



APPLICATION FOR DADS WITH A PURPOSE SOBER LIVING HOUSE

Personal Information:

Name: _____ DOB: ___/___/___ Today's Date: ___/___/___

Address: _____

Phone: _____ Email: _____

SSN: _____ Marital Status: _____

Emergency Contact Name: _____ Relationship: _____

Address: _____ Phone: _____

In the past 30 days where have you been living?

Referral Source: _____

Do you have any physical health issues and/or concerns? Y or N?

If yes, please describe. Are you being treated for these issues by medical professional?

Do you have any mental health issues and/or concerns? Y or N?

If yes, please describe. Are you being treated for these issues by medical professional?

Do you have a Primary Care Physician? Y or N?

Are you currently taking medication? Y or N?

If yes, please provide list below:

<u>Name</u>	<u>Frequency</u>	<u>Dose</u>	<u>Name</u>	<u>Frequency</u>	<u>Dose</u>
1. _____			4. _____		
2. _____			5. _____		
3. _____			6. _____		

What was the date of your last physical? _____

What was the date of your last TB Test? _____

Both items will need to be completed with proof of documentation prior to becoming a resident in DWP home.

Do you have children? Y or N

If yes, number of children, ages and location?

Treatment History:

Prior treatment involvement? Y or N

If yes, where and dates of attendance. Did you graduate successfully?

Are you currently abstinent of all mind-altering substances? Y or N

If yes, how much recovery time do you have?

Date of last used alcohol: __/__/____ Date of last used Drug: __/__/____

Education/Employment:

What is the highest level of education you have finished? (High school graduate, vocational degree, some college, college graduate) _____

Are you currently employed? Y or N

If yes, where and how many hours per week?

Are you currently enrolled in school or job training program?

Work Experience/Plan:

Are you on disability: Y or N?

If on disability how long have you been on disability: _____

Legal Status

Please provide brief criminal history to include arrests, convictions, jail and/or prison time.

Do you have any outstanding warrants? Y or N?

Are you on probation or parole? Y or N?

Have you ever been convicted of a felony? Y or N?

Probation/Parole officer name: _____

Number: _____ District: _____

If yes, please provide date, charges, and any other information you think would be important for us to know.

Have you ever been arrested and/or convicted of any violent and/or sexual crimes? Y or N?

*DWP Sober Living House is unable to accommodate residents with sexual offenses. *

Do you have a vehicle? Y or N

If yes, do you have a valid driver's license and insurance? _____

Make: _____ Model: _____ Year: _____

Short Bio and Recovery Goals

Tell us a little bit about you. (Likes, Dislikes, Hobbies, Interests, etc.)

Provide a list of three goals you want to accomplish on your recovery journey:

How will living in the Dads With A Purpose Sober Living House help you reach those goals?

What barriers might interfere with your desire and ability to maintain a substance and alcohol-free lifestyle? What qualities do you possess that will help you manage difficult situations?

Why should you be selected to reside in the DWP Sober Living House?

Is there anything else you would like us to know?

Verification

In order to process your application, we are required to confirm that the information you provided is accurate. Who can we call to verify this application? (Circle one)

Parole/Probation - Public Defender - Attorney - Case Manager - CO - Pretrial - Vet Rep – Other

Name _____ Fax (____) _____

Phone # _____ Email: _____

Did you read the house rules and financial obligations? Y or N

Are you clear on what is expected of you? Y or N

I, _____ authorize Dads With A Purpose Transitional Sober Living Home to share information included in this application with relevant legal and medical agencies to confirm the information I provided on this application to be accurate. I attest that the information I provided is true to the best of my ability.

Client Name (Print): _____

Date: _____

Client Signature: _____

Date: _____

DAD'S WITH A PURPOSE HOUSE RULES

- Residents must obtain employment within two weeks of move-in date.
- There is a ZERO tolerance for drug and/or alcohol use.
- No tobacco in the house this includes SMOKING, VAPING, and CHEWING. There is a designated smoking area outside and it is expected to be kept clean.
- Curfew is set at 10:00 p.m. Sunday-Thursday and 11:00 p.m. Friday and Saturday.
- Residents must attend four AA and/or NA meetings per week. Church service or bible study may count as one meeting with prior approval.
- Guests are allowed ONLY in common areas of the house.
- No guests may stay overnight.
- Random urinalysis screenings will be administered by DWP. Releases of information for Houseman and Liaison will be required to ensure the continuity of care.
- Residents must follow continuing care plan established with DWP.
- Residents must have a list of resources available for any assistance they may need.
- Residents are assigned weekly chores and it is an expectation to clean up after one's self daily (as-you-go).
- Arrest and/or incarceration will void contract.
- Any physical altercation will void contract.
- NO STEALING. This includes taking food or belongings from others.
- Only Houseman can change thermostat.
- No sexual offenders allowed.

