

Application Packet

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Requirements for Admission
Overview of Policy Standards
Application for Admission

Mail this completed application to:
Admissions, The Bridge Ministry
3054 Dixie Hill Road
Buckingham, VA 23921
or fax to 434-969-5159

APPLICATION MUST BE COMPLETE OR WE WILL NOT PROCESS IT

OFFICE USE ONLY: NAME _____
DOB _____/_____/_____ SSN _____-____-_____ Application Received _____
Processing Fee _____ Criminal History _____ Medical Test _____ [MedFee _____]
Interview Scheduled_____ Interview Completed _____[date] by _____
Accepted/Denied_____[date] by _____

GENERAL REQUIREMENTS

- Acceptable candidates for The Bridge Ministry are men 18 years or older who are struggling with life-controlling issues and are seeking answers to help them live a productive life. They must understand they are coming into a Christian faith-based program, understand our policies, and be willing to commit to an 18-month program.
- Read and understand the Student Handbook.
- Personal interviews are required for every applicant.
- Applications more than sixty days old are no longer valid. Applicant must submit a completely new application, including results from re-administered medical tests, etc.

PROOF OF IDENTIFICATION

- Provide two copies of a current, official identification (driver's license, Social Security card, military ID, or current passport) with this application and present the original to The Bridge Ministry staff upon entry into the program.
- Submit two photographs that are no more than sixty days old and no larger than 3x5 inches. These are for identification purposes and will not be returned. Polaroid and passport photographs are acceptable.

LEGAL

- All legal matters must be settled before acceptance.
- Provide a complete criminal history and/or presentence report.
- **The Bridge Ministry will not accept anyone convicted of, or with pending charges for, the following crimes: robbery (special consideration will be given after details are made available); sexual crimes of any kind; possession of a firearm or assault with a weapon; murder; attempt to kill; malicious wounding; and/or multiple assault charges. In certain situations, specific charges with mitigating circumstances can be discussed. A photograph of the applicant and a copy of official identification will be sent to the Buckingham County Sheriff's Department.**

MEDICAL

- We cannot accept applicants with an illness or disability that requires continuous medication or medical supervision, or which prevents them from full participation in the program.
- All applicants must submit certified medical test results for HIV, tuberculosis, and hepatitis A, B, and C. These results should be sent directly from the medical institution performing these tests. **In special circumstances to be approved by the Executive Director, an individual may be allowed on the facility without prior health screening. In this case, the applicant is required to pay a non-refundable $350 fee by cashier's check or money order to cover the cost of these tests.**

FEES

- **A $600, non-refundable processing fee is required for all applicants applying to the Bridge Ministry. A cashier's check should be made payable to The Bridge Ministry. The processing fee is non-refundable.**
- The Bridge Ministry program is $200.00 per month. Payments must be made each month by money order payable to The Bridge Ministry. Contract must be submitted with application. Also, the student must bring a cashier's check, or money order to cover bus ticket from Buckingham, VA, to the student's place of origin. If not used, it will be returned to student upon completion of program.

General Information

The Bridge Ministry operates on Christian principles and procedures. Our guidelines are meant to ensure and maintain high standards and a Christian atmosphere for those coming from backgrounds of substance abuse and other life-controlling problems. If a student is able to comply with these program procedures, there is little reason why he should not successfully complete the program. All rules, regulations, policies, and procedures are subject to change at the discretion of the Executive Director. Students will be informed of any changes as they occur. Refusal or failure to comply with these guidelines and standards will result in disciplinary measures or dismissal from The Bridge Ministry.

Applicants need to understand that The Bridge Ministry is a program only for those with a serious interest and commitment to change. Privileges and responsibilities—including passes and visits—will be granted based on success in the program. Here are a few of our regulations.

