

## Applying to Courageous House

Courageous House is more than a halfway house or shelter. It is a post-incarceration/recovery program that concentrates on helping you regain an independent, substance-free lifestyle. Our focus is on assisting you in integrating yourself into a healthy Christian fellowship. During your participation in the 6 month to two year program, you will be required to strive to become self-motivated to become a healthy member of the body of Christ and to actively cooperate with the **Courageous House** program rules in all ways, including:

Program payment is \$150.00 per week, with a \$15 incentive reduction for non-smokers and is due on Friday, by 7:00 p.m. Two weeks Program payment will be evaluated on each case at intake.

You will be required to review and accept the rules and regulations of the house.

Substance abuse of any kind will not be tolerated while you are a resident of Courageous House.

You must sign legal consent to the release of information, about you, between Courageous House and other agencies, doctors, and therapists, with which you are involved.

Your personal living area will be subject to inspection and searched at staff's discretion.

You will be subject to random drug screenings at staff's discretion.

You will continue to take as prescribed any non-narcotic prescription medication.

You will deal responsibly with your legal, financial, family and health issues.

You will be expected to find and maintain a job, or if legally disabled, volunteer your time in some way.

You will be required to participate in financial accountability programs.

You will be required to show proof of insurance, registration and a valid driver's license for any vehicle you use while a resident.

You will attend mandatory Church, Celebrate Recovery meetings and recovery groups.

You will share household chores, including some meal preparation.

Your progress toward your program goals will be evaluated weekly by the house staff.

You will be placed in a "Buddy" program for the first 30 days, to help you become familiar with the house programs and the local community.

We operate on a demerit system. If rules are not followed termination of residency can result.

**We take a relationship with God very seriously and you will be required to do the same. We hope to assist you in learning to apply the spiritual principles as given by God's word in your life.**

**We believe this is an opportunity for individuals to find a new way of life.**

**We also place great emphasis on responsibility. When you are given assignments, homework, etc., do them on time. Be ready for all groups. Remember, money and employment are not signs of recovery and can result in relapse. Recovery is an "inside job", and no matter how good you look on the outside, material and cosmetic things will not keep you clean. Our goal is that by learning to apply these principles in your life, you can become the Godly Person He intended and be a responsible and productive member of society.**

I \_\_\_\_\_, have read and understand fully that these rules and requirements are non-negotiable and are required for my opportunity to remain at Courageous House and participate in its transitional program. I do understand that although I may be given an opportunity to use mistakes as a learning lesson, violation of these rules, requirements, and the agreements of this application/contract can result in my immediate dismissal from the program and require me to leave the premise without delay upon the direction of the Executive Director or the Resident manager.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Initials \_\_\_\_\_

# Application for Courageous House

Date: \_\_\_\_\_

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

Street Address (Pre-prison, Pre Program): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Email: \_\_\_\_\_

Referred By: \_\_\_\_\_

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

DOB: \_\_\_\_\_ Soc. Sec. # \_\_\_\_\_

I, \_\_\_\_\_, agree to allow the House Committee of Courageous House to discuss my background and treatment with other professionals and agencies. I understand for the protection of myself and others there may be a need for the Board of Directors, House Committee or the staff of Courageous House to check on my legal standing and criminal background.

I also understand that I am giving permission for the House Committee and the staff of Courageous House to contact any and/or all names and facilities on this application.

I also agree to waive, release, and not to sue Joshua's Promise Ministries Inc., d/b/a Courageous House, its Directors, officers, or staff for any and all damages of any kind whatsoever suffered as a result of living at Courageous House.

I further specifically release Courageous House for any and all losses, thefts, damages, or injuries incurred while living at Courageous House.

Printed Name \_\_\_\_\_

Signature \_\_\_\_\_ Date: \_\_\_\_\_

## A. Present Status

What was happening that prompted you to seek residing at Courageous House?

Describe your emotional state and feelings about being here.

What problems do you want to work on while here?

Describe any long-term goals.

Where and with whom were you living before Prison/Program or coming here?

Where would you live now if not accepted here?

Do you have any health problems that require special care on your part? If yes, please explain.

Are you to your knowledge medically stable at the time? If no, please explain.  
Have you contracted Hepatitis C, HIV or any other transmittable disease?

