



Room For Ruth

P.O. Box 1527 Fallon, NV 89407

Offering Positive Life Style Choices to Women

Application for Residency A four-month commitment

Room for Ruth is a non-profit organization that will provide a safe, sober and clean, temporary home to women who are sincerely seeking to rebuild, reorganize and reestablish their lives in our local community. Room For Ruth does not discriminate against race, color, religion, national origin or ancestry in our admission policy or service.

An application for residency must be filled out and returned to Room For Ruth to be considered for residency. Our Board of Directors will review each application received. Generally this review process will take no longer than 10 days. We may require a personal interview with you before determining whether you are eligible to become a resident at Room For Ruth. The information that you provide on your application and in any subsequent interview will be kept confidential. It is vital that you provide honest, clear, and detailed information in your application. Please provide extra information that you feel may help us understand your desire to rebuild your life.

Residency at Room For Ruth is a four-month commitment on your part. Upon acceptance, our directors will help to create an individualized plan designed to support the positive life-style choices you are making. If you display a lack of commitment to completing the goals of your plan, it will be cause for termination from Room For Ruth.

If your application is accepted, you will be given a move in date. Once you move in, you will have 7 days in which to decide if you are willing to make a 4-month commitment to the Room For Ruth program. We also have 7 days in which to decide if you are ready to work within our program rules. During this first 7 days you will not be required to pay any program fees.

Once you enroll in and sign the 4-month commitment, you will be responsible for paying a program fee. The fee for this 4-month program is \$1,600; this equates to \$100 per week. You will be required to do all you can to obtain employment within 30 days of your residency at Room For Ruth. Curfews, chore lists, and visitation limits will be in existence throughout your residency. All house rules will be strictly yet fairly enforced.

To successfully graduate from the Room For Ruth program you must:

1. Remain clean and sober for the entire 4 months
2. Maintain employment throughout your stay
3. Pay your program fees and current expenses
4. Build a savings account for your future
5. Develop and maintain a positive support network
6. Attend counseling as needed
7. Make a plan for your next living arrangement

Return Applications

By Mail: Room For Ruth, P.O. Box 1527, Fallon, NV 89407

By Fax: Room For Ruth, Attn: Doreen 775-423-6559

To Hand deliver: Call Doreen at 775-217-2369

Please read and initial the following rules that apply to all residents.

Please fill out the application completely. Do not leave any blanks. If the question does not apply to you, please mark it "N/A".

ROOM FOR RUTH

House Rules

Room For Ruth will operate on a privilege/reward system. Privileges such as using the telephone, using the Internet, scheduling social outings, receiving an over-night pass, or using your personal vehicle are earned by: adherence to all of the house rules, cooperation in pursuing your positive goals, and your personal attitude. Privileges can be revoked at anytime.

House rules will be in effect throughout your residency.

1. All residents must be 18 years of age or older. No children (under 18 years) can be admitted into this program.
2. Residents will not be allowed to bring their personal pets to the program. (We do have a house cat in residence.)
3. A house supervisor lives on site.
4. All residents must be drug/alcohol free at all times while residing at Room For Ruth. Random drug testing will be conducted. Failure to participate in testing or a failed test will result in immediate discharge from the house. _____ *Initials*
5. All residents must refrain from gambling or socializing in a gaming casino while residing at Room For Ruth. _____ *Initials*
6. Residents are not allowed to possess weapons of any kind. A resident found to be in possession of a weapon will be immediately discharged. _____ *Initials*
7. Directors for Room For Ruth may at any time search a resident or the possessions of a resident. Failure to cooperate will result in immediate discharge. _____ *Initials*
8. There is a designated smoking area located outside of the house. Smoking is not permitted inside the house. _____ *Initials*

9. Theft will not be tolerated. We want you to feel safe and secure at Room For Ruth. All residents will be responsible for their own belongings. Room For Ruth is not responsible or liable for missing items. All personal items must be clearly marked with the resident's name. Items of value may be placed in a safe location with permission from staff. Theft/Stealing will result in immediate discharge. _____*Initials*
10. Attitude is important. Kindness, tolerance, and respect should be practiced in all communications. This is a peaceful, loving, and supportive home. Everyone's life can be deeply affected by a smile and kindness! Violence, verbal abuse, yelling, or aggressive behavior will not be tolerated and will be grounds for immediate discharge. This includes teasing, bullying, and shunning. Treat others like you want to be treated. _____*Initials*
11. The directors will assign a room and a bed for each resident. The program will have no more than 5 residents at any time. You will be required to share a room with another resident. Each resident is responsible for keeping their bed made on a daily basis and their dresser and closet area neat and clean. You will be required to wash your bed linens at least once a week. Laundry schedules may be assigned. _____*Initials*
12. No sexual relationships between residents will be allowed. No guests will be allowed to the bedrooms of residents. Failure to comply will result in immediate discharge. _____*Initials*
13. The kitchen, bathrooms, laundry area and living room are shared space. Every resident is required to do their share in keeping the house clean and maintained. Clean up after yourself. Chores may be assigned. _____*Initials*
14. Personal cleanliness is a must. Shower daily, dress appropriately; keep your hair groomed and teeth brushed daily. _____*Initials*
15. Outside doors are to be kept locked at all times. Resident keys are an earned privilege. _____*Initials*
16. All residents are required to use a sign in/sign out sheet that record the activities of each day. _____*Initials*
17. All residents are required to post work and appointment schedules on a program calendar. _____*Initials*
18. Curfew hours will be enforced. Residents are required to return to Room For Ruth by 9:00 PM on weekdays (Sunday through Thursday) and by 10:00 PM weekends (Friday and Saturday). Prior arrangements must be made with the directors to extend curfew due to work hours. Staying out all night or after curfew without permission from the Directors of Room For Ruth will be an automatic discharge. _____*Initials*
19. Use of the house telephone is a privilege. Rules apply. All phone calls made or received on the house phone are limited to ten (10) minutes. No long distance call or collect calls will be allowed. _____*Initials*
20. Personal cell phone use is a privilege and rules will apply. _____*Initials*
21. TV viewing is a privilege. TV viewing hours will be limited. _____*Initials*

