

# Student Application

Adult and Teen Challenge of the Smokies Men's Center

Dear Applicant,

1) The application process has several steps & there are additional considerations for those incarcerated.

2) It's important to read thoroughly and follow every detail carefully.

**FIRST:** Carefully read pages 1-3 to see if you are eligible. Then sign the bottom of page 3 to agree with and conform to program requirements.

**SECOND:** Fill out the application

**THIRD:** Our intake coordinator will be in contact with you about setting up a phone interview.

**FOURTH:** After the phone interview and if you've been granted "acceptance", then the physical check-up and Labs are next. The Health Screen forms will be sent to you via email or fax. (The required tests that are listed on the health screen forms must be current- within 8 weeks of starting the Application Process.)

**FIFTH:** 1st payments can be made online on our website ([www.livinghopeway.com](http://www.livinghopeway.com)) using the "donate now" button. Please make sure you use the "optional notes" box to designate where the money is to go before you submit payment (Example: Joe Smith application fee) **Please feel free to contact us at with any questions about fees or being able to afford them. We are willing to work with you.**

**SIXTH:** We will work around any court dates that the student may have while he is in the program. We encourage students to stay on top of all court dates and to provide transportation to and from their court dates, if they are not able to we can make arrangements.

You must stay in contact with the program director or intake coordinator every two weeks. Files are purged after 60 days with no contact from or on your behalf. We may also require "clearance" or "verification" letters from other physicians or professionals prior to you being accepted.

Once we receive the Initial forms and application, we conduct the phone interview.

IF there is no bed space presently available your name will be put on a waiting list for the next available bed once you have finished the application process, only after all requirements for entrance have been fulfilled.

**IMPORTANT: At this time we cannot accept an applicant who has ever been convicted of a sexual crime or is positive for HIV.**

**IMPORTANT At this time we cannot accept applicants who are on mood altering, depression or anxiety medications. You must come off of them first, with your doctor's approval and under their supervision. We require written verification stating that this has been achieved. You may also be required to go through medical detox prior to entering due to the fact that we are not a medical facility.**

**IMPORTANT: You must have two valid forms of I.D. one form of ID must be a driver's license or picture ID and the other may be a S.S card, certified copy of a birth certificate, or a passport. We recommend you begin the process now if you don't have them because we cannot allow you to enter the program without them. If you don't have a social security card, you must apply for one and bring proof of application.**

**IMPORTANT: Once your entry date and time has been set you must be on time! This program is structured and regimented which dictates all our time frames; if you are late, it's very possible that you may have to reschedule.**

Friend, you are at a crossroads in your life. In Deuteronomy 30:19 God says He sets life and death before us. He urges us to choose life but YOU must choose your path. You may not know how the next step will work out but God will provide a way if you trust Him. We are here to help in any way we can but the responsibility to follow through and get things done falls on you. The question is how bad do you truly want a changed and hopeful life?

Sincerely,  
Administration

# Program Requirements

## Adult and Teen Challenge of the Smokies Men's Center

- You must be 18 to 50 years of age (if you are over 50 & have extremely good health, exceptions might be made)
- You must have a substance abuse issues, or life controlling problems
- Willing to consider a Christian faith-based approach
- Willing to commit to a minimum of 12 months
- Willing to share a room with others of different races and backgrounds
- Willing to cut off all contact with non-family members while in the program:  
\*(This includes girlfriends and friends.)
- Must have a Social Security Card and Photo ID
  
- Must submit to random drug tests while in the program (This includes, but is not limited to nicotine testing since we are a no nicotine facility.)
- Try and get physical and bloodwork done, if not able we will be able to help the student get the physical and bloodwork done.
- You must have no physical limitations and be able to participate in all program activities. (Classes, walking, hiking, climbing into van, lawn care, maintenance, house cleaning, work detail, etc.)
- Non Psychiatric medications prescribed by a doctor for physical issues such as epilepsy, blood pressure, diabetes, etc. are allowed and will be administered by staff only.
- We do not allow any psychiatric or anti-depressant medications to be taken while in the program (This includes, but is not limited to prescription painkillers, mood stabilizers, suboxone, methadone etc.)
- We cannot accept those who are HIV positive
- We cannot accept those who have been convicted of a sexual crime.
- All students entering our program will apply for government assistance (food stamps) or pay an additional monthly fee of \$140 for food cost.