Are you able to take care of yourself and able to respond to life threatening conditions? If no, please explain.

Have you been chemically free for 10 days? \_\_\_\_\_  
Last date you used any mood or mind altering drugs, including alcohol? Date: \_\_\_\_\_  
Do you think of yourself as an alcoholic, addict, or both? What makes you think that? (Give your own definition)

**B. Treatment History**

1. Medical/Psychiatric Hospitalization  
Facility Date Diagnosis

Have you tried to commit suicide? \_\_\_\_\_ If so, when? \_\_\_\_\_

2. Chemical Dependency Treatment (detox, inpatient, residential)  
Facility Date Diagnosis

3. Outpatient Counseling (Social Worker-psychologist-clergy)  
Facility/Counselor Date Diagnosis

4. Medications (List all prescribed medications for last year, including current Medications)  
Name of Medication Date Diagnosis and Doctor Prescribing Medication

List Facility that was a successful program for you: \_\_\_\_\_  
Have you used chemical, including alcohol, to overcome pain or depression? If so, list drugs of choice.

**C. Vocational History**

What is your usual occupation? \_\_\_\_\_  
Are you employed? \_\_\_\_\_ Occupation? \_\_\_\_\_ How Long? \_\_\_\_\_  
Do you like your job? \_\_\_\_\_ Do you get along with co-workers? \_\_\_\_\_  
List any special training, qualifications, or licensing.

List any Military Service:

List your employment history for the last three years

Company                                      Start date                      End date                                      Occupation

Company	Start date	End date	Occupation

Reason for leaving

Please describe the effects of drinking or drug use on your job:

**D. Legal (use separate sheet of paper if necessary)**

Arrests /Convictions/Lawsuits Date Status/Attorney/Probation Officer

Were any of these legal issues alcohol/drug related? \_\_\_\_\_

Any court cases pending? \_\_\_\_\_ Explain either/both

**E. Chemical History**

**ALCOHOL:**

How old were you when you had your first drink? \_\_\_\_\_

How old were you when you were first intoxicated? \_\_\_\_\_

How old were you when you first thought you might have a problem? \_\_\_\_\_

Drink of preference? \_\_\_\_\_

Quantity? \_\_\_\_\_ How often? \_\_\_\_\_

Where and when did you usually drink?

Did you drink alone? How often?

When and how long was your longest dry period?

Why/how did you return to drinking?

Do you think you can control your drinking?

When was your last drink? \_\_\_\_\_

Have you been involved with any 12 Step Program? \_\_\_\_\_ Which Program(s)? \_\_\_\_\_

**DRUGS:**

List all drugs used.

Age of first drug use: \_\_\_\_\_ Age when you first had problems: \_\_\_\_\_

Quantity: \_\_\_\_\_ Frequency: \_\_\_\_\_

Have you experienced any accidental or intentional overdoses? If so, when:

Usual place or places of use:

Longest clean period: \_\_\_\_\_ Date of last use: \_\_\_\_\_

Have you ever gone to N.A.? If so, when: \_\_\_\_\_

**F. Nutritional Assessment**

Do you have hypoglycemia, anorexia, bulimia, sickle-cell anemia? Please list:

Are you an over eater? If so, how long has this been going on?

List your binge foods: \_\_\_\_\_

**G. Leisure Activities – Special Interests**

List your favorite hobbies or forms of recreation:

How do you spend your free time?

Do you exercise? If yes, how?

Do you have any limitation or physical handicaps? If yes, please explain.

**H. Financial Status**

Sources and amount of income:

Are you in debt? How much?

To whom?

Problem areas: (Behind in payments, bankruptcy, other)

Please estimate the amount of money spent on alcohol and drugs:

Alcohol: Drugs:

Estimate the amount spent on the consequences of alcohol and drug use in the past two years:

**I. Cultural Background**

Where were you born? Raised?

Who raised you?

Religious preference: Do you attend services?

Describe family attitudes toward drinking and drug use:

**J. Family of Origin – Assessment**

	NAME	AGE	OCCUPATION
Father			
Mother			

If deceased, age at death: Mother \_\_\_\_\_ Father \_\_\_\_\_

Your age when parent passed

Please describe your parents and their relationship.

