

NJM - Grace Place Residential Application

Thank you for applying for housing at New Jerusalem Missions. If you have any questions, please contact us at (316) 282-2101

***** Please submit photo ID with your application.*****

*Required

*Full Name: _____

*Last Known Address: _____

*Phone Number: (_____) _____

* Email: _____

* Date of Birth ____/____/____

* Age: _____

* Relationship Status *(Circle only one)*: Married Single Divorced Widowed

* Number of Dependents: _____ *Do they live with you? _____ *Ages _____

Boys (gender at birth) allowed up to age 13.

*Income *(Circle only one)*: Employed Unemployment Social Security Disability Waiting on Disability

* Employers Name, Address & Phone Number: _____

(_____) _____

* Do you have proper identification to secure employment? (Photo ID, Birth Certificate, Social Security Card)

(circle only one) Yes No

* Emergency Contact *(Name & Phone Number)*: _____

(_____) _____

* What is your highest level of education? _____

MEDICAL INFORMATION

* Have you been diagnosed with a medical condition? (circle only one): Yes No

* What medical conditions have you been diagnosed with?: _____

* What medications are you on? _____

* Do you have any medical issues that would prevent you from participating in household chores? _____

* Have you been diagnosed with a mental health issue or disorder (circle only one): Yes No

* What mental health issue or disorder have you been diagnosed with? _____

* Do you currently take medication for your mental health? (circle only one): Yes No

* What medications are you on for your mental health? _____

* Do you have a history of suicide attempts? (circle only one) Yes No

* If yes, when was your last attempt? _____

* Are you currently having thoughts of harming yourself? _____

* Are you seeing a doctor for your mental health? (circle only one) Yes No

* Name of doctor or clinic: _____

* Do you have a therapist you are seeing? (circle only one) Yes No

Emergency Information

Date _____

PERSONAL INFO

Name _____ DOB _____

Phone (____) _____

Language Spoken _____

Gender _____ Height _____ Weight _____ Blood Type _____

Ethnicity _____ Organ Donor _____

EMERGENCY CONTACTS

Name _____ Relationship _____

Phone (____) _____

FOOD, INSECT & OTHER ALLERGIES

Welcome to Grace Place

We are here to help in your journey. In order to help you succeed and to help you live in community we have a few rules.

Community Living - Be kind, understand everyone has their own battles. We are to fight for each other, not against each other. The TV in the living room is communal, please share who picks what's on and keep the volume at a reasonable level. We are a Christian facility, be careful what you watch and games you play on the TV.

The Rules -

1. Do your chore, it changes weekly. You are responsible for checking when it changes, if you have any questions on your chore please talk to the staff.
2. Quiet hours are from 10 p.m. - 7 a.m.
3. Smoking in the backyard only in designated areas
4. Rent is due at the first of the month and will be considered late after the 10th. Payment arrangements can be made if needed. Speak to Kerri about making arrangements.
5. Curfew is 8 p.m. Sunday - Thursday and 10 p.m. on Friday & Saturday.
6. If you are going to miss curfew due to work or AA/NA/CR you need to let the RA or Staff know before you go.
7. No Pets Allowed, including emotional support animals.
8. No visitors in the bedroom areas, no overnight guests.
9. No arguing with staff or other residents.
10. Rooms are to be kept clean and you are responsible for our own laundry. Wash you sheets weekly.
11. No tobacco use inside, no vaping inside. Vape in designated smoking area.
12. If you have conflict with another resident, please speak to them. If not able to resolve it then bring it to staff.
13. Children can not be unattended. Childcare for other residents is not permitted.
14. No food is permitted in your bedrooms
15. Lockers are provided for you in the basement, you must provide your own lock

Rules that are grounds for immediate discharge

1. Being under the influence of any drugs not prescribed to you by a physician, alcohol or any illicit substances
2. Possession of alcohol, illegal drugs, drugs not prescribed to you
3. Possession of any weapon, including gun, knives (without permission)
4. Physical violence or threats of violence to staff or other residents
5. Failure to submit to UA or breath test when requested by staff
6. Lying
7. Stealing from other residents, staff or the mission
8. Any criminal activity
9. Possession or use of pornography
10. Not meeting financial obligations in a timely manner
11. Destruction or damage to other resident's property, staff property the Mission building, facilities, etc.

Infractions

Breaking any of the rules under community living, although serious, is not necessarily ground for immediate discharge. Consequences will be decided on a case by case basis.

House Restriction

House Restriction is the most severe penalty. It is usually the last opportunity for a resident to keep from being removed. This means the resident will only leave the house with permission. The resident must give an account for any time they are permitted to leave the house. Valid reasons are work, AA/NA/CR meetings and medical appointments. Any unpermitted activity will result in immediate removal. The resident must show they are responsible and compliant during this time. Any infractions will result in immediate removal. Arguing with staff, showing a negative influence on others, endangering another's sobriety while on restriction will result in immediate removal.

Signature _____

Date _____