

Resident Mailing
address:
1242 Old Hwy 5 South
Ellijay, GA 30540



Send application to:
Ed Jeffery
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Ellijay, GA 30540
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Isaiah House Intake Application

Isaiah House is a 13 bed transitional home located in Ellijay, GA on 3 acres. We exist to provide men who have been through a drug and alcohol program, an opportunity to gain needed skills to better equip them with integrating back into society. These include; continued sobriety through 12-Step Meetings, Biblical applications for living, life skills, relationship skills, educational needs, job preparation, how to be a man, how to manage money. Isaiah House recommends minimum of 6 months transitional housing to prepare for successful sober living in society, and to procure housing and transportation.

Candidates for admission must complete this application and have an interview with the Director. If you provide false or misleading information you may be denied admission.

Requirements for admission:

- Be male between ages 25 and 55.
- Agree to abide by all guidelines, fully participate in all aspects of the program, and refrain from any activity staff deems contrary to recovery or good moral character. Director reserves the right to enact disciplinary measures or dismissal from Isaiah House for any violations.
- Have already completed a drug and alcohol program in the last six months
- Be physically able to work
- Be medically able to fully participate in a program that does not provide medical care, dental care, or assistance with medications. All candidates are responsible for their own medical care. If you have any medical needs you must have a medical sponsorship verified by Isaiah House at your interview. Typical sponsorships include purchases of medication, paying for dental and doctor visits, and possibly transporting to appointments.
- Be mentally stable and capable of functioning in the Isaiah House environment, participating in two 12-Step Meetings, church of your choice on Sunday and Isaiah House group discussions, written work and study.
- Be willing to refrain from the pursuit of all romantic relationships other than with your legally married spouse for six months if staying at Isaiah House.
- Pay \$150.00 each Friday, for residing at Isaiah House.
- Space is limited and we do not store anything. Residents should bring only what they need without excess. Such as: 8 pairs of pants, 10 shirts, 5 pairs of shoes, 2 jackets, 2 sweaters, 8 underpants, long underwear, 8 pair of socks, 2 suits, 4 ties, 2 hats, 1 laundry bag, 1 book bag, 1 alarm clock, Bible, pens, paper, notebooks, appropriate reading material, personal hygiene items that do not contain alcohol, 1 small pocket knife, and misc. personal effects or recreational items which are conducive to recovery and positive behavior.
- Be willing to take random periodic drug tests
- Submit to a criminal background check and DMV background check, if driving.
- References will be contacted.

Receipt of this application does not guarantee acceptance. You must have a written confirmation from Isaiah House that you have been accepted

I _____ have read & agree to all of the above items. Date _____

Entrance Date _____ Departure Date _____ Reason _____

Isaiah House Intake Application Page -1-

This form must be completed by the resident for admission

Name _____ Birthday _____

Address: _____ City _____ State _____ Zip _____

SS# _____ Religious/Denomination Preference _____

Occupational Background _____

Why do you want admission to Isaiah House? _____

List your addictions (alcohol, marijuana, cocaine, prescription drugs, etc.): _____

REHAB INFO

Where did you last participate in a drug and alcohol program? _____

Contact Person: _____ Address: _____

Telephone number: _____ Graduate? _____ How long were you there? _____

Date attended: from _____ to _____ did you leave in good standing? _____

List all other drug and alcohol programs you attended, where, and for how long (if applicable) _____

How did you hear about Isaiah House? _____

PERSONAL INFO

List any family or relationship problems you are currently experiencing: _____

Marital status _____ Number of children _____ Are you required to pay child support? _____

Are your payments current? (Explain) _____

EMERGENCY INFO

Name _____ Relation _____ Phone _____

PROBATION AND/OR PAROLE INFO

Probation/Parole Officers name _____

Address _____ Phone _____

Frequency, Date/Day & Time of check ins _____

List any physical disabilities and/or handicaps _____

List any monthly amount and source of any income you have (Disability, SSI, etc.) _____

Isaiah House Intake Application Page -2-

List any medications you are supposed to be taking and why _____

Do you have any medical or dental problems? _____

Who will finance your medical needs? Name _____ Phone: _____

List any mental health treatment (Give diagnosis if known) and any medications Prescribed _____

List dates of any suicidal actions in the last 5 years: _____

List any court cases pending: _____

List your record of criminal charges, jail or prison time (if applicable): _____

Have you ever been accused of child molestation? _____ Have you ever been convicted of a violent crime? _____

Education: Highest grade level completed _____ Do you have a GED? _____

List colleges and vocational schools and degrees attained: _____

Answer the following questions either yes or no

- | | Y/N |
|--|------------|
| Do you agree to comply with all the requirements of admission as listed on page one of the application? | _____ |
| If applicable, have you obtained written permission from any legal supervision you may have (Child Support, Probation, etc.), granting you permission to live at Isaiah House? | _____ |
| Are you willing to participate in Bible based programs? | _____ |
| Will you refrain from activities the staff deems contrary to recovery and personal growth? | _____ |
| Do you commit to refrain from the pursuit of romantic relationships (other than with your legally married spouse) for six months while at Isaiah House? | _____ |
| Are you physically and mentally able to fully participate in all aspects of the program including work assignments? | _____ |
| Do you have someone who can finance your medical needs while at Isaiah House? | _____ |
| Did you personally complete this application? | _____ |

Applicants for admission must thoroughly complete this application and mail/fax it to the Director. Applicants are responsible for contacting the director with questions regarding their intake status.

INTAKE DATE _____ EXIT DATE _____

INTAKE SEARCH _____ / _____ ORIENTATION COMPLETED _____ / _____