Chelsea House Application

WHAT IS CHELSEA HOUSE?

Chelsea House is a progressive, Bible-based, housing program for displaced women and single mom families. It is our desire to provide a safe, clean, comfortable home that encourages personal growth and spiritual enrichment. We are here to help residents achieve their goals and dream within a structured setting. We pray that Chelsea House provides a positive experience for you.

WHAT IS THE GOOD SAMARITAN NETWORK?

(GSN) is a local non-denominational ministry, governed by a board of directors, that provides supportive services like food, clothing, shelter, housing and assistance to individuals and families who are hopeless, homeless, hurting. Our programs include Chelsea House for Women and Single Mom Families, Good Samaritan Inn for Men, Good Samaritan Chapel Outreach and Good Samaritan Enterprises. GSN partners with and assists other ministries, churches, agencies and businesses to provide whole care approach for our clients. GSN is not a government agency and does not receive government funding.

WHAT DOES THE PROGRAM INVOLVE?

Each resident is assigned a mentor who offers spiritual encouragement and guidance as she progresses through the program. Program involves the following phases:

RESCUE-Phase I: Orientation Period, 1-3 night stay, nightly stay, limited personal storage available (pack as if you are going on a one week vacation), learn the basics of the program, establish short term goals.

REDEEM-Phase II: Trial Period, up to 2 week stay, limited storage, establish case plan, establish daily routines with program.

REBUILD-Phase III: Stabilization, up to 30 days stay, increased storage, mentor assigned, complete short term goals.

RESTORE-Phase IV: Full Program, up to 6 months (extensions available based on program compliance and need), reserved bed, full storage privileges, flexible program schedule.

RESEND-Phase V: Ready for Independent living. CH will assist w/ household furnishings to residents who qualify and upon availability.

Each resident participates in a case plan designed to meet her individual needs and goals. She meets with our staff on a weekly basis to review her progress. Residents participate in chapel/church, daily devotions, life skills workshops and personal growth classes. During the day, residents must be employed, attend school or participate in GSN community service or work therapy. Children must be in daycare. Within 30 days of entering the program, each resident is required to apply for all social service assistance that is available to cover her personal needs, e.g., food stamps, medical assistance, ID, etc. Occasional field trips and fun outings are scheduled to establish

friendships and fun, relaxing activities (ballet, special events, concerts, retreats, dining out. CH believes in giving back to our community and residents help with various outreach programs such as; food/clothing closet, monthly WoW tea, fundraisers, community meals, etc. It is our desire that each woman going through the program experiences personal growth and develops a more meaningful relationship with God as she progresses toward self-sufficiency.

IS THERE A COST?

Each resident is responsible to contribute towards her CH program fees of \$300 monthly, \$75 weekly or \$15 nightly. If a resident is unable to pay, she may apply for a scholarship, and may be approved based on fund availability and program compliance. Program fees cover curriculum, housing and utilities. Residents are responsible for their own personal care items including food, transportation, meds, personal bills, laundry supplies, etc. Chelsea House residents are welcome to our Resource Pantry which includes donated clothing, food, personal care items, laundry supplies, household items.

WHO IS ELIGIBLE?

Chelsea House is designed to help meet the needs of displaced women who are willing and able to participate fully in a progressive, structured program which involves accountability. Applicant must be mentally and physically stable, able and willing and able to work, go to school or participate in GSN community service or work therapy for a combined minimum of 40 hours weekly. We are not an addiction recovery program. Women experiencing active addiction issues are encouraged to go through detox and rehab before entering our program. Women in abusive situations which have the potential for life-threatening danger are not good candidates for our program since the residential site is located on an open campus and we can not provide that level of security. Our home is based on biblical principles; therefore, women should have a desire to actively participate in programs which include, but are not limited to, church attendance, WoW groups, daily devotions and personal Bible study. They must have a desire to "do what it takes" and follow a progressive program designed to help better their lives. Women experiencing danger due to current domestic violence should report to Refuge House or their local domestic violence shelter for further assistance. (SEE OUR COMMUNITY PARTNERS TAB FOR REFERRALS/INFORMATION).

WHAT IS THE APPLICATION PROCESS?

