

Katie’s House is a Christ-centered transitional living home for women who have completed or graduated a rehabilitation program. The purpose of this program is to provide an environment for women to find their full potential through Jesus Christ, and to become role models through their faith that will continue on in their homes, churches and communities.

**Expectations:**

* 4 Month minimum stay
* Full-time employment while living at Katie’s House

\*exceptions if attending classes and/or other certification opportunities

* Attend Christian Church services of your choice.
* Work on life skill class areas such as:

 -Basic financial planning, Parenting, relationships, and career building

* Community and church volunteering
* Must commit to and abide by house rules

We are excited to help you find and achieve the plans God has for you. Our mission is to love and support you as you prepare for the next step in your life. We look forward to having you be a part of our family and community.

With love,

 Katie’s House

|  |  |
| --- | --- |
|  |  |

# Student Application

## Applicant Information

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Full Name: |  |  |  | D.O.B. |  |
|  | Last | First | M.I. |  |  |

|  |  |  |
| --- | --- | --- |
| Address: |  |  |
|  | Street Address | Apartment/Unit # |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  | City | State | ZIP Code |

|  |  |  |  |
| --- | --- | --- | --- |
| Phone: |  | Email |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Date Graduating: |  |  Social Security No.: |  |

|  |  |
| --- | --- |
| Adult & Teen Challenge Center or Other Rehab Center: |  |

## Education

|  |  |  |  |
| --- | --- | --- | --- |
| High School: |  | Address: |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| From: |  | To: |  | Did you graduate? | YES[ ]  | NO[ ]  | Diploma:: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| College: |  | Address: |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| From: |  | To: |  | Did you graduate? | YES[ ]  | NO[ ]  | Degree: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Other: |  | Address: |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| From: |  | To: |  | Did you graduate? | YES[ ]  | NO[ ]  | Degree: |  |

##  Previous Employment

|  |  |
| --- | --- |
| Company: |  |
| Address: |  |

|  |  |
| --- | --- |
| Job Title: |  |

|  |  |
| --- | --- |
| Responsibilities: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| From: |  | To: |  | Reason for Leaving: |  |

|  |
| --- |
|  |

|  |  |
| --- | --- |
| Company: |  |
| Address: |  |

|  |  |
| --- | --- |
| Job Title: |  |

|  |  |
| --- | --- |
| Responsibilities: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| From: |  | To: |  | Reason for Leaving: |  |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |  |
| --- | --- |
| Other areas of Work you are Interested In: |  |
|  |

## Legal

Felonies:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you a registered sex offender:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Health

|  |  |
| --- | --- |
| Allergies: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Any Disabilities: |  | Infectious Diseases: |  |

|  |  |
| --- | --- |
| Any controlled Medications: |  |

## House Rules and Commitment

House curfew set for 10 p.m. unless house mother is aware of other arrangements.

Bedrooms must be kept clean and orderly

We reserve the right to perform random UA tests

No drugs, alcohol

No men are allowed in bedrooms

4 months minimal living commitment to Katie’s House

Rent will be due the beginning of each month

## Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

I understand the terms and commitment to Katie’s House and will abide by the rules of the house.

|  |  |  |  |
| --- | --- | --- | --- |
| Signature: |  | Date: |  |