



First Name: _____ MI: _____ Last Name: _____

Name You Go By: _____ Today's Date: _____ Expected Arrival Date: _____

DOC #: _____ (if applicable) P&P Officer: _____ (if applicable)

State ID#: _____ Issuing State: _____ SSN: _____

Date of Birth: _____ Arriving from: City: _____ State: _____

Emergency Contact Information

1st Person Name: _____ 2nd Person Name: _____

1st Person Phone: _____ 2nd Person Phone: _____

1st Person Address: _____ 2nd Person Address: _____

1st Person Relationship to Resident: _____ 2nd Person Relationship to Resident: _____

Prospective Resident Agreement Statement for Stay at CARE Tallahassee

I understand that CARE will not be responsible for any of the following:

- The loss of any of my personal property or belongings.
- Damage to any of my personal property or belongings.
- Any accident or injury that may happen to my person while on the CARE premises on Eppes Drive.
- Any expenses incurred by me, regardless of the nature of said expenses, while on the CARE premises of Eppes Drive.
- I understand that I may be photographed or filmed for the purposes of promoting CARE's programs and mission through various types of media.
- Residents at CARE Tallahassee are participants in a program, and therefore are not guaranteed a surety of lease and must vacate CARE property immediately upon expulsion from the program.

I have read and fully understand the preceding statement:

Participant's Signature: _____ Date: _____

For Office Use Only:

Date of resident exit: _____ Exit Performed By: _____

PROGRAM AGREEMENT

CARE Tallahassee is a faith-based residential program designed to give men who are experiencing difficulty finding a place to live, a Christ-centered home, for as long as they need it. Even though we are a Christian home for men, men of any faith (or no faith) are welcome. However, all who come into our program will be expected to attend all required meetings/services and chapels. These will be biblically-based events and therefore a man who would not be able to respectfully and attentively attend would not be eligible for this program. Attendance at other non-Christian religious services may be prohibited while staying here IF they cause conflict with this program. This will be determined by the Director Bob Rumbley.

The following issues and agreements are designed to both give the best possible support for the individual men, as well as all the men who have come here, to take steps to bring order and stability to their lives. It is not our intention to push anything on anyone who is not ready to completely give their life to the Lord in all aspects. In keeping with this policy, anyone who does not agree to follow ALL of the following guidelines probably would not find this facility a comfortable place to live for long.

- (1) Since this ministry is made available by God's grace, and since church attendance is a vital part of spiritual growth, required church and chapel attendance on Sundays & weekday evenings is an essential and mandatory requirement that is held at a location CARE chooses. If you have a home church in the area that is supportive of the program, and your Pastor and our Director agree (and you are doing well on all areas of compliance), exceptions will be considered after your first month at CARE. A work schedule that regularly requires you to miss church is not acceptable under this program. Participation in the Sunday afternoon outreaches is required unless excused.

Please initial that you have read and understand: _____

- (2) ***No drugs, alcohol, weapons, fighting, threats, pornography, profanity, sexual activity, theft or insubordination toward staff will be tolerated.*** Your room, back pack or any other storage area on our property is subject to inspection at any time, whether you are here or not. (This would be done only by authorized staff or agency representatives.) Drug and/or alcohol testing may also be done at anytime. You could be required to go off the site to obtain your own test, at your own expense, if necessary. Due to the nature of many of our resident's prior offense(s), no cable television, internet or other means of possible access to pornography will be allowed in any resident's room. Any violation of the pornography or inappropriate contact rules may result in immediate expulsion, with all appropriate agencies being notified.

Please initial that you have read and understand: _____

- (3) Evening chapel is at 6:00 pm Monday through Thursday most weeks and will be held in the CARE community room or another designated location. You are expected to be in Chapel by 5:55 pm and ready to participate or at least be attentive. If you cannot be in Chapel due to work or any other legitimate reason, you need to get clearance from someone in leadership. While work deferrals may be obtained for evening services, chapel as well as Sunday services are mandatory and excessive (more than once a week for evening or once per month for Sunday services) absence without prior Director approval could eliminate you from this program. You must bring a Bible to all services of any kind. This is a Christ centered ministry. Applicants having substance abuse issues may be required to attend Celebrate Recovery meetings weekly. Any failure in the substance abuse policy, if not expelled, will result in mandatory CR attendance to continue in the program.

Please initial that you have read and understand: _____

- (4) Meals are not a part of the program and are your own responsibility. When a man first gets to CARE, meals may be provided for a short time, till you get an income or apply for food stamps. You may use your food stamps to provide for your food or you may participate in our food allowance by donating to the food program.

