



The Ark Dothan

WWW.THEARKDOTHAN.ORG | 334-794-7223 | 475 WEST MAIN ST., DOTHAN AL 36301



INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED

Ark Dothan Inc. Discipleship Program Admission Application

First Name Middle Name Last Name Nick Name

Address City State Zip County

Male Female

Phone Number: _____ Birth Date: mm/dd/yy _____

SS# _____ - _____ - _____ Email: _____

Emergency Contact Name: _____ Relationship: _____

Phone Number: _____

Address City State Zip County

Do you have a valid driver's license? Yes No Number: _____ State: _____

Race: African American Caucasian Hispanic/Latino Native American
 Asian/Pacific East Indian Other

Marital Status: Single Married Divorced Engaged Separated Widowed

Are you able to complete this application without assistance with reading or writing? Yes No

Do you have your high school diploma? Yes No

If not, do you have your GED? Yes No

If you have any other higher education or certifications, please list here: _____

Military Service? Yes No Branch: _____ Highest Rank: _____

Honorably Discharged? Yes No

Do you have any spiritual beliefs? Yes No

What is your religious preference? Examples: AOG, Atheist, Baptist, Buddhist, Catholic, Christian, Church of Christ, Episcopal, Evangelical, Hindu, Jewish, Jehovah's Witness, Methodist, Mormon, Muslim, Non-Denominational, No Religion, Pentecostal, Presbyterian, Protestant, Roman Catholic, Seventh Day Adventist, Wicca, Other, Unknown.

(Please list ONLY one): _____

Are you a member of a church? Yes No If yes, name of church: _____

How did you hear about the Ark? _____

Have you ever been a resident at the Ark? Yes No If yes, when? _____

Have you been in a prior rehab? Yes No If yes, when & where? _____

What is your occupation? _____

Do you have income of any kind? Yes No

If yes, list any and all sources of income and amounts: _____

Are you receiving any government assistance of any kind? Yes No

(Check all that apply): Food Stamps Housing Medicaid SSI Disability Other

Have you ever been arrested or in jail? Yes No If yes, where? _____

Are you currently incarcerated? Yes No If yes, where? _____

If yes, for what? How much time have you served, and what is the remainder of your sentence?

List your convictions and dates:

Conviction: _____ Date: _____

Conviction: _____ Date: _____

Conviction: _____ Date: _____

Conviction: _____ Date: _____

Conviction: _____ Date: _____

Have you ever been convicted of a sexual offense? Yes No

If yes, describe the charge you were convicted of and where: _____

Have you ever been or are you currently affiliated with a gang or brotherhood/sisterhood? Yes No

If yes, which gang/brotherhood/sisterhood and when? _____

Physical Condition: Poor Fair Good

List any physical impairments: _____

Where did you sleep last night? _____

When did you last use drugs/alcohol? _____

Reason for Needing Help: Briefly state the reason(s) you are asking the Ark Dothan Inc. to help you. List any/all addictions and/or problems you may have and how long you have had them.

****FEMALE APPLICANTS ONLY****

Are you currently pregnant or is it possible that you could be pregnant? Yes No

What was the date of your last menstrual cycle? _____

Do you understand that we cannot accept applicants who are pregnant? Yes No

Do you understand that becoming pregnant while in the Ark program will result in immediate dismissal? Yes No

Do you understand that this is a 12-month program? Yes No

Do you understand and agree to the Ark Program Description? Yes No

Do you understand and agree to the Ark Covenant Agreement? Yes No

Do you understand and agree to the Ark Dorm Rules? Yes No

Do you understand that you will NOT be able to pursue employment or earn money until you have completed the Discipleship Class and earned your GED? (this typically takes 4 to 6 months) Yes No

Do you want to pursue admission to this program? Yes No

I certify that the answers in this application are true and complete to the best of my knowledge. I certify that I am of sound mind, and I am of legal age to enter this agreement. I understand that providing false information in this application may result in immediate dismissal from the Ark program.

Signature of Applicant

Date

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