

Housing Application

"The Althea Project provides housing and resources to individuals recovering from substance use disorder by fostering a comprehensive and tailored recovery experience that feels like home"

Inclusion Statement: Here at The Althea Project we value diversity, equity, and inclusion among those we serve, our support staff and in the community. We feel that we cannot adequately serve our mission statement without inclusion. We believe all people deserve the opportunity to live and thrive in a safe, informed, and respectful environment. We strive to lead and support diversity, equity, and inclusion within the communities we serve.

Application Requirements:

Must have 30 days sober or have successfully completed residential treatment.

Must be willing to participate in a 12 step program and obtain sponsorship.

We accept all MAT (Medication Assisted Treatments) as long as there is an up to date prescription and all medications are in the appropriate container.

Rent is \$150 Per week

All residents are required to participate in weekly house meetings.

All residents will be required to give back to their community by participating in some type of volunteer work within the community.

DFS visits are allowed at the Phoenix House as long as you confirm with the house manager 72 hours prior to the scheduled visit.

Please refer to the guide book for all Rules and expectations.

Application for Phoenix House

General Information		
Full Name:		
Last Known Address:		
Date of Birth:	Social Security Number:	
	Social Security Number: Email address	
Emergency Contact Name:		
Relationship to Applicant		
Contact information		
	 	
Do you have a valid ID (needed	for employment) ves no	
Please list any medical problem		
	5	
Please list any food or medicati	on allergies	
Please list all medications, dose	, ,	_
Medication	Dose	Frequency

Substance Use and Recovery

Please provide a brief explanation of your substance abuse history including substances used frequency of use, and last use.

Have you ever had significant period of abstinence from substances, please explain
Are you currently using MAT as a recovery tool? If so please explain
Are you willing to work a 12 step program and obtain a sponsor? Yes No
Are you planning to attend outpatient? If yes, are you comfortable signing a release of information so support staff can communicate with your team as needed. yes no
Legal:
Are you on probation or parole, if yes please explain
Do you have any other legal issues or pending charges, if yes please explain

Do you have Division of Family Services or the Juvenile Office involvement? If so, what are your current visit dates and time?
Do you have any minor children that will be visiting you at the home? Yes No
Misc.
If you are on disability, are you willing or able to get a job or volunteer? Yes No
Do you have your own vehicle? Yes no Is it properly insured and registered? Yes No Name on Registration License Plate Number
What are some healthy supports that you have?
Are you involved in any romantic relationships?
Please use this space to tell us a little bit about your goals in sobriety, expectations for sober living, what you like to do for fun, and anything else you would like us to know about you.

By signing this application you are in agreemer mpact your ability to reside or continue residing	nt that any false or misleading information may g in The Phoenix House.
Completion of this application will be reviewed will contact applicants within 72 hours of receip	
Signature	Date