# Student Application

Adult and Teen Challenge of the Smokies Men's Center

## Name

First Name      Last Name

## Date of Birth

## Address

Street Address

Street Address Line 2

City                      State / Province

Postal / Zip Code

## Phone Number

Best number to be reached at

## Email

example@example.com

## Social Security Number

## Drivers License Number

**Last Grade Completed**

**GED?**

Yes

No

**Race/Ethnic Background**

White

African American

Asian

Hispanic

Native American

**Please describe your present living conditions:**

**Who referred you to Teen Challenge of the Smokies**

**Reference Phone Number**

## **Emergency Contacts**

Must be immediate family of Teen Challenge approved contacts

## Emergency Contact #1

First Name      Last Name

## Phone Number

Please enter a valid phone number.

## Address

Street Address

Street Address Line 2

City                      State / Province

Postal / Zip Code

## Have you participated in homosexual activity?

## Emergency Contact #2

First Name      Last Name

## Address

Street Address

Street Address Line 2

City                      State / Province

Postal / Zip Code

## Phone Number

Please enter a valid phone number.

### **Emergency Contact #3**

First Name      Last Name

### **Address**

Street Address

Street Address Line 2

City                      State / Province

Postal / Zip Code

### **Phone Number**

Please enter a valid phone number.

## **Personal Information**

Adult and Teen Challenge of the Smokies Men's Center

### **Marital Status**

Single

Married

Separated

Remarried

### **Girlfriend or Fiancé?**

Girlfriend

Fiance

Neither

**Do you have children?**

Yes

No

**If yes, how many?**

**Last time you used?**

**Please describe your current drug/substance of choice, also give a brief summary of current situation:**

**Have you attended a Teen Challenge program before?**

Yes

No

**Have you tried other treatment programs before?**

Yes

No

**Are you a registered sex offender?**

Yes



**Do you currently have legal charges pending?**

Yes

No

**Are you mandated to enter and complete the Teen Challenge program?**

Yes

No

**Are you on parole?**

Yes

No

**Are you on probation?**

Yes

No

**Have you ever been arrested?**

Yes

No

**If yes, County of Probation**

**If yes, Probation Officer Contact**

First Name

Last Name

**Probation Officer Phone Number**

Please enter a valid phone number.

### **Probation Officer Email**

example@example.com

### **Lawyer/Law Office**

First Name      Last Name

### **Lawyer/Law Office Phone Number:**

Please enter a valid phone number.

### **Lawyer Email:**

example@example.com

## **Health Status**

### **Range of your general health:**

Excellent

Good

Fair

Poor

### **Do you have any of the following?**

HIV

Hepatitis

**Do you suffer from any of the following?**

Epilepsy

Seizures

Diabetes

None

**Are you currently taking any other prescription medication?**

Yes

No

**Are you currently taking prescription medication for anxiety or depression?**

Yes

No

**If yes, please list:**

**Have you ever had psychiatric care?**

Yes

No

**Have you ever attempted suicide?**

Yes

No

**What is the condition of your teeth?**

Excellent

Good

Fair

Poor

1. We believe the Bible is the inspired, infallible and authoritative written Word of God.
2. We believe there is one God, eternally existent in three persons: God the Father, God the Son and God the Holy Spirit.
3. We believe in the deity of our Lord Jesus Christ, His virgin birth, His sinless life, His miraculous ministry, His atoning death, in His bodily resurrection, in His Ascension to the right hand of the Father, and His personal return to earth, at which time he will judge the quick and the dead.
4. We believe the only means of being cleansed from sin is through repentance and faith in the precious blood of Jesus Christ.
5. We believe in the ordinances of the church: Holy Communion and Water Baptism.
6. We believe in the infilling of the Holy Spirit, and reliance on his power working in and through us.
7. We believe the redemptive work of Christ on the cross provides divine healing of the human body through prayer and petition according to Gods will.
8. We believe in the sanctifying power of the Holy Spirit by whose indwelling the Christian is enabled to live a life of devotion and integrity.
9. We believe in the Blessed Hope, the imminent return of Jesus Christ followed by his reign on the earth for 1,000 years.
10. We believe in the resurrection of the saved and the lost, the one to everlasting life and the other to everlasting damnation.
11. We Believe the biblical order for human sexual expression as being between one man and one woman who have committed to a life-long marriage covenant (Gen 2:24, Matt. 19:5). Any expression of human sexuality outside of the marriage covenant between one man and one woman is sin (Ex. 20:14; Lev 18:22-23,20:13; Matt 15:19). God wants us to avoid sexual immorality and live holy and honorable lives of faithfulness.

