



Believing in the power  
of a second chance

## Application for Residency

(Please Print Clearly)


Date: \_\_\_\_\_

Print Name (Last, First, Middle)			Date of Birth
Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed			Social Security Number
If Currently Incarcerated, Name of Facility	Projected Release Date		DOC Number (if applicable)
Current Mailing Address (Home, Jail, Prison or other)			Driver's License Number
City	State	Zip Code	Telephone Numbers
Email Address			Home: _____ Mobile: _____

**Carefully read the following statements. If you agree with the statement, put your initials in the box to the left of each statement. If you do not agree with the statement, do not initial that statement.**

Initials	
	I understand that the Inside Out Recovery facility on Hendrix Street in Brazil, Indiana is for <b>men only</b> , who are 18 years of age or older.
	I understand that Inside Out Recovery is a Christ-centered transitional housing facility where sound biblical instruction, Christian principles, and the Twelve Steps are necessary tools for recovery support from addictions and life-controlling issues.
	I agree to follow all Rules and Regulations, and I will be respectful and courteous to others at all times.
	I understand that Inside Out Recovery has a zero-tolerance standard for drug and alcohol use. Therefore, I will arrive at the facility clean and sober and agree to help keep Inside Out Recovery free from alcohol and illegal drugs at all times. This includes the unlawful use or abuse of prescription drugs.
	I understand that Inside Out Recovery does not house Sex Offenders or Violent Crimes Offenders; therefore, I confirm that I am not required to register with the Sex Offender Registry or the Violent Crimes Offender Registry.
	I am willing to participate in a highly structured program. I will attend recovery meetings as required and will participate in weekly Church services.
	I understand that each person in the program plays a significant role in the day to day operations of the facility. Therefore, I will do my part of the house chores as assigned by the staff.
	I agree that accountability is essential for recovery and positive life change; therefore, I will remain accountable at all times, including my financial activities.
	I understand that Inside Out Recovery's purpose is to help me safely transition back into society. Therefore I am making a minimum commitment of one year for the successful completion of the program.
Please continue to page 2 of the application	

**Below is a list of things that will be required of you, if you are admitted to the Inside Out Recovery’s Ministry Center. These House Rules will help ensure that the Ministry Center is a safe environment for all our residents, guests, friends, and neighbors. By nature, we seem to dislike rules. However, rules are an essential part of our recovery process; by adhering to them, we learn discipline and gain self-respect and will experience personal growth. All rules and guidelines are enforced for the safety and well-being of everyone.**

<b>Initials</b>	<p><b>Carefully read the following statements. If you agree with the statement, put your initials in the box to the left of each statement. If you do not agree with the statement, or will not comply with the statement, do not initial.</b></p>
	<b>REQUIREMENTS</b>
	<p>I will work Inside Out Recovery’s Program to the best of my ability.</p> <ul style="list-style-type: none"> <li>• The recovery program includes but is not limited to:             <ul style="list-style-type: none"> <li>○ Celebrate Recovery, The Quest for Authentic Manhood, Winning at Work &amp; Home, The Purpose Driven Life, Boundaries, Safe People, Bible Studies, and Financial Responsibility.</li> <li>○ Step work or counseling with your Sponsor and Mentor at least two times per month.</li> <li>○ Demonstrate and maintain a willingness to take direction and guidance from others.</li> </ul> </li> </ul>
	<p>I will attend weekly church services on Sunday mornings, Sunday evenings, and Wednesday evenings.</p>
	<p>I will pay a residential services fee of \$100 per week for recovery support.</p>
	<p>I will attend regular weekly House Meetings.</p>
	<p>I will follow all the house rules, regulations, and staff directions and decisions.</p>
	<p>I will voluntarily submit to a random drug screen when requested by a director of Inside Out Recovery.</p>
	<p>I will allow random searches of my possessions and vehicles that are on Inside Out Recovery property by any Director of Inside Out Recovery, Parole Officer, Probation Officer, or any officer of the court.</p>
	<p>I agree to waive any landlord-tenant rights to be a resident of Inside Out Recovery.</p>
	<p>I understand that a criminal background check will be performed before admission to Inside Out Recovery. This check can include County, State, National, and Federal Records.</p>
	<p>I understand that Inside Out Recovery may discharge me <b>immediately</b> for any of the reasons listed below:</p> <ul style="list-style-type: none"> <li>• Being under the influence of or possessing alcohol and drugs.</li> <li>• Possession of weapons.</li> <li>• Threats, either verbal or physical, acts of violence, and fighting.</li> <li>• Destruction of property (i.e., personal property of others or the ministry center’s property).</li> <li>• Failure to submit to a random drug screen.</li> <li>• Failure to comply with the curfew.</li> <li>• Unaccountable or discrepancies in times when you are away from the Ministry Center.</li> <li>• Lies, either found on your intake paperwork or otherwise, stealing, unusual behavior, and any criminal activity.</li> <li>• Failure to comply with the House Rules and staff directions and decisions.</li> <li>• Gambling of any kind. Including lottery and scratch tickets.</li> </ul>
<p>Please continue to page 3 of the application </p>	