22. This is a safe house and each resident should use extreme caution in giving out the address or phone number. Perspective employers may be given the phone number as a contact point. _____*Initials*
23. If you are a recovering alcoholic or addict, it is required that you attend AA or NA meetings each week. The number of meetings required will depend on whether you are employed and personal history. A signed verification of attendance will be required. _____*Initials*
24. All residents are expected to have a job within one month of entering the Room For Ruth program. If you move in without a job, you will be expected to begin searching for a job immediately. Unemployed residents must be up by 7:30 AM on weekdays and prepared to go out to seek employment each day until employment is obtained. Residents will be required to keep the directors informed about where/when/how application for employment has been made. The directors of Room For Ruth will offer assistance and direction in helping you obtain employment. Employment must be obtained and maintained in order to remain in our program. _____*Initials*
25. Each resident is required to provide their own food. Each resident will be asked to apply for Food Stamps and use local food banks as necessary. _____*Initials*
26. All residents will be required to endorse their paychecks to Room For Ruth. Once endorsed Room For Ruth will apply 50% of the check to the program fee balance, 25% will be deposited into a non-interest bearing savings account for the resident's next living arrangement, and 25% will be returned to resident for daily spending and pocket money.
27. Confidentiality is a must! Personal information concerning other resident's may not be released. Do not talk about other residents or their problems to each other or non-residents. _____*Initials*
28. To protect the safety and privacy of all residents, guests are not allowed in the house unless a director is present. Family visitation can be arranged at off-site locations as long as the resident has earned social privileges _____*Initials*
29. Your well being is very important! If you have special medical needs, please inform the Board of Directors at the time of your application. All over the counter medicines, all prescription medicines, all herbal medicines will be locked up and dispensed by the directors on a daily basis. No medication will be allowed that has not been prescribed or approved by a physician. _____*Initials*
30. If medical treatment is needed, you are responsible for all bills incurred. In case of a medical emergency, transportation will be arranged. If an ambulance is required, you are responsible for the bill. If emergency room fees, doctors fees, x-ray fees, or any other medical care is provided you are responsible for the bill. _____*Initials*
31. When a resident exits the program (no matter what the terms of exit are) the resident must take their personal items with them upon departure. If personal belongings are left behind, the resident will have 30 days to retrieve them. After 30 days they will become the property of Room For Ruth and used or disposed in whatever manner is best for the program. _____*Initials*

32. The program fee of \$1,600 will be billed to the resident upon signing the 4-month commitment. This fee will be payable to Room For Ruth even if the resident exits the program before the 4-month period is completed.

_____ *Initials*

ROOM FOR RUTH RESERVES THE RIGHT TO ASK A RESIDENT TO LEAVE AT ANY TIME.

I HAVE READ AND AGREE TO ABIDE BY ALL THE ABOVE LISTED RULES.

Applicant Signature

Date

Room For Ruth Use Only:

Date App Recd _____ Via _____

Date Reviewed _____ by _____

Date Interview Scheduled _____

Accepted _____ Move in Date _____ Contact made _____

Denied _____ Contact made _____

Application for Residency at Room For Ruth

Personal Information:

Date _____

Name: _____

Age _____ Date of Birth _____ SS# _____

Do you own a cell phone? _____ What is the number? _____

Other phone number or message number _____

Whose number is this _____

How should we contact you regarding this application? _____

Where are you currently living? _____

When do you need to move in? _____

Is this date confirmed? _____

Where would you live if not accepted into Room for Ruth? _____

How did you hear about Room For Ruth? _____

Do you have a drivers license? _____
State of Issue _____ Expiration Date _____
Is it (circle one) Active Revoked Lost Expired

Do you have a vehicle? _____ (If you bring a vehicle to Room For Ruth, you will need to be able to prove ownership, registration, licensing, and insurance. Using a vehicle will be considered a privilege and will need to be earned.)