## Student Agreement

Adult and Teen Challenge of the Smokies Men's Center

# Release of Information Form

Adult and Teen Challenge of the Smokies Men's Center

**VERY IMPORTANT:** This release of Information document informs us of any person that you want informed of your intent to enter the program, or who may be involved in your intake process. The information exchanged with these people may be utilized to determine your eligibility for the program, and develop or revise a treatment plan once enrolled. Because of Federal confidentiality laws, you must list, EVERY person, even immediate family members, that are to be informed of your intent or may be involved in the intake process. In short, if a person's name is not on the list, we will not be allowed to communicate with them or even acknowledge the receipt of an application, regardless of who they are or their relationship to you. The ONLY exception to this will be in accordance with Federal guidelines.

## Relationship

### Name #2

First Name      Last Name

### Phone Number

Please enter a valid phone number.

### Name #3

First Name      Last Name

## Relationship

### Phone Number

Please enter a valid phone number.

### Name #4

First Name

Last Name

## Relationship

## Phone Number

Please enter a valid phone number.

# General Program Rules Agreement

Adult and Teen Challenge of the Smokies Men's Center

1. I have read the general program rules and consent to abide by all of them, whether I agree with them or not.
2. I will dedicate myself to the discipleship program until it is recognized by the TC staff that I qualify for completion; I should come to realize that I cannot do this in my own strength.
3. I release to Teen Challenge the right to search, read, and withhold my mail in the manner explained in the rules.
4. I release the right to Teen Challenge to do a room search and/or drug screen whenever they deem it necessary.
5. I release the right to Teen Challenge to make a thorough search of my person and belongings on the day of my admission.
6. I understand that withdrawal from drugs, alcohol, and cigarettes will be done "cold turkey" aided only by prayer. If this is not agreeable, withdrawal should be done prior to entrance.
7. I understand that Teen Challenge will not be held responsible for any of my personal property left, lost, or stolen while I am in the Teen Challenge program. When leaving Teen Challenge, I understand that all my personal property must be taken with me.
8. I release Teen Challenge from all financial or legal responsibilities in case of accident, injury, illness, any possible medical or dental issues or other misfortune.
9. I understand that I will be required to do various work projects while in the program (physical labor). I will not receive payment for the work I do while in the Teen Challenge program. I also understand that the purpose of this work is to aid in my character development.
10. I release the right to Teen Challenge to withhold any of my belongings that they deem necessary; any items not allowed according to the guidelines will be sent home, possibly discarded or held for me until my departure.
11. I understand that upon arrival I must deposit with Teen Challenge the cost of return taxi fare to be held

for me in case I am dismissed or decide to leave the Teen Challenge program prematurely.

12. I agree to submit to the authority of any and all staff members who may direct me while I'm a student of Men's Teen Challenge of the Smokies.

Permission to share and communicate personal information concerning me for the purposes of determining eligibility for and or facilitating entry into the Teen Challenge residential program located in Franklin NC. This release shall also extend to the development and revision of my treatment plan while enrolled in the program as well as making the transition back to normal life after the program.

\*This consent is subject to revocation in writing by the student at any time except to the extent that the ministry or person who is to make the disclosure has already acted on it. This consent automatically expires one year and six months from the date it is signed.

## Statement of Student Rights

Adult and Teen Challenge of the Smokies Men's Center

1. You will be fully informed upon admission of your rights and responsibilities and limitations of those rights imposed by the agreements of Men's Teen Challenge of the Smokies.
2. You may voice grievances to: 1) First, your counselor or staff, 2) to the Program Director and then 3) the Executive Director of Men's Teen Challenge of the Smokies and to outside representatives of your choice with freedom from restraint, interference, coercion, discrimination or reprisal.
3. You will be treated with consideration, respect, and full recognition of your dignity and individuality.
4. You will be protected by your leaders at Men's Teen Challenge of the Smokies from neglect from physical, verbal and emotional abuse (including corporal punishment) and from all forms of exploitation.
5. Men's Teen Challenge of the Smokies will assist you in the exercise of your civil rights.
6. You will not be expected to perform services which are ordinarily performed by the staff of Men's Teen Challenge of the Smokies.
7. Upon admission you will be allowed to fill out a mailing list of family members with whom you desire to communicate, subject to approval by your assigned Life-Coach and the Program Director. Mail will be opened in the administration office and given to your Life-Coach for delivery to the student. Packages received will be opened in the presence of the staff. However, any mail or other communication which is not delivered to the student for whom it is intended shall be returned to the sender.
8. You will participate in the development of the "Life-Map" for your growth while here at Men's Teen Challenge of the Smokies. You will also receive sufficient information about proposed and alternative interventions and program goals.