- No possession of alcohol, cigarettes, or drugs of any kind. Drug testing may be done at any time.
- No physical or verbal abuse, including horseplay, arguing, name calling, and cursing.
- No flirting or holding long conversations with members of the opposite sex.
- Staff may inspect student rooms at any time and without notice. Rooms are to be kept neat and clean at all times.
- Contact with those outside the ministry is limited to three immediate family members on an approved list. Students may not receive incoming personal calls.
- Chores, duties, and work assignments are to be performed daily or as staff requires.
- Students must obtain permission to go anywhere on The Bridge Ministry premises.
- Students must be on time for all activities: meals, classes, work duties, etc.
- Personal hygiene (shower, brushing teeth, etc.) is required daily. Hair must not exceed top of collar. Mustaches may not extend below the upper lip. No beards are permitted.
- If a student leaves the premises without authorization from the Executive Director, he will be dismissed from The Bridge Ministry program.
- Students may be asked to help generate income for The Bridge Ministry through unpaid labor. They will also be required to participate in normal day-to-day chores that are necessary for the operation and upkeep of the Buckingham facility.
- If upon entry to the program a student is on heroin or alcohol, the student will have to quit without benefit of medication. If hospitalization is necessary, The Bridge Ministry will arrange for and/or provide transportation.
- Our rules, regulations, policies, and guidelines are more completely explained in our Student Handbook, which every student is required to read and understand prior to admission. The Student Handbook will also help give the potential student an idea of our daily schedule and what to expect when they arrive.

Application for Admission

All information provided as a part of this application will be considered confidential and shared among staff members for consultation only. ***Application must be filled out by applicant, not family or friends.***

Today's Date	
GENERAL INFORMATION	
Applicant's Name (Last, First, Middle)	
Social Security Number	
Date of Birth (Month/Day/Year)	
Height/Weight/Color of eyes	
Color of skin/identifying marks	
Present Home Address (No PO Boxes)	
Home Telephone Number	
Marital Status (How long?)	Married Divorced Widower (__ yrs)
Do you have children?	YES NO
If YES, list their ages.	
Which, if any, children live with you?	
Name and address of nearest relative in closest proximity to Buckingham	
Relationship to You	
LEGAL ISSUES	
Have you ever been charged with a crime? If YES, you must include a complete criminal history and/or presentence report.	YES NO
Do you have any unsettled legal matters and/or charges pending? If YES, list specific charges and/or court dates below.	YES NO
Have you committed any violent and/or sexual crimes?	YES NO If YES, list below

MEDICAL ISSUES			
Have you obtained all of the required medical tests for admission (HIV; tuberculosis; hepatitis A, B, C)? **You must have the records sent to us**	YES NO		
Are you currently under a doctor's care?	YES NO	If YES, explain below.	
Do you have any medical problems or disabilities?	YES NO	If YES, list below.	
Are you currently on any medications?	YES NO	If YES, list below.	
Name of Drug		Name of Drug	
How Often Taken		How Often Taken	
Purpose		Purpose	
If you are on depression/anxiety/sleep medication, you must wean off of them before arriving			
EDUCATION / EMPLOYMENT			
What is your completed level of education? If you graduated, what year?			
What is your present occupation?			
Employer's Name and Address			
How long since you last worked there?			
Do you have any specialized training?			
FAMILY HISTORY and BACKGROUND			
What is (or was) your relationship with your parents, spouse, and/or children?			
What is your life-controlling problem?			
Have you used drugs?	YES NO	If YES, list below.	
How often have you attempted recovery?			
Describe your struggle with addiction.			

Briefly describe your religious background.	
What are your short-term goals?	
What are your long-term goals?	

PERSONAL AGREEMENT

I understand that

- The Bridge Ministry is a Christian-based program and that I will be in a Christ-centered atmosphere.
- The Bridge Ministry cannot and will not be held responsible for any personal property brought onto the premises of The Bridge Ministry facilities.
- The Bridge Ministry will not be held responsible for any injury or other misfortune occurring to anyone while in this program.
- If I should leave the program or be dismissed, I must retrieve my personal belongings within forty-eight hours, after which time I forfeit ownership and release my property to be donated to the Salvation Army.

If accepted into The Bridge Ministry's program, I make a personal commitment to

- submit myself to the authority of The Bridge Ministry staff while a participant in the program;
- fully abide by the rules, regulations, policies, and guidelines as outlined in this application and more completely expressed in the Student Handbook which I have also received; and
- remain a student in the program for a full eighteen (18) months/or based on completion.