Please initial that you have read and understand: _____

- (5) Bed/room assignments, as well as other privileges, shall be based in part on how you are doing in all areas of the program. This means that we will give the men with a good testimony, manners, consistent Christians walk, compliance with regular Bible study, willingness to volunteer, honor in paying bills, family obligations and legal debts, etc., first choice. Seniority will be considered when all other factors are considered equal. No bed changes will be made without approval of the manager or director.

Please initial that you have read and understand: _____

- (6) Keeping the facility clean and orderly is a high priority. If everyone commits to keeping his area as well as the common areas clean, we will have a place that is comfortable for us and impressive to those who come to visit. **NO SMOKING IS ALLOWED IN ANY UNIT!** Cigarette butts should be put in an ash can and emptied daily, not on the ground! No exceptions, please! **NO smoking on the porch in front of the community room.** Laundry is done on your day off, unless approved by office staff.

Please initial that you have read and understand: _____

- (7) If you have a disagreement with someone, you should first pray that the Lord will reveal to you where YOU may be at fault. Then go to the one with whom you have the issue, and with a humble heart, see if you might be able to work out your differences. If not, agree on a time for a meeting TOGETHER with someone who has the authority to make a decision. Accept whatever decision is made, pray for healing, let it go, learn something positive from the experience and ask God to show you what He is trying to teach you through the situation.

Please initial that you have read and understand: _____

- (8) Based on **2 Thessalonians 3:10**, you will be required to work and do your share in paying for the program services being provided for you. The amount will vary depending on which unit you are in and/or other contributions (work around the village, volunteering, community service, etc.):

- **Phase one (coming from DOC):** Leon county residents are required to pay \$400 for an entry fee. Other Florida county residents pay \$500. Out of state residents pay \$600. A waiver of the entry fee will only be considered if no sponsorship is available and the releasing facility can send verifiable documentation of program participation while incarcerated. Things considered are chapel attendance, and programs offered by correctional agency partners. The granting of a correctional scholarship must be approved by the Director. The initial fee required to enter our program is a non-refundable fee, once you arrive and begin participation. A refund of any amount during the first 30 days will only be considered, if circumstances of an unforeseen nature arise. Should an event of this nature happen it is the sole decision of our Director Bob Rumbley to make a ruling. If approved the procedure will be as follows, there will be a \$100 administrative fee, and a daily rate of \$15 will be prorated depending on how long you were here. In the case of a refund, it will be processed within two working days. After 30 days the program fee will be charged at a rate of \$100.00 per week if you start receiving income. All residents must work at least 40 hours of community service per week with the GSN ministry during the first thirty days of their stay. If you do not find employment, you can continue doing 40 hours of community service per week, until you find work. Job search is done on days off and not during community service hours.
- **Phase one (non-DOC related):** If you need to live at CARE but cannot pay fees or find sponsorship you may apply to enter our Transformation Work Program which allows you to perform community service with or through the GSN ministry in-lieu of paying program fees. You will be able to live at CARE and be eligible to participate in the meal program and other NEEDED necessities by performing community service in one of our program areas, I.E. thrift store, lawn services, kitchen, commercial cleaning services, phone room, or other contract service areas.
- **Phase two:** As you are able to pay some portion of your fees you may be eligible to perform less community service and phase yourself into full time employment. Under the program here at CARE you will be assessed in three areas; your interaction with staff, other residents, and the program guidelines. During this phase you will also be evaluated for potential employers. If you do not show or develop good work habits you will not be recommended and may be asked to exit the program. If you have medical disabilities you will receive assistance to help you acquire appropriate related income for which you are eligible for. This program is NOT employment and you will not receive compensation (other than possible periodic allowance) directly related to any specific work.
- **Phase three:** When you are able to pay full fees you may continue living in one of the cottages and you may not be required to perform GSN community service, however, if you have an income and are not working, you will be required to do community service somewhere. You will still have to abide by all other program requirements such as curfew, church etc., and do your share of the chores in your unit. The cottage options are as follows:
 - **Units 1, 2, 3, 5 and 6:** Are \$100 per week, (utilities included) 6 man units. These units have a bed room with 2 bunk bed sets, and another room with one bunk bed set, a kitchenette, and a bathroom just for the use of the men living in that unit. (You do have the option of paying the entire month's program fees in advance at the rate of \$400 per month (utilities included), saving you \$400 over the course of 12 months.
 - **Unit 4:** Fees are \$112.50 per week or \$450 per month (utilities included) and has everything the other units have plus its own full kitchen.
- **Phase four:** If you ask and receive permission to function as an Intern you will not be required to pay program fees. You may be given a small allowance subject to fund availability. This is not intended to compensate you for your work but just to allow you to live here and answer a calling God may have for a ministry in your life.