Potential residents first turn in a completed application to Chelsea House. The following options are available to submit an application. 1) Hand deliver or mail to Chelsea House, 2706 N. Monroe St., Tallahassee, FL 32303. 2) Fax to 850-297-1118. 3) Email to info@gsncares.org. 4) complete online (fastest). Once application is submitted, applicant should notify our office and schedule an interview. (850-933-1449). An interview will take place once a bed is available. Applicants should maintain contact with the ministry with updates and their continued desire to be in the CH program. After the interview and background check/character references are completed a determination will be made to either accept or deny based on if applicant meets the criteria and agrees to all of the program requirements.

Applicants are strongly encouraged to attend our job readiness daytime program and WoW groups while they are waiting for results. This allows the applicant and staff to get to know each other. An applicant is notified within a week of the interview as to whether or not she is accepted into the program. CH attempts to contact an applicant three times. If there is no response, the applicant is removed from the waiting list and placed inactive. CH proceeds to the next person on the waiting list. Applicants are asked to contact GSN if other living arrangements are made so they can be removed from the waiting list.

PLEASE NOTE: THE CHELSEA HOUSE MAINTAINS A TOBACCO-FREE ENVIRONMENT.

PROGRAM AGREEMENT

Checking each box indicates that you fully understand and agree to comply and are applying to our program in and of your own free will.

PROGRAM REQUIREMENTS

- I understand that CH is a program based on biblical principles and I agree to fully participate in church attendance, Bible studies, support groups, daily devotions and life skills workshops.
- I will actively seek to secure sustainable income through employment, continued education, apply for disability and/or participate in GSN community service and/or job-readiness program.
- I will attend all appointments needed to maintain mental and physical well-being.
- I am medically and mentally stable and able to fully participate in the CH program (work, school or community service on a full-time basis.
- As a responsible adult, agree to contribute and share in expenses for services provided by CH. Program fees are due at the beginning of ea month or when I receive monies. If I am not able to contribute, I will apply for a scholarship with the understanding that it is based on funds availability, eligibility, and short term assistance.

CODE OF CONDUCT

- Be a good example at home and in the community in speech, conduct and attitude.
- I will observe modest dress code (no tight, provocative or revealing clothing, Clothing must not expose female body parts such as cleavage, back, midriff, above knee).

- Respect privacy and modesty of others by remaining fully clothed in clothed and changing in dressing room and bathroom.
- Tattoos/body piercings that are offensive (violent, sexual, disturbing, anti-Christian) will remain covered.
- Remain alcohol, nicotene, drug-free (illegal or abuse of RX/OTC) while in CH program. Random drug/alcohol testing may be issued. SMOKING IS NOT PERMITTED WHILE IN THE CHELSEA HOUSE PROGRAM.
- Taking/Giving unprescribed RX medication that has not been prescribed is illegal and grounds for immediate dismissal. All controlled substances MUST BE stored in a locked area.

HOUSE RULES

- o I will keep my personal area and assigned chore area neat and clean every day.
- o I will not spend overnights away from CH unless approved by director.
- No food or drink in ministry vehicles, bedroom or living room.
- Lights out will be observed between 10pm-6am.(11pm-6a Saturday)
- Daily showers and good personal hygiene are required.
- o Residents will keep personal items in assigned storage areas only.
- Personal items are subject to random inspection by staff without resident present.
- Upon exit, all personal items left behind will be donated or discarded.

AMENITIES

- Mail may be received at 2706 N. Monroe St., Tallahassee, FL 32303. GSN does not hold mail for non residents.
- Personal cell phones may be used during personal time only and resident will observe cell phone courtesy guidlelines.
- Computers and internet are provided and may be used during personal time and rules posted must be observed.
- Printing and copying services are not available.
- Laundry units are available free of charge. Laundry detergent is not provided.
 Laundry privileges are contingent on following laundry room guidelines.
- Music, movies and television is permitted as long as it is wholesome (nothing offensive, violent, disturbing images, horror, profanity, sexual).

 Abuse of CH property and resources are not permitted. (e.g. destroying, defacing, wasting or abusing)

SAFETY

- Location of CH must remain private and confidential for the safety and privacy of the residents. This is very important!
- Residents may not receive visitors at the residence without permission from the director.
- The residence will remain locked at all times. Residents are not permitted to open the door, leave or enter the property during lights out 10pm-6pm unless otherwise approved by director.
- o Candles and other fire hazards are not permitted to burn in or around the home.
- o Guns, knives, hazardous materials or weapons of any type are NOT permitted.
- o Any threat of physical or verbal aggression is grounds for immediate dismissal.
- Theft is grounds for immediate dismissal.