By signing below, I also give The Bridge Ministry and/or its representatives my full permission to obtain and review my criminal history and/or presentence report, as well as any of my medical records and medical test results (including HIV screening), for the purpose of determining my eligibility for this program.

Signed	
Whitnessed	
Date	

Attorney Contact (if applicable)	
Please provide the name, phone number, and address for your attorney.	

Judge Contact (if applicable)	
Please provide the name for the judge hearing your case.	

Probation Officer Contact (if applicable)	
Please provide the name, phone number, and address for your probation officer.	

Criminal History

Please provide your criminal history and have your attorney email or fax it to us.

Date	**Charge** (and explanation if needed)

THE BRIDGE MINISTRY, INC.
RESIDENT CONTRACT

This Contract is made as of the date signed below by _____,"Resident," and The Bridge Ministry, Inc., "Bridge," a Virginia non-stock (non-profit) corporation. Resident and Bridge agree:

1. Recitals: Bridge operates a residential facility in Buckingham County, Virginia, where troubled men live highly disciplined lives. Bridge residents receive room, board and program services. Bridge program services are explicitly Christian. Bridge teaches that freedom from addictive behaviors begins on the foundation of faith in the Gospel and person of Jesus Christ.

2. Payments: Resident is responsible for payments toward room, board and basic supervision only, not any other program services (the Basic Rate). Based on Resident's ability to pay, and Bridge's costs for room, board and basic supervision, Resident and Bridge agree that Resident shall pay Bridge the Basic Rate of $ 200.00 per month.

3. Guarantor: The following family, friends, Church or other organization supports Resident by guaranteeing the payment of the Basic Rate as described in paragraph 2: _____, "Guarantor." Guarantor signs this Agreement below for the sole purpose of guaranteeing to Bridge the payment of the Basic rate for so long as Resident remains at the Bridge Campus.

4. Resident Obligations and Understandings: In addition to the payment of the Basic Rate, Resident agrees:

a. I will abide by the Rules of the Bridge Ministry Handbook and such other rules as Bridge staff impose from time to time whether I agree with them or not. I agree to submit to the authority of Bridge staff at all times.

b. I understand that the Bridge Campus is not a medical treatment facility. My withdrawal from drugs, alcohol and cigarettes will be "cold turkey" without any type of prescribed medication.

c. I UNDERSTAND THAT BY SIGNING THIS CONTRACT I RELEASE THE BRIDGE MINISTRY, INC., ITS OFFICERS, BOARD MEMBERS, STAFF, VOLUNTEERS, AGENTS, CONTRACTORS AND EMPLOYEES FROM ANY RESPONSIBILITY FOR ACCIDENT, INJURY, ILLNESS, OR PERSONAL INJURY, INCLUDING MENTAL CONDITIONS OF ANY KIND, OCCURRING OR RESULTING FROM MY RESIDENCE AT BRIDGE OR PARTICIPATING IN ANY WAY IN THE BRIDGE PROGRAM, WHETHER AT THE BRIDGE CAMPUS OR ANYWHERE ELSE.

d. I understand that work is expected of all Bridge residents and that I will not receive payment for work I do while in the Bridge program, except such work as may be specially assigned me by Bridge as paid work.

_____ (Resident Signature)

e. I understand that my rights to privacy are severely curtailed while I am residing at Bridge. Bridge may at any time without notice search, read or withhold my mail or other deliveries to me; Bridge may search my person and my belongings and my assigned space at any time without notice; and Bridge may take from me without return any property it deems unsuitable for my having while a resident.

5. Dismissal or Withdrawal: If I am dismissed from the Bridge program, or withdraw from the Bridge program, any Basic Rate payments by me or my Guarantor are forfeited to Bridge.

6. Entire Agreement: This Contract is the entire agreement between Resident, Bridge and, if applicable, Guarantor, on the terms of Resident's residence at Bridge. It may only be modified in writing signed by Bridge and Resident, and where applicable, Guarantor.

7. Governing Law. This Contract shall be governed by the law of Virginia.

WITNESS THE FOLLOWING SIGNATURES THIS _____DAY OF _____, 201__:

_____
Resident

The Bridge Ministry, Inc.

By: _____

_____
Guarantor

Guarantor Information	
Name	
Phone Number	
Mailing Address	