

Center House Nashville Application

Our goal is to provide a structured living environment promoting spiritual growth through the teaching of Jesus Christ, fellowship and accountability. Center House is a Christ-Centered Facility.

Mission Statement:

**"EQUIPPING MEN FOR LIFE TRANSFORMATION AND
TRANSITION INTO SOCIETY"**

It is extremely important that you reply to all information requested. An application that is not complete, may not be reviewed or considered.

After completion, mail or email to the following;

**Center House Nashville
P.O. Box 90783
Nashville, TN. 37209**

lwcurtis@bellsouth.net

**Larry Curtis
Executive Director
Center House Nashville
615-838-5247 Mobile**

CENTER HOUSE RESIDENT'S APPLICATION

APPLICANT'S INFORMATION

Name: _____ Date: _____

Date of Birth: _____ ID # _____

SSN# _____

Current Address:

City: _____ State _____ Zip Code _____

Why are you applying to Center House ?

What are your life's goals, you desire to achieve at Center House?

CENTER HOUSE RESIDENT'S APPLICATION

CHARACTER REFERENCES

1. Name _____

Address _____

City _____ State _____

Phone# _____ Relationship _____

2. Name _____

Address _____

City _____ State _____

Phone# _____ Relationship _____

EDUCATION

Circle last school year: 1 2 3 4 5 6 7 8 9 10 11 12

Did you graduate from high school? Yes or No

If No, do you have your GED? Yes or No

Circle number of years attending College: 1 2 3 4

Did you graduate? Yes No

Name of College:

Did you attend any Trade or Vocational School? Yes No

If yes, List subjects studied

CENTER HOUSE RESIDENT'S APPLICATION

EMPLOYMENT HISTORY

Past Employer: _____ How long?
Company Name: _____
Job Description: _____

Past Employer: _____ How long?
Company Name: _____
Job Description: _____

Past Employer: _____ How long?
Company Name: _____
Job Description: _____

List your job skills:

CRIMINAL INFORMATION

Are you coming directly from incarceration? Yes No
If yes; Name of Institution: _____

Last Parole Hearing / Date _____

Results of that Hearing: _____

Next Parole Hearing / Date _____

What are your current charges and/or conviction?

CENTER HOUSE RESIDENT'S APPLICATION

CRIMINAL INFORMATION

Have you ever been charged with or convicted of a sexual offense? Yes / No
If Yes, explain

Did you attend any recovery programs while incarcerated? Yes No
If yes, give details;

Attach to this application a copy of your TOMIS (Criminal History) Yes No

Attach to this application a copy of your Disciplinary Report. Yes No

Attach to this application a copy of your Tennessee Offender Facesheet
Yes No

EMERGENCY CONTACT INFORMATION

Name:

Address:

City / State / Zip

Phone

Relationship:

Name:

Address:

City / State / Zip

Phone

Relationship:

Name:

Address:

City / State / Zip

Phone

Relationship:

CENTER HOUSE RESIDENT'S APPLICATION

***** Center House is required to release information to the courts and/or Parole Board/Parole officer as it pertains to your stay at this facility.*****

MEDICAL INFORMATION

Do you have any mental illness or have received any treatment /medication for mental illness?

If yes, provide case worker and contact information,

Are you currently under a Physician/Doctor's care? for mental illness?

If yes, explain:

Are you currently taking any medication prescribed by a Physician/Doctor? Yes No

If yes, explain:

Current medical conditions (check those that apply)

Allergies

HIV

Weight loss

Asthma

Diabetes

Tuberculosis

Ulcers

Heart condition

High Blood pressure

Epilepsy

Hepatitis

Any others not listed:

CENTER HOUSE RESIDENT'S APPLICATION

To the best of my knowledge, I have answered all questions in honest regard and truthfulness.

I have attached a copy of the following requested information;

TOMIS Report _____
Disciplinary Report _____
Offender Face Sheet _____

Signature of Center House Nashville Applicant; Date; _____

Print Name; _____

Signature; _____

Signature of Center House Nashville Representative;

_____ Date _____

Additional Information, you feel that needs to be mentioned

**CENTER HOUSE
PROGRAM RULES & REGULATIONS CONTRACT**

While living at Center House, I, _____, agree to the following Rules and Regulations set forth in this form.

