

# Courage Application

## **Resident Application**

Please complete all questions. This is a 9-18-month commitment that will require genuine effort from you. After completing the application, please call at Courage 812-887-9837 to schedule an appointment with the House Manager. You must bring your completed application to your appointment.

If you are incarcerated or it is not possible for you to phone Courage, then please forward your application via mail 719 Busseron St, Vincennes, IN 47591, or email [couragehouse2017@gmail.com](mailto:couragehouse2017@gmail.com)

If there is not an immediate opening, then please call daily to demonstrate your willingness to participate in your own recovery. If the phone is not answered, leave a voice mail message.

Client Name:

Phone number:

Address:

Have you had steady housing for the past 90 days?

Are you incarcerated? If so, when is your release date, or court date? What is your lawyers contact information?

Do you have any felony's? If so, what are they?

Do you have any sexual related charges? If so, what are they?

Are you on Probation or Parole? If so, please provide officer name, contact info, and county.

Length of Probation or Parole:

**Please also sign and complete the attached Consent Form and Criminal History Check Form**

**Criminal History Authorization & Request Form**

I am applying to be a resident of Courage. I understand and authorize Courage to perform a Criminal History Check. As part of the application process. I further acknowledge that on the application I have already disclosed all information that may be reported back on these reports.

To Be Completed by Applicant:

Date \_\_\_\_\_ Printed Name \_\_\_\_\_

SSN \_\_\_\_\_ Signature \_\_\_\_\_

Address \_\_\_\_\_

Date of Birth \_\_\_\_\_ Race \_\_\_\_\_ Sex \_\_\_\_\_

Driver's License Number \_\_\_\_\_ Case Number \_\_\_\_\_

**Emergency Contact**

Name \_\_\_\_\_

Relationship \_\_\_\_\_

Home phone \_\_\_\_\_ work \_\_\_\_\_ cell/other \_\_\_\_\_

Home address City, State, Zip \_\_\_\_\_

Agreement and Signature By submitting this application, I affirm that the facts set forth in it are complete and true. I understand that if I am accepted, I must read Courage Policies and Procedures and agree to those entrance conditions. I also agree to submit to drug/alcohol screenings or test anytime requested. All expenses owed to Courage must be paid on time. I will hold Courage and all Knox County free from all liability for through fire, theft, personal injury while a resident of Courage. Any false statements, omissions, other misrepresentations made by me on this application may result in my immediate dismissal.

Print Name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

We have prepared a few questions we need your complete honesty on. Please return to the house manager with your application, Thank you. Remember we are here to help not to judge.

1. What is your drug of choice?
2. What are your thoughts about starting this program?
3. What area in your life would you like or need to change?
4. Describe your past efforts to change. What happened?
5. Do you think you can do this on your own, or are you willing to ask others for help?
6. What do you want from other members of the house? Example: When I am messing up, I want someone to call me on it. I want straight, honest feedback.
7. What does Honesty mean to you?
8. What does responsibility mean to you?
9. What does willingness mean to you?
10. What does open-mindedness mean to you?
11. What does humility mean to you?
12. What does gratitude mean to you?

13. How well do you know yourself? When you look into a mirror, who is the person you see? Not just from the outside but take a good look inside. What do you see?
14. What kind of person do you want to be?
15. Can you pass a drug screen? If not, are you detoxing?
16. What is different from you wanting to live in sobriety NOW than any other time?
17. What kind of Treatments have you been to? Were? What will be different this time? What have you learned from past treatments?
18. You did everything out in the world to get high, are you willing to do whatever it takes to live a new clean and sober life?
19. Are you open to ideas to help you stay clean? Church, Bible study, 12 Steps, NA, AA, meetings things like that?
20. Are you willing to change everything you used to be? Even the old way you used to think?
21. What would you like to get from staying at the courage house?
22. Why are you ready to get sober and stay sober?