Do you suffer from this condition?	Does a family member suffer from this?	Name of Family Member	Relation of Family Member to You
Nervous Breakdown				
Migraine Headache				
Hallucinations/ Delusions/ Visions				
Alcoholism				

Personal Information Questionnaire
Confidential

Health (continued):

Medical Condition	Do you suffer from this condition?	Does a family member suffer from this?	Name of Family Member	Relation of Family Member to You
Bizarre Behaviors				
Nervousness				
Sleeping problems				
Convulsions or fits				
Chronic physical pain				
Memory lapses				
Drug addiction				
Psychiatric problems				
High stress				
Excessive eating				

4. What is your general mood? _____

5. How do you feel about coming to Exodus House? _____

6. How do you view yourself? _____

Personal Information Questionnaire

Confidential

Health (continued):

7. What do you generally worry about or are concerned about? _____

8. Describe your behavior when you are not drinking or using drugs. _____

9. Describe your behavior when you **are** drinking or using drugs. _____

10. How would your family and friends describe your behavior? _____

11. Have you ever thought about suicide? Yes or No? _____

12. Have you ever attempted suicide? Yes or No? _____ If so, when? And what method? _____

Strengths and Weaknesses:

1. What do you consider to be your strong points? _____

2. What do you consider to be your weak points? _____

3. List what you consider to be your main problems that you would like us to help you with. (Attach additional sheet if needed.) _____

Your application is now complete. Please return it to Exodus House. God bless you!