9. You will participate in all scheduled activities including class, chapel, church, work and recreation.
10. You will have free use of designated areas in the facility. Consideration will be given regarding privacy, personal possessions and the rights of others.
11. You will be provided privacy for the use of the bathrooms and showers.
12. Your personal items are subject to approval by the guidelines of Men's Teen Challenge of the Smokies
13. You will be allowed visits at designated times and places under supervision.
14. Should you feel the need of outside assistance, you have the right to call the appropriate advocacy representative. Some are listed below:

Health Department

American Civil Liberties Union

Macon County Sheriff's Department

### **Title VI of the 1964 Civil Rights Act**

"No person in the United States shall on the basis of race, color or national origin, be excluded from participation in, be denied benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance."

#### **Prohibited Practices:**

- Denying any individual services, opportunities, or other benefits for which that individual is otherwise qualified;
- Providing any service or benefit in a different manner from that which is provided to others in a program because of race, color, or national origin;
- Segregating service recipients solely because of race, color, or national origin;
- Restricting access to program services or benefits because of race, color, or national origin;
- Adopting methods of administration which would limit participation by any group of recipients or subject them to discrimination;
- Addressing an individual in a manner that denotes inferiority because of race, color, or national origin.

# **Adult and Teen Challenge of the Smokies Men's Center**



## Statement of Faith

**The following are some of the basic rules of Men's Teen Challenge of the Smokies. You will be provided with a complete guidelines handbook upon admittance.**

### **Christian Discipleship and Training Center:**

1. I understand that Teen Challenge is a Christian discipleship and training program and I agree to be subject to Biblical teaching and Christian forms of behavior.
2. I agree to assume personal responsibility for my own attitude and behavior at all times. I understand that what program authority calls incorrect behavior and a bad attitude will be confronted and may be disciplined if necessary. I will agree to do the disciplinary action or project with a willing attitude.
3. I understand that my main purpose for being in the program is to learn a new way of life according to biblical standards, not just to get off drugs and/or get out of jail.

### **Personal:**

1. I will not possess or use drugs at any time, including psychiatric medication.
2. I will not possess or use any tobacco product; this includes the vapor type smoking devices.
3. I will not curse or use off-color expressions or bodily gestures.
4. I will not talk about street life, drugs, sex, partying or reminisce about past sinful practices.
5. I will not horseplay or engage in any other inappropriate body contact.
6. I will not become part of a limited social group that excludes others.
7. I will not call other people names- including nick names that may connect them to their past life.
8. I will not go outside of the men's dorm without staff permission.
9. I will not bring a radio, tape/CD device, phone, Ipod, musical instruments, books, knives, lighters, etc.

### **Family:**

1. I will agree to the staff screening and reading my mail.
2. I agree to write only members of my immediate family - no letter writing to girlfriends or friends.
3. I agree to make (or receive) only two 10 minute phone calls per week, after a 21 day waiting period.
4. I agree not to have any visits from my immediate family until after 40 days.

### **Group:**

1. I agree to participate in all scheduled activities including class, chapel, choir, church, work, and recreation. I will participate in each of these activities.
2. I agree to conduct myself in a reserved, polite manner and will not do anything in public that will call

negative attention to myself or reflect badly upon the whole group.

3. I understand the length of the Teen Challenge Program is a minimum of 12 months. I agree to commit to complete phases 1-4 of this Teen Challenge Program.

### **Discipline:**

1. I understand that I'm expected to be prepared, in place, and on time for all my scheduled activities. I also understand that any tardiness, being unprepared, dragging my feet or other forms of carelessness will result in disciplinary action.

2. I understand that my room must be kept in a neat and orderly manner at all times. I agree to work together with my roommates to keep it clean and orderly for daily inspection.

3. I understand there will be a dress code.

4. I understand there will be a grooming code: shave, brush teeth before 1st period, hair combed (also before 1st period and throughout the day), shower once a day, etc.

5. I understand that disciplinary action may include: extra duties, loss of privileges, suspension, or dismissal.

### **Name #1**

First Name

Last Name