

FAITH HOME INC. WOMEN'S APPLICATION

CHRISTIAN ALCOHOL & DRUG REHABILITATION HOME

PO BOX 39 GREENWOOD SC 29648 PH#864-223-0694 FAX#864-223-3825 EMAIL: faithhome_gwd@msn.com

NAME: _____ COUNTY _____ JOB SKILLS: _____

DATE: _____ TELEPHONE: (_____) _____ AGE: _____ DOB: _____

ADDRESS: _____ CITY _____ STATE: _____ ZIP _____

RACE: ____ MARITAL STATUS: ____ ARE YOU PREGNANT? YES NO

HAVE YOU EVER BEEN TO FAITH HOME? YES NO IF YES, WHEN? _____

SS# _____ REFERRED BY: _____ PH: _____

WHY DO YOU WANT TO COME TO FAITH HOME _____

WHAT IS YOUR DRUG OF CHOICE? _____ ALCOHOL IS A DRUG.

YOU MUST BE ALCOHOL FREE FOR 72 HOURS AND CLEAN FOR A PERIOD OF SEVEN DAYS FROM ALL OTHER DRUGS
YOU MUST BE ABLE TO PASS A DRUG SCREEN AND BREATHALYZER PRIOR TO ADMISSION

(LAST USED) _____
REFER TO DETOX

(Psychiatric or Mood/Mind altering medications are not allowed and require a doctor's release in writing prior to being placed on the active waiting list)

ARE YOU A REGISTERED SEX OFFENDER? YES NO

ARE YOU TAKING ANY MEDICATIONS AT THIS TIME? YES NO FOR _____

ARE YOU PHYSICALLY ABLE TO TAKE CARE OF YOURSELF? YES NO

ARE YOU MENTALLY ABLE TO COMPREHEND A PROGRAM OF RECOVERY? YES NO

HAVE YOU BEEN TESTED FOR THE HIV VIRUS, AIDS, OR HEPITITUS? YES NO (IF YES, DATE) _____ (RESULTS) NEG POS

DO YOU HAVE ANY COURT DATES PENDING? YES NO IF YES, WHAT/WHEN? _____
(COURT DATES MUST BE POSTPONED OR TAKEN CARE OF BEFORE ADMISSION)

ARE YOU ON PROBATION OR PAROLE? YES NO IF YES, WHAT FOR? _____
(APPLICANT MUST CONTACT PROBATION OFFICER-REPORTS MUST BE COVERED FOR 8-WEEKS)

FAITH HOME IS A CHRISTIAN REHABILITATION HOME FOR ALCOHOLICS & DRUG ADDICTS, WE ARE NOT A MEDICAL FACILITY. NOR ARE WE A HOMELES SHELTER.

YOU ARE REQUIRED TO HANDLE ANY PERSONAL BUSINESS PRIOR TO ADMISSION. NO LEAVING CAMPUS DURING PROGRAM TO HANDLE PERSONAL BUSINESS.

ARE YOU WILLING TO COMMIT TO AN (8) WEEK IN-HOUSE PROGRAM, AT NO COST TO YOU OR YOUR FAMILY. YES NO

ARE YOU PRESENTLY RECIEVING EBT (FOOD STAMP) BENEFITS? YES NO (IF YES, PLEASE BRING CARD)

SOMEONE MUST TRANSPORT YOU TO AND FROM FAITH HOME (NO PERSONAL VEHICLES ALLOWED)

DO YOU HAVE A VALID DRIVER LICENSE? YES NO

(VERY IMPORTANT) YOU MUST BRING A PICTURE ID AND A SOCIAL SECURITY CARD. (MARRIAGE CERTIFICATE IF MARRIED. YOU WILL NOT BE ADMITTED WITHOUT THESE ***

ONLY IMMEDIATE FAMILY IS ALLOWED PHONE CALLS OR VISIT. **NO BOYFRIENDS OR COMMON-LAW HUSBANDS.***
(MARRIAGE CERTIFICATE IS A MUST IF SPOUSE VISITS). THIS IS STRICTLY ENFORCED

BRING: (5) SETS OF CLOTHING, PERSONAL HYGIENE ITEMS (NO COLOGNE, AFTER SHAVE, MOUTHWASH, OR ANY OTHER PRODUCTS CONTAINING ALCOHOL OR AEROSOLS. NO CELL PHONES, PAGERS, FOOD OR DRINKS. THEY WILL BE DISPOSED OF). WASH CLOTH, TOWEL, PILLOW, NICE CLOTHES FOR CHAPEL, SHOWER SHOES, ROBE, BIBLE, AA OR NA BIG BOOK, LONG DISTANCE PHONE CARD, STAMPS, PAPER, ENVELOPES, WALKMAN W/ HEADPHONES -CHRISTIAN MUSIC ONLY AND MOST IMPORTANT, BRING AN OPEN MIND.

WE HAVE THE RIGHT TO REFUSE ADMISSION AT YOUR SCHEDULED TIME AND DATE IF YOU DO NOT PASS THE DRUG TEST, BREATHALYZER OR COME WITHOUT YOUR PHOTO ID AND OR SOCIAL SECURITY CARD. WE ALSO HAVE THE RIGHT TO REFUSE ADMISSION IF YOU APPEAR TO BE INCINSERE OR ARE HERE FOR THE WRONG REASONS.

IT IS VERY IMPORTANT THAT YOU CALL EVERYDAY TO CHECK IN. THIS LETS US KNOW THAT YOU ARE SINCERE IN COMING, AND KEEPS YOU THE ON LIST. SWITCHBOARD IS OPEN FROM 6:30 AM UNTIL 11:00 PM SEVEN DAYS PER WEEK. AFTER 4 DAYS AND NO CALL, WE PULL THE APPLICATION.

CHECK IN NOTES _____

STAFF SIGNATURE _____