

FOUNDATION HOUSE
SOBER LIVING
2410A EAST ROUTE 66
FLAGSTAFF, AZ. 86004
928-774-8845

LAST NAME _____ FIRST NAME _____ MIDDLE NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

HOME PHONE _____ CELL PHONE _____

EMPLOYER _____ ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____ WORK PHONE _____

MONTHLY EXPENSES :

RENT	_____ \$250.00	ENTRY DATE	_____	1ST MONTH RENT IN ADVANCE Y/N	\$ _____
CHILD SUPPORT	_____	KEY DEPOSIT \$10.00	Y/N		
CREDIT CARDS	_____	HAVE YOU EVER BEEN A RESIDENT OF THE FOUNDATION HOUSE ?			
FINES	_____	Y/N IF YES , WHEN?	_____		
FELLOWSHIP	_____ 30.00	DO YOU HAVE A VALID DRIVER'S LICENSE? Y/N	ID# _____		
FOOD	_____ 200.00	DO YOU HAVE A VEHICLE IN YOUR POSSESSION AT THIS TIME? Y/N			
CAR PAYMENT	_____	MAKE	_____	MODEL	_____
INSURANCE	_____	YEAR	_____	LICENSE #	_____
TOTAL	_____	COLOR	_____		

PROBATION/PAROLE Y/N P.O. PHONE # _____ IPS/STANDARD COMMUNITY SERVICE Y/N

REHABILITATION Y/N

DATES _____

DO YOU HAVE TUBERCULOSIS? Y/N ANY COMMUNICABLE DISEASE? Y/N HEART PROBLEMS? Y/N

DO YOU HAVE OR NEED PRESCRIPTION MEDICATION? Y/N WHAT? _____

EMERGENCY CONTACT NAME _____ RELATION _____

ADDRESS _____

PHONE _____

I HAVE READ AND DO UNDERSTAND THE MEANING OF ALL OF THE REGULATIONS OF THE FOUNDATION HOUSE. I AGREE TO OBEY THESE RULES UNDER PENALTY OF BEING TERMINATED FROM BEING A RESIDENT ON A TEMPORARY OR PERMANENT BASIS AS DETERMINED BY THE MANAGER. FURTHERMORE, I AM AWARE THAT THESE RULES ARE AVAILABLE TO ME FOR REVIEW AT ANY TIME AND THAT ALL MONIES PAID TOWARD RENT, FOOD OR BED RESERVATIONS ARE NON-REFUNDABLE.

Print Name _____ Signature _____ Date _____

APPROVED Y/N _____