1. Monday night Bible Study is mandatory. This class will be held at Center House from 7:00 - 8:00 PM
2. Tuesday night Life Skills meeting is mandatory. This class will be held at Center House from 7:00 - 8:00 PM
3. Thursday night, Celebrate Recovery, a Christ-Centered Recovery Program (12 Steps), will be held at Center House at 7:00 PM. This is a mandatory meeting.
4. Church attendance is required at First Church. You must attend the AM scheduled Sunday service each week. This is a mandatory meeting.
5. Resident agrees to stay a minimum of 90 days. Upon successful completion of the Center House program, Resident will receive a letter of completion and recommendation.
6. There can be No Alcohol, Drugs or pornographic material of any description on the property of Center House. There is a zero tolerance for this violation. If a resident is found to be harboring or in possession of any above items, he will be asked to leave Center House immediately.
7. Resident must be willing to submit to random drug testing.
8. Resident is responsible for keeping up with his house key. A \$10.00 replacement fee will be charged for any lost key.
9. The nightly curfew is 10:00 PM during the week (Sunday thru Thursday) and 11:00 PM on Friday and Saturday. Residents are subject to accountably checks.
10. Center House residents must seek to obtain a sponsor/mentor.
11. Residents must provide their own food and toiletries.

12. Residents must work together to keep the house clean and neat at all times: beds made, floors clean, and laundry in baskets and out of sight. All trash removed as needed, thermostats regulated comfortably and economically. The lawn is to be mowed and trimmed as needed.

13. The kitchen must be kept clean at all times. No dishes left in the sink at any time. Any cooking that is done requires immediate cleanup. No cooking after 11:00 PM.

14. Absolutely NO smoking inside Center House. Smoking is allowed outside. All cigarette butts are to be disposed of properly.

15. No TV, Monday thru Friday before 4:00 PM unless it is your off day.

16. **No Visitors** unless approved by the House Director and House Manager. Female visitors will not be allowed in the House unless accompanied by House Manager or member of the leadership team of Center House. Absolute no one can lodge at Center House other than residents. No visitors after 8:00 PM.

17. Residents involved in any argument or altercation with another resident or member of the Center House staff will be subject to immediate dismissal.

18. After 30 days, an overnight pass will be considered. An advance charge of \$10.00 will be collected for drug testing upon return.

19. Upon moving out, any items issued by Center House are to be left in the room. Resident is responsible for any damage to Center House property.

20. Any items left longer than 48 hours due to abandonment, whether by arrest, parole violation, or voluntary, will be donated, sold, or otherwise disposed of by Center House.

21. Center House is not responsible for any resident's personal.

22. Unemployed residents must be off the property between 9:00 AM and 3:00PM., seeking employment or involved in community service.

I, _____ agreed to follow the programs and regulations of this contract and I understand that Center House is a Christ-Centered Recovery House.

Signature of Center House Applicant: _____ Date _____

Signature of Center House Representative: _____ Date _____

CENTER HOUSE NASHVILLE

FINANCIAL RESPONSIBILITY

There is a one-time non-refundable Administration Fee of \$100.00 for all new residents.

Weekly Program Dues are \$150.00 per week, payable every Friday.

X If you have been approved for a RHP Grant, your first 60 days in our facility will be paid via this Grant.

I _____ agree to pay my Program Dues (\$150.00 per week) and stay current on my account.

I _____ agree to seek employment as soon as possible and maintain employment throughout my stay. There can be no 2nd or 3rd shift employment nor Sunday employment as these working schedules would interfere with the mandatory meeting schedules that are critical to my recovery and restoration.

If I fail to seek employment in a diligent manner and/or stay current on my Program Dues, I will be subject to be terminated from Center House.

I _____ have read and fully understand my financial responsibility to Center House Nashville and will adhere to these guidelines.

Signature of applicant _____ Date _____

Signature of Center House Nashville representative _____

Date _____