

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.

Please send application to:

Vermont Dismas House
96 Buell St.
Burlington, VT 05401

Telephone: (802) 658-0381