Family History

Are you currently married? Yes _____ No _____
If yes, Spouse Name _____
Spouse Address _____
Spouse Phone number _____
Are you hoping to reunite with your spouse? _____

Are you currently in a domestic relationship with someone? Yes _____ No _____
If yes, Name _____
Their Address _____
Their Phone number _____
Are you hoping to return to or continue this relationship? _____

Do you have children under the age of 18? Yes _____ No _____
If Yes, please list:
Age: _____ Name: _____ Where is child _____
With who _____
Age: _____ Name: _____ Where is child _____
With who _____
Age: _____ Name: _____ Where is child _____
With who _____
Age: _____ Name: _____ Where is child _____
With who _____
Age: _____ Name: _____ Where is child _____
With who _____

Are you seeking to be reunited with your children?_____

Please explain_____

Do you have any family in the Fallon area? Yes_____ No_____

Who/Name_____

Please explain the relationship:_____

If not Fallon, where is your family located_____

If while you are a resident, an emergency occurs, who should we notify?

Emergency Contact Name_____

Emergency Telephone #_____

Your relationship with the contact person_____

Education

Have you graduated high school?_____ year_____ where_____

If not, do you have a G.E.D.?_____

List any additional schooling/training you have received:

Employment and Financial Information

Are you currently employed?_____ Where?_____

How long have you worked here?_____

If unemployed, briefly list your previous work history and job skills_____

Have you been searching for work? Yes_____ No_____

What type of employment are you seeking?_____

Do you have a picture id?_____

Do you have any reason that you feel you are unemployable? _____

If yes, please explain _____

Do you have any source of income? Yes _____ No _____

If yes, please describe: _____

Should you be receiving?

Spousal Support _____ Back Child Support _____

Unemployment _____ Disability _____ or any other _____

List any public assistance you are receiving at this time? (food stamps, SSI, TANF, etc.)

Do you have an active credit card? Yes _____ No _____

Do you have an open checking account? Yes _____ No _____

Do you have an open savings account? Yes _____ No _____

Medical History

List any medical and/or mental health conditions (past or present) that you are being treated for _____

Do you take any medications? _____ List the name and dose of medication(s)

List the name | the dose | and the reason you take this medication

List the name	the dose	and the reason you take this medication
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

How long have you taken your currently prescribed medications? _____

When was your most recent medical exam? _____

Have you had a recent TB test _____ date _____

Do you have any allergies to medications, food, pets, etc? _____

If so please list: _____

Are you pregnant? _____ If yes, how far along _____

Do you use tobacco? _____ how _____

Do you have any medical concerns that you feel need to be taken care of _____

Do you have medical insurance? _____ How is it paid for? _____

Policy name and number _____

Substance Abuse and Addiction History

Alcohol Have you ever used alcohol? _____

At what age did you start using alcohol? _____

Do you consider yourself a (circle one):

never drink, social drinker, binge drinker, or alcoholic?

Please explain: _____

Date of last drink: _____

Length of sober time _____

Narcotics Have you ever used drugs? _____

At what age did you start using drugs? _____

What type of drug(s) have you used? _____

Method of use (circle): snort smoke inject oral other

(other--please explain) _____

Do you consider yourself a drug addict? _____

What is your primary drug of choice? _____

Date of last drug use _____

Length of clean time _____

Prescriptions Have you ever abused prescription drugs?

What type of drug did you abuse? _____

Date of last abuse _____

Other Addictions/Disorders Do you have any other active or inactive addictions?

Such as...

Gambling _____ Hoarding _____ Eating Disorder _____
 Shopping _____ Other _____

Treatment Have you ever been to drug/alcohol rehabilitation? _____

Length of Program	Mo/Yr started	Name/Location of Program	Did you complete

Are you currently enrolled in any treatment programs or classes? _____

If yes name of program(s) or class(s): _____

When does this treatment program end _____

Treatment

Have you ever received counseling for other disorders? _____ When and what type? _____

Support Groups

Do you attend regular meetings?

AA _____ NA _____ GA _____ OEA _____

Do you have a sponsor? _____ Where is your sponsor located? _____

Have you ever worked on your 12 steps of recovery? _____

Will you agree to random drug/alcohol testing? _____

Criminal history

Do you have any **outstanding warrants** for your arrest? _____

If yes, list where and why: _____

Do you have a **non-felony** criminal record? _____ If yes, list the date and charges: _____

Do you have a **felony** criminal record? _____ If yes, list the date and charges:

Have you ever been **incarcerated**? If Yes, list

Where	When	Why
_____	_____	_____
_____	_____	_____
_____	_____	_____

Are you currently being supervised on parole? _____ or/ on probation? _____
If yes, list officer's name and phone number _____

Date supervision expires: _____
Have you spoken to your officer about residing at Room For Ruth _____

Do you have a current restraining order for protection against anyone? _____

Name of person and reason for the order: _____
_____ Date order expires: _____

Does anyone have a restraining order on you? _____ If yes, who _____
Why? _____ Date order expires: _____

Do you have a history of assault or violence _____
As a victim or as the one charged? _____
When did the offence(s) take place? _____
Have you received counseling for this? _____

Summary

Do you have a sincere desire to change your life style? _____

Are you willing to attend out-patient counseling, classes or 12-step support group meetings in order to achieve your goals? _____

Have you read a copy of the Room For Ruth house rules before applying for residency?