- Residents on disability must volunteer or do community service minimum 30 hours/week must get approval from liaison.
- Residents are expected to get a sponsor and work a 12-step program. Spiritual Programs and/or spiritual counseling is acceptable.
- Residents in first 30 days are on a probationary period and are subject to following rules:
- Curfew is 9 p.m. Daily during the first 30 days
- Residents can furlough after thirty days two (2) nights per week with prior approval from liaison by Wednesday 6:00 p.m. AND if they are current on rent.
- Residents must attend a mandatory minimum number of meetings.
- Residents probationary period ends after 30 days if current on rent and fulfilling all obligations previously outlined.

ALL HOUSES AND RESIDENTS: You must be current on rent to furlough--
If you are behind on rent, the furlough request will be denied.

DWP FINANCIAL OBLIGATION

Below you will see a house by house breakdown

1. Mason City Men's House: Before moving into the house, you are required to have \$150.00 Deposit and \$120.00 first weeks rent, a total of \$270.00 (No Exceptions). You will need to have your weekly rent money (\$120.00) at the Sunday house meeting (this is a MANDATORY)

2. Arlington Men's House: Before moving into the house, you are required to have \$265.00 Deposit and \$170.00 first weeks rent, a total of \$435.00 (No

Exceptions). You will need to have your weekly rent money (\$170.00) at the Sunday house meeting (this is a MANDATORY)

3. New Beginnings Women's House: Before moving into the house, you are required to have \$150.00 Deposit and \$100.00 first weeks rent, a total of \$250.00 (No

Exceptions). You will need to have your weekly rent money (\$100.00) at the Sunday house meeting (this is a MANDATORY)

4. Steward Men's House (36th St): Before moving into the house, you are required to have \$150.00 Deposit and \$120.00 first weeks rent, a total of \$270.00 (No Exceptions). You will need to have your weekly rent money (\$120.00) at the Sunday house meeting (this is a MANDATORY)

There are no prorated rent amounts. For example: if you arrive on a Friday, you will not begin to be charged for rent until Sunday.

Deposits are non-refundable for all houses.

I, _____, acknowledge that I have read the Dads With A

Purpose Sober Living House rules and that I understand the financial obligations expected of me. I agree to abide by these rules and financial guidelines if I become a resident of the house. I also agree to attend occasional mandatory DWP meetings or events along with the other residents.

Printed Name

Signature

Date

Witness Name (Printed)

Witness Signature

Date

Men's Houses

**Arlington House
1615 Arlington Ave
Des Moines, Iowa 50314**

**Steward House (36th St)
654 36th St
Des Moines, IA 50312**

**Oulman House
642 8th St NE
Mason City, IA 50401**

Email men's applications to:
Program Director
dwpak2014@gmail.com

New Beginnings Women's House
1704 Martin Luther King Jr. Parkway
Des Moines, Iowa 50314

Email women's applications to:
Women's Administrative Director
Jeana Knapp
knappjeana@gmail.com

**If necessary, mail application to:
1412 14th St
Des Moines, IA 50314**

*****INTAKE HOURS:**

New residents may arrive at the houses during the following times:
Men's houses: Between 11am - 6pm Monday through Friday
New Beginnings Women's House: Between 3pm - 6pm Monday through Friday.

Exceptions may be made under special circumstances and if planned ahead of time

The Dads With A Purpose program focuses strongly on personal growth, development and success. In order to preserve this focus and for the program to be most effective, any resident may be asked to leave if a lack of expected progress becomes apparent OR for any other reason Dads With A Purpose determines to be sufficient for dismissal from the program.

By signing below I acknowledge that I have read and fully understand the above. I agree to comply immediately if asked at any time by Dads With A Purpose to leave the program and vacate the premises.

Resident's printed name: _____

Date: _____

Resident's signature: _____

Dads With A Purpose representative/witness printed name:

Date: _____

Dads With A Purpose representative/witness signature:
