

TRANSITIONAL HOUSING APPLICATION – LEXINGTON RESCUE MISSION

Date _____ Date Eligible to Enter Housing _____

Name _____
First Middle Initial Last

Last Known Address _____

Are you currently homeless? Yes No

Date of Birth _____ Social Security Number _____

Gender Male Female Client Doesn't Know Client Refuses to Answer

Ethnicity Hispanic/Latino Non-Hispanic/Latino Unknown

Race American Indian/Alaskan Native
 Asian
 Black/African American
 Native Hawaiian/Pacific Islander
 White/ European Descent
 Unknown

Place of Birth _____

Highest Education Completed? High School/GED College High School Incomplete

Are you currently employed? Yes No

Are you currently incarcerated? Yes No

PID NUMBER _____

Supervisor name _____

Where? _____

Are You A Veteran? Yes No

Do you have a copy of your DD214? Yes No

Are you currently receiving government benefits? Yes No

Food Stamps
 Unemployment Benefits
 SSI
 SSDI
 Veterans Benefits

Marital Status Married Separated Divorced Single

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Where did you hear about Transitional Housing with Lexington Rescue Mission?

Outreach Center Lunch Re-entry/Jail Dismas Internet Church Friend/Former Resident

SOBRIETY

Sobriety Date _____

Have you attended a recovery program? Yes No

Name of most recent recover program? _____

Approximate date of attendance? _____

Did you complete the program? Yes No

Has alcohol ever been an issue? Yes No

Has drugs ever been an issue? Yes No

If yes, please list the drugs you used:

CRIMINAL HISTORY

Have you ever served time in jail/prison? Yes No

Incident	Date	Location	Charges	Time of Sentence

Do you have any charges pending? Yes No

HEALTH

Do you currently have health insurance or Medicare? Yes No

Do you have special health accommodation needs? Yes No

Have you been diagnosed with any physical health conditions like high blood pressure, hepatitis, sleep apnea or diabetes? LIST: _____

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Do you have a mental health diagnosis? Yes No Explain: _____

Current medications	Reason for medication

Are you currently on MAT? Yes No Explain: _____

EMPLOYMENT

Are you employed? Yes No Where: _____

What are your past work experiences?

What are your goals? Be specific.

Explain current support system to maintain sobriety and prevent relapse.

Explain underlying emotions, experiences and outward behaviors that have affected your life.

Have you read our guidelines and expectations and do you agree to follow them? Yes No

Are you able to live in an open dorm area with up to 14 men, and can you handle sleeping on the top bunk of a bunk bed? Yes No

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Please describe your faith statement.

Signature of Applicant: _____

PROGRAM DESCRIPTION

VISION STATEMENT

The Potter’s House is a transitional living facility where men realize a growing faith in Jesus Christ, lasting sobriety, and independent living. *“If any man is in Christ he is a new creation. The old has passed away, and behold all things have become new”* (2 Corinthians 5:17).

MISSION STATEMENT

The mission of the Potter’s House stands on the foundation of each person’s relationship to Jesus Christ as Lord. Submission to the will of God is the means of a transformed life. Therefore, we draw on the Bible, the resources of the church, and collective expertise to empower men to meet short- and long-term goals in their recovery.

INDIVIDUAL SUCCESS

The success of each individual will be apparent by his contribution to and involvement in what has ultimate and eternal significance for oneself. Success will also be measured by a healthy view of individual progress in life indicated by transformations that reflect behavioral and spiritual development and growth. The success of an individual will be demonstrated by his participation in making a positive difference in the lives of family, friends, community, work, church, and culture. In addition, success will be measured by progress notes reflecting positive outcomes relating to achievements of individual short- and long-term goals formulated by the guest and in cooperation with the Case Manager.

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4. **Church:** Residents are required to attend and develop a relationship with a local church.

5. **Social Group Commitments:**

- I will commit to attending at least one (1) group meeting each week related to my recovery plan, (i.e. Alcoholics Anonymous, Narcotics Anonymous, The Genesis Process, Celebrate Recovery, The Mat, Encounter, Victory in Christ, group therapy, parenting classes, etc.). *Additional meetings may be required depending on case management and length of sobriety time.*
- I will commit to meet regularly with a sponsor or mentor concerning my recovery.

6. **Requirements:** A resident must agree to the following:

- To meet with the Case Manager on a scheduled basis.
- To be present at weekly Sunday evening “House Meetings.”
- Attend a Community Meeting
- Attend Jobs For Life
- House Chores
- Pay entry fee and house fees
- Attend Church

7. **Budget:** The participant is required to have a monthly budget/spending plan that needs to be approved by the Case Manager.

8. **Drugs and Alcohol:** Residents must abstain from the use or possession of illegal drugs or alcohol or any legal over-the-counter substitute or any abused legal substance. There is a zero tolerance policy at the Potter’s House. Residents will be required to submit to random drug and alcohol testing. If the resident has come from a short-term recovery program, he may be subject to weekly drug and alcohol testing. If a resident’s urine tests or breathalyzer is negative, but the participant is obviously “high,” he will be discharged. If this rule is violated, a person will be discharged immediately no matter what time it is.

9. **Personal Property:** The Lexington Rescue Mission is not responsible for the loss of property. In addition, if discharged for violation of guidelines all personal property must be removed within one week. If not removed, it will be donated or disposed of.

10. **Sober Living Commitments:** Residents must commit to maintaining a sober-living environment by:

- Not using or bringing into our facilities alcohol, illegal substances, or prescription medication(s) that will show on a drug test.
- Storing all medication in a locked safe and logging it in with the House Coordinator.
- Holding housemates accountable to their own sobriety.
- Seeking help when feeling the pressure or desire to relapse or go back to harmful habits, behaviors and attitudes.

11. **Smoking:** There is absolutely no smoking inside our facilities. Any smoking must be done in the backyard of the building.

12. **Weapons:** Residents must not possess any weapon of any kind.

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APPLICATION SUBMISSION INSTRUCTIONS

Correspondence: You may mail, fax or bring the signed application to:

Lexington Rescue Mission, 444 Glen Arvin Ave, Lexington, KY 40508,
Phone: 859.554.6939, Fax: 859.381.9603, or email to:
mark.gaus@lexingtonrescue.org

Lexington Rescue Mission Physical Addresses:

The Outreach Center 444 Glen Arvin Avenue, Lexington KY 40505
Walk In Case Management, Lunchtime meals Tuesday, Wednesday, Thursday and Saturday, Steady Hands Small Group, Chapel and Chaplain Services

The Broadway House 629 North Broadway, Lexington KY 40508
Employment Services, Jobs For Life, Reentry Services, Phase 2 of Transitional Housing

The Potter's House 649 North Limestone St, Lexington KY 40508
Phase 1 of Transitional Housing