If divorced, when?

Describe your relationship with your parents

List sister, brothers (Including deceased, step or foster)

Name Age Sex Relationship/feelings toward each other

Did/do any of the above family members use alcohol or drugs? When and with what effect?

Do you feel accepted, loved, and cared for by your family?

Who in particular were/are you close to?

Was there respect for family member’s privacy at home?

What recreation or leisure activities did your family share? (Describe in full)

Have you lost love or support due to your drinking or drug use at any time? (Describe)

**K. Marital Status**

Married \_\_\_\_\_ Divorced \_\_\_\_\_ Never Married \_\_\_\_\_

How long have you been in this marital status? \_\_\_\_\_

Are you satisfied with this situation? Yes \_\_\_\_\_ No \_\_\_\_\_

If no, explain:

Do you have any children? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please list below:

Name of Child Age Where living With Whom

How would you describe your relationship with your spouse and children?

**L. General Social Data**

Any family deaths that affected you?

Were you a victim of sexual abuse? Describe

Were you a victim of any other abuse? (Physical, Emotional, or Neglect) Describe

Any other life crisis or losses? (Witnessed violence/tragedy, death of a pet)

Did you get help, use chemicals, or just survive these crises?

Please make any other statements or comments you would like to add to help us get to know you better.

## **Courageous House**

### Schedule

Orientation is a two-week process that starts immediately following the successful completion of the applicant's intake interview. This gives the applicant a firsthand look at who we are and how the program operates.

**We, in turn, are evaluating the man to see that:**

**He is committed to wanting help**

**We can provide the help needed**

<b>Hours</b>	<b>Monday thru Friday</b>
5:30 - 6:00 am	Quiet Time
6:00 - 6:30 am	Duties
7:00 - 5:30 pm	Place of Employment
6:00 - 6:30 pm	Supper Mon-Thur
7:00 - 8:00 pm	Class/ Meetings
8:00 - 11:00 pm	Personal Time
11:00 pm	Lights Out
<b>Hours</b>	<b>Saturday</b>
8:00 - 12:00	Community Service
12:30 - 7:00 pm	Family Visitation & Free Time
<b>Hours</b>	<b>Sunday</b>
10:30 - 11:45	Church
1:00 - 5:00 pm	Family Visitation & Free Time

**Curfew is 9:45 Sun.- Thur. and 10:45 Fri. and Sat.**

## **OFFENSES RESULTING IN AUTOMATIC TERMINATION**

### **Automatic termination offenses are immediate**

Unauthorized overnight: Residents are not allowed to stay out overnight without proper authorization from the house director.

Fighting: Any fighting of a physical nature is prohibited.

Weapons: Knives and/or any other weapons of a threatening nature are prohibited.

Theft: Any theft of Courageous House property, another resident's property, or within the Community.

Gambling: Any gambling on Courageous House property is prohibited.

Falsification: Falsification of any Courageous House document or any false statement to Courageous House staff/officers. Any resident caught signing the log for another resident will result in the termination of both residents.

Smoking: Courageous House is a smoke free facility,

Warrants, Arrest or Incarceration: Failure to provide at intake knowledge of any outstanding warrants, or arrest and incarceration while a resident. Courageous House recognizes that Drug Court Clients may periodically be incarcerated for periods of time, and will consider those instances on a case by case basis.

Alcohol or Drugs: The use or possession of alcohol or any other mind- or mood-altering substance at any time is prohibited. This includes Kratom, Kava, Salvia, K2 etc.

Test Samples: Failure to provide a urinalysis sample and/or breathalyzer test sample upon request by staff members.

Results of Testing: Positive results from any urinalysis and or breath testing by a staff member.

Programming Fees: Unwillingness to assume financial responsibility for Program fees.

Probation: Failure to provide staff with information and conditions of probation during intake or if placed on Probation while a resident.

Destruction of property: Willful destruction of property, at the House, a fellow resident's property or within the community.

I \_\_\_\_\_, have read and understand fully that these rules and requirements are non-negotiable and are required for my opportunity to remain at Courageous House and participate in its transitional program. I do understand that although I may be given an opportunity to use mistakes as a learning lesson, violation of these rules, requirements, and the agreements of this application/contract can result in my immediate dismissal from the program and require me to leave the premise without delay upon the direction of the Executive Director or the Resident manager.