**Please complete the following section. Give as much detail as possible. If necessary, you may write your comments on a separate sheet of paper and attach it to this application so that you can respond thoroughly.**

1) Tell us why you would like to come to Inside Out Recovery.

2) If you are a Christian, describe how you came to know Jesus Christ. If not, where are you in your faith now?

3) Describe where you are in your recovery now.

4) What do you think is currently your most significant and challenging problem or issue that you need to deal with?

5) Describe how you would like your life to be five years from now.

Please continue to page 4 of the application



**Please complete the following section. Give as much detail as possible. If necessary, you may write your comments on a separate sheet of paper and attach it to this application so that you can respond thoroughly.**

6) Tell us about your family, if you have children, how many and what are their ages.

7) How did you hear about us, and whose idea was it for you to apply to Inside Out Recovery?

8) Where would you live, if you are not accepted for residency at Inside Out Recovery?

9) What problems or issues do you need to work on while living at Inside Out Recovery?

10) Please tell us where you were living during your active addiction. If you lived and used in several locations, please list each location (Include city and state).

11) List all programs you have completed in the past five years? (e.g., Celebrate Recovery, Christian 12 Steps, AA, NA, CLIFF Program, Plus Program, Kairos, IOP, Matrix etc.)

Please continue to page 5 of the application



**Please complete the following section. Give as much detail as possible. If necessary, you may write your comments on a separate sheet of paper and attach to this application so that you can respond thoroughly.**

12) What was happening that prompted you to seek recovery or treatment at this time?

13) Were you a victim of abuse such as physical, emotional, verbal, mental, or sexual? If so, please describe.

14) Do you have any health problems that require special care? If yes, please describe in detail.

15) Are there any other comments, statements, or information you would like to add to help us get to know you better?

Please continue to page 6 of the application



**References:**

<p>Please provide a list of references. People who will attest to your character, recovery progress, achievements, and Spiritual growth. (E.g. Chaplain, Pastor, Friends, and Family, etc.)</p>			
Name	Address	Phone Number	Relationship
1.			
2.			
3.			
4.			

**Letters of recommendation:**

We highly recommend that you request from at least three people, to write a letter of recommendation on your behalf. You may attach their "Letters of Recommendation" to this "Application for Residency," or they can mail, email, or fax their "Letter of Recommendation" to us (address and fax number listed below).

By signing this application below, you are indicating that you have answered all questions truthfully to the best of your ability.

\_\_\_\_\_   
 Applicants Signature

\_\_\_\_\_   
 Date

\_\_\_\_\_   
 Name (print)

This completes your portion of the application process. When we receive your application, it will be reviewed promptly. Once we finish our review, you will receive a written response, letting you know if you have been accepted for Residency at Inside Out Recovery or if we believe that your specific needs would be better served at another type of facility. Please send this completed application and any supporting documentation you may have to Inside Out Recovery:

By Email	By Mail	By Fax
Kevin@InsideOutRecovery.org	Intake Coordinator Inside Out Recovery 1408 E Hendrix St Brazil IN 47834-1542	866-729-8970

*BUT SEEK FIRST HIS KINGDOM AND HIS RIGHTEOUSNESS...*