- **Phase five - Transitional Houses:** We occasional have other locations in the community which are available as you become more stable. Prices, privileges and responsibilities vary for the living arrangements at each house and will be discussed and agreed to on a case by case basis.

Your fees are to be paid the day you get paid. If you get paid daily, you pay daily; weekly, you pay weekly; etc. Those who receive monthly checks MUST pay for the entire month when they receive their check and not weekly. Be responsible to advise us if your payday changes or if you are having any problems making your payments. This responsibility not only helps you establish good habits in paying your bills, it also is used in part to help keep the facility operating. Many more people are willing to help us, if we will act responsibly in this and other areas. You will need to advise staff of where you are working or what you are doing to obtain employment. If you are not able to obtain permanent work, you may go out on a regular basis through temporary labor positions or work part time. The remaining balance can be done through community service.

Please initial that you have read and understand: _____ **Current Phase** _____ **Dated** _____

- (9) All rules of the rooms you use are to be followed. If you disagree with any of them, please comply and then ask for the issue to be considered by staff, leadership and/or brought up in group discussions. These rules will include issues such as thermostat temperature, storage, laundry room, cleanliness, moving, etc. These rules may be posted and will be subject to change or suspension, as needs and situations dictate. All electronic equipment is off in rooms between 11:00 pm and 5:30 am. There is no personal phone usage during working hours, except on lunch or authorized breaks. Please instruct your contacts to call your work location supervisor or the CARE office for emergencies. Phones are not allowed in the community room during services. When being transported in ministry vehicles the driver's instructions must be followed and phones/radios with headsets must be kept at a low volume.

Please initial that you have read and understand: _____

- (10) You have the privilege of checking in and out at any time between wake-up and the 10:00 pm curfew if you are back in time. If you will need to come or go outside of that time range, please get it cleared with the resident manager (and your PO if relevant). Checking in and out is mandatory. Residents may NOT leave the property without an approved companion within your first 30 days. After 30 days, leaving the property on your own is considered on a case-by-case basis. Being gone overnight without obtaining a pass, or leaving the property without permission after lights out at 11:00 pm, could result in your losing your spot (and VOP). Curfew for all residents is 10 pm unless approved by management for work purposes, etc. Residents should be on property by 9:45pm, ready for bed-check between 9:45 pm and 10 pm. Visitations are over at 9:00 pm. No visitors under 18 and female visitors must sign-in and stay in community room area. Appointments needing CARE assistance for transportation on days off must be submitted 24 hours in advance. Appointments requiring change in your community service schedule must be submitted by Thursday evening for the following week. Furloughs during time off must be requested 48 hours in advance.

Please initial that you have read and understand: _____

- (11) You are responsible for the safekeeping of your monies and valuables. Don't give your money or valuables to other residents or staff for safekeeping. You may give the Manager-On-Duty (MOD) your valuables for safekeeping only and be sure to get a receipt! If you violate any of these guidelines, you may be subject to expulsion. The periods you are expelled for will be relative to the severity of the violation, and is up to the discretion of the Director. If you feel there was an error made in the decision regarding you, and if expulsion from this program would cause you to VOP, you may ask for a meeting with the Director, Bob Rumbley and your PO. Once requested, a meeting will be set up ASAP. Your staying until the meeting can be arranged will depend on your attitude and actions. Again, all of the above is with the idea of making this place as conducive to your growth and wellbeing as possible. We pray that the Lord will richly bless your time here and that we will be of service to Him, while serving you in the process.

Please initial that you have read and understand: _____

Participant's Signature: _____ Date: _____

For Office Use Only:

Program Official: _____ Title/Position: _____

Notes:

Abilities and Goals

Full Name:

Age:

Current Date:

Home:

Marital Status:

Children:

Spiritual Status:

Employment Status:

What type of work have you done in the past?

What type of work do you like to do? How many hours a week are you prepared to work?

Do you have any health concerns or special needs?

List your accomplishments. Also, list any programs you attended or completed when and/or if incarcerated.

How would you describe yourself?

How do you see your relationship with God? How has God blessed you so far in life?

List what you want to improve in your life. List what you want to eliminate in your life.

List any addictions or compulsive habits you may have. Be honest.

Describe to what extent intoxicating substances related to incarceration or other bad periods in your life.

Goals

List your primary and overall goals and desires for life.

List short-range goals (where you see yourself in 6 months).

List mid-range goals (where you see yourself in 1-3 years).

List long-range goals (where you see yourself in 5-10 years).

Please submit the completed form by one of the following means:

- **Fax:**
Attention: Bob Rumbley
Fax Number: (850) 391-9977

- **Mailing Address:**
CARE Tallahassee
1224 Eppes Drive
Tallahassee, FL 32304