Signature \_\_\_\_\_

Date \_\_\_\_\_

## **Courageous House Rules**

Remember that your way hasn't worked for you in the past. None of these rules are difficult, but they are necessary. Breaking of the rules can lead to a discharge from the program. The staff has full discretion in the interpretation of the rules. The staff wants you to work on yourself while you are here and these rules will be easy if you are working a good program. Keep in mind that you are in a program to help yourself, not a club.

### **GENERAL CONDUCT**

Rules and regulations are enforced by the director and assistant director on duty. Rules and regulations may be amended or updated as needed. It is the responsibility of the resident to adhere to and understand the rules and regulations. It is also the responsibility of each resident to inform staff of any situation that could result in an infraction of these rules.

The staff will not beg or plead with any resident to follow the rules and regulations. We will only ask one time that a task be done or a rule followed.

Insubordination will not be tolerated. If a resident is unable or unwilling to follow the rules, the resident will be required to make other living arrangements. Repetitive rule violations will not be tolerated, and are grounds for immediate dismissal. There are no exceptions.

### **LENGTH OF STAY AND PARTICIPATION REQUIREMENTS**

The minimum commitment is 6 months

And clients may make additional commitments for up to two years and will be determined on a case-by case basis. For the first seventy-two (72) hours in the house there are no visitors allowed with the exception of an approved sponsor.

### **PROGRAM FEES**

Provisions for the payment of program fees must be made for the resident's length of stay. The weekly program fee of \$150.00 is due no later than 7:00 PM Friday for the next week. Program fee will be prorated at intake only if entering the house once the week has begun. Residents are responsible for all program fees associated with their stay at Courageous House.

Refunds will not be issued at the time of discharge.

Termination for any reason will result in the forfeiture of all fees paid.. Refunds of fees will only be made for successful completion of current phase and only for any weeks paid in advance.



## **WEEKEND FURLOUGH / WEEKEND PROGRAMS**

All passes will begin on Saturday at noon, after the weekend chore has been completed and inspected. Passes will end at 9:00 p.m. on Sunday. Written requests for a weekend pass must be presented to staff for approval on Monday by 7p.m. to discuss at the house meeting. Eligibility for pass is based on the resident's behavior during the prior week and the resident's plans during the pass. Residents working on any shift on a Saturday must return from work before signing out on pass. Fees must be paid prior to any weekend pass being effective.

## **EVALUATION**

Each resident will meet weekly with the director or assigned staff for evaluation concerning his progress at Courageous House. Unwillingness to progress upon the established goals is cause for termination of the resident within twenty-four (24) hours, upon approval of the Directors. Automatic termination offenses are immediate. The director or assistants can issue corrective consequences. An infraction of any rule must be reported to the staff.

## **DATING**

If you are in a God ordained relationship that involves children and their children's mother upon entry to Courageous House, it may continue if it is morally sound and healthy for your continued recovery. If you are not in a relationship at the time of admission you may not enter a relationship. Dating will not be permitted until the completion of phase II (One year). Permission to date will be determined individually according to level of maturity and responsibility with personal recovery and that certain life skills goals have been met.

## **PROGRAM CONDUCT**

Program participants are not to fraternize or socialize where alcohol and/or drugs are being served or used (this includes the homes of family and friends). Residents are not to enter bars or liquor stores at any time, for any reason.

## **TRANSPORTATION/PARKING**

Residents who have a car at Courageous House, must have a valid driver's license, valid license plates, current registration, plate number, and provide proof of insurance. Residents will park in specified area only. Residents are not permitted to allow other residents to drive their vehicle. Transportation may be provided to and from work For the first thirty days. Transportation will be provided if necessary for a fee.

## **VISITORS**

Visiting hours are from Saturday and Sunday visiting hours are 1:00pm to 7:00pm. Guests are allowed in by resident's invitation only. Guests are to remain in the Common Living Room area at all times. Guests will be asked to leave during meal times, house functions and groups. No romantic visits are allowed on the premises.

## **RESIDENTS/STAFF ROOMS**

Residents are not permitted in other resident's rooms. Residents are not permitted in staff