CONFLICT RESOLUTION AND RELATIONSHIPS

- As in any home environment, there will occasionally be differences of opinion.
 Learning to handle and express feelings in a constructive manner will be necessary for a healthy home.
- o If I have a disagreement and are not able to work things out, I will step away and consider that I may at least be partly at fault. After considering this, I will try to discuss my differences with the person with whom I've had a disagreement and see if we can work out our differences.
- o If not, I will agree on a time for a meeting TOGETHER with a staff member who has the authority to make a decision. Be open-minded, accept whatever decision is made, let it go and learn something positive from the experience. Sometimes the best friendships are formed when friends agree to disagree on a topic.
- o If I am struggling, I will talk to someone on staff. I will refrain from gossip, negative talk. I will talk with community, staff, residents in a respectful manner.
- I will refrain from romantic relationships while in the program unless otherwise approved by the director. Verbal, written, or sexual/suggestive activity is prohibited. Dating is not allowed while in CH program. Residents will not engage in fraternizing (forming personal or intimate friendship or relationship) with the opposite sex while in the program. Fraternizing includes but is not limited to; phone calls, meetings, transporting, writing letters, emails, social media unless otherwise authorized by director.
- Residents must not give, receive or request money, services, goods or favors from CH residents or members of the community without permission from the director.

 If I have a problem or concern about inappropriate behavior by any resident, staff member or volunteer, I will contact the Director of the program.

OTHER

- Media participation is optional. I must inform (in writing) that I do not wish to be vidoetaped or photographed. I must inform vidoegrapher/photographer each time and remove myself from the area being video/photographed.
- Upon exit, I will make sure my program fees are current and I have removed all of my personal belongings. Any items left behind, will be donated or discarded.
- If at anytime I am unwilling or unable to fulfill any part of this program agreement,
 I will notify staff and exit program.
- I understand that I am not in a lease agreement and can be exited from the residential program immediately for any violation of this agreement.

SINGLE MOM FAMILIES (only)

- Children under 12 will observe 8:30pm bed time.
- Mom will monitored children at all times.
- Children will follow houserules.
- o Mom will make sure children and well taken care of (food, bath, bed, school, etc.)
- o Mom will make sure children are in school/daycare.
- Diapers will be wrapped in plastic bag and thrown in outside trashcan.
- Mom will make sure children respect other residents' property and not go into their belongings.

APPLICANT INFORMATION Date of Application: First Name: Last Name: Alias names, Nicknames: Age: Date of Birth: Phone Number:

(must have a way to contact you to be able to process application)

Please note preference...text? leave voice message?

Email:

Living Arrangements

How long homeless?

- 1-30 days
- o 2-6 months
- o 6-12 months
- o 1-5 years
- o 5 years and more
- currently not homeless

History of Homelessness or transitional housing, shelters, programs (Describe number of times homeless, what type of shelter, length, reason for leaving).

When was the last time you had your own place? What happened?

Where have you been sleeping at night?

- o motel/hotel
- o family/friends
- o jail/prison
- o shelter
- o vehicle
- streets/outdoors
- o own home
- hospital
- o detox

Other:

What happened that brought you to this point in life?

- Family breakup/Divorce
- o Domestic Violence
- Addiction
- Job Loss/unable to find job
- Evicted
- Incarceration
- Lack of Education
- Disfunctional family life
- other

When would you like to begin your stay at Chelsea House?

How long do you plan to stay at Chelsea House?

How did you hear about Chelsea House?

- o family/friend
- agency
- church/pastor
- o walkin
- website
- phone book
- hospital/detox
- o DOC
- o Other:

What about the Chelsea House program appeals to you?

- structure
- accountability
- Christian environment/program
- o safe, clean environment
- home-like setting
- o convenient location (on bus line)
- Other:

What do you hope to accomplish while in our program?

What are your personal hobbies, interests, activities?

What do you want to improve in your life?

What do you want to eliminate in your life?

FAMILY BACKGROUND

Describe your relationship with your family and why you are not able to stay with them?

Ages of children with you

- infant/newborn
- o baby/toddler
- o preschool
- elementary
- o teen
- o none

List name, age, gender of children with you.

