

## DISMAS HOUSE APPLICATION

NAME: \_\_\_\_\_  
(last) (first) (middle) Number Institution

Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_

Birthplace \_\_\_\_\_  
(city) (county) (state)

Social Security # \_\_\_\_\_

Driver's License? \_\_\_\_\_

Last Residence \_\_\_\_\_  
(address) (city) (country) (state)

Whose address is this?

\_\_\_\_\_

**NEXT OF KIN:** Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

One **other person** who will always know how to contact you?

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_

What are your: financial obligations?

\_\_\_\_\_

Economic Resources? \_\_\_\_\_

Marital Status: \_\_\_\_\_

Married how many times? \_\_\_\_\_

Number and ages of children?

\_\_\_\_\_

In regular contact with spouse or significant other?

Kids? \_\_\_\_\_ Parents/Family? \_\_\_\_\_

other? \_\_\_\_\_

### **HEALTH:**

Have you ever been diagnosed for **any** health problem?

\_\_\_\_\_

If so, list and give treatment received:

\_\_\_\_\_

Are there any other health problems that would prevent you from working?

\_\_\_\_\_

Describe your mental health history:

Treatment  
received: \_\_\_\_\_

**ALCOHOL/DRUG HISTORY:**

Do you believe you have/had a drug or alcohol problem?

\_\_\_\_\_  
Are you an alcoholic and/or drug addict?

\_\_\_\_\_  
List primary drugs of use, method of intake, and age of first use:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

What treatment have you received? \_\_\_\_\_

**EDUCATION:** \_\_\_\_\_

GED: \_\_\_\_\_  
(last grade completed) (place and date)

College/Trade  
School: \_\_\_\_\_  
(place, hours completed, degree sought)

Military Service? \_\_\_\_\_  
Combat Experience? \_\_\_\_\_  
Years of service: \_\_\_\_\_  
Type of discharge? \_\_\_\_\_

**LAST JOB HELD:**

Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
From: \_\_\_\_\_ to: \_\_\_\_\_  
Why did you leave? \_\_\_\_\_  
Describe job (tasks): \_\_\_\_\_

\_\_\_\_\_  
Were you employed at time of most recent arrest? \_\_\_\_\_  
How many freeworld jobs in last 3 years before arrest?

\_\_\_\_\_  
What is the longest time you've held the same job?

\_\_\_\_\_  
What are your future employment plans?  
\_\_\_\_\_

**CURRENT CHARGES:** \_\_\_\_\_

**CURRENT CONVICTIONS:** \_\_\_\_\_

Alcohol/drugs prior to (or during) crime?

Current sentence? \_\_\_\_\_

Date incarcerated, this offense: \_\_\_\_\_

Did you know the victim? \_\_\_\_\_

How? \_\_\_\_\_

Plea bargain/agreement? \_\_\_\_\_

Expiration of sentence date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Have you met the parole board on these charges? \_\_\_\_\_

How many times? \_\_\_\_\_

Next parole hearing? \_\_\_\_/\_\_\_\_/\_\_\_\_

Earliest release date: \_\_\_\_/\_\_\_\_/\_\_\_\_

List all disciplinaries:

\_\_\_\_\_

How long since last one? \_\_\_\_\_

Prison Job: \_\_\_\_\_

Prison Programs: \_\_\_\_\_

Prison Employee, Volunteer, or other Community References:

Name	Position	Phone #	# of years known
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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Who is your counselor or caseworker? \_\_\_\_\_

**PAST RECORD:**

Your age at first arrest? \_\_\_\_\_

Juvenile record? \_\_\_\_\_

(list all arrests and convictions)

In Juvenile facilities? \_\_\_\_\_

How long? \_\_\_\_\_

Prior ADULT arrests, charges?

\_\_\_\_\_

Prior ADULT convictions:

\_\_\_\_\_

\_\_\_\_\_

How much of your adult life has been in prison/jail?

\_\_\_\_\_

Have you ever applied to/lived in a Dismas House? \_\_\_\_\_

Which one? \_\_\_\_\_

Hobbies: \_\_\_\_\_

Personal Goals: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I agree to stay at Dismas House for 90 days. I will follow the program as described in the factsheet. I give permission for Dismas to see any information in files kept on me by the Dept. of Corrections or by any other agency. I understand this information will be kept confidential by Dismas. Ten days after termination of my stay at Dismas house, the staff will dispose of any property left unless I have a name and address of person to be notified.

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

Dismas House does not discriminate in selecting applicants solely on the basis of gender, race, or religious conviction.

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Please send application to:

**Rutland Dismas House**  
103 Park Avenue  
Rutland, VT

Phone: (802) 755-5539