Marital Status

- married
- o engaged/in a relationship
- o divorced/separated
- o single/never been married
- widowed
- Other:

VOCATIONAL/EDUCATIONAL

Education (last grade completed) (HS, GED, College)

Highest level of education

- o Jr. High
- o GED/HS diploma
- o some college
- o AA degree
- BA degree
- masters degree
- o other

Please list any accomplishments, programs attended/completed, degrees earned.

Employment History (types of employment) (check all job experience)

- customer service/retail
- janitorial/housekeeping
- o food service/waitress

- education/instructional
- office/clerical
- o other:

Are you willing/able to work? If so, what type of work would you like to do? SPIRITUAL What is your spiritual background (check all that apply) Christian o Other (_____ Name of your home church and pastor (please provide contact info). Is your minister/home church aware of your situation? How do you feel about us contacting your home church/minister to partner with us to help you? What are your thoughts about participating in morning devotions, church services and Bible studies? SPECIAL NEEDS Check all that apply to you. veteran o retired pregnant (If so, when is your due date?_____) victim of domestic violence (How long ago?_____ Are you in current danger?_____ o medical issues (describe below) mental health issues (describe below)

Mental Health Information

Other:

(diagnoses, inpatient/outpatient treatment dates and locations. Do you have a history of thinking about hurting yourself or others, hallucinations? Are you willing to be referred for services?

Medical Issues (Are you under a doctor's care?)

addiction to cigarettes (describe below)

used alcohol/drugs within past 30 days (describe below)

Hospital and/or emergency room visits in past year (how many times, reason for visit, results)

Do you have any medical or mental health issues that would prevent you from fully participating in our program that requires full time work, school or community services with the ministry?

Are you currently or do you desire to apply for Social Security Disability?

Do you require special accommodations?

List medications currently taking and for what condition.

ADDICTION HISTORY

Can you pass a drug/alcohol test?

Check all areas that you have participated in within past 30 days

- tobacco (cigarettes/can)
- alcohol
- o drugs
- pornography
- o gambling
- unhealthy dating relationships
- abuse of prescription or pain meds
- o none

0	other				

How has the above addiction affected your life?

Are you willing to get help/quit?

LEGAL

Please check all that apply

- probation
- o jail/prison within past year
- o none
- Other:

Describe your charges and dates of incarceration *

Are you by law required to register as a sexual offender or predator? Regardless of fault, have you ever been removed, banned or had a restraining order filed against you? Explain.

If incarcerated, where are you currently serving and what is your charge and when is your expected EOS date?

If on probation, what is the name and contact information for your probation officer?

FINANCIAL

Please provide Monthly Income Information *

- Food Stamps
- Disability
- Social Security/Retirement/Pension
- Child Support
- o AFDC
- Employment/Unemployment
- o Help from family/Friends
- None
- Other:

What is your total monthly income? *

What are monthly expenses? *

- housing/rent
- utilities
- o food
- transportation (car/bus)
- cigarettes
- medicine/medical
- legal/restitution
- outstanding bills
- child support/alimony
- laundry
- o personal care/toiletries
- o none
- o Other:

What is your total monthly expense?

Chelsea House Program Fee Options

Check which payment plan you prefer to pay your program fees.

- \$15 nightly (staying less than one week)
- \$75 weekly (staying less than one month)

- \$300 monthly (staying longer than 30 days)
- Scholarship (need to apply for financial help)

Who will be paying for your Chelsea House program fees?

- family
- friends
- o church
- o self
- need help finding a sponsor (scholarship)
- o other:

Apply here for scholarship (need help paying program fees)

Briefly describe your situation, and why you feel a scholarship should be awarded to pay for your program fees. Include what you hope to accomplish during your stay at Chelsea House and how sincere you are to work the program. Scholarship is awarded based on funding availability, program compliance and only for a short period of time.

Emergency Contact

Please provide name, relationship and contact information

Name of agencies that have helped you within past year

List name of agency, contact person, contact number, reason for visit.

List a character reference who can verify your situation. (name, relationship, phone)

List another character reference who can verify your situation? (name, relationship, phone)

PERSPECTIVE

Do you have any special requests/needs when sharing a room with another woman?

What do you think is the best way to handle conflict?

Do you have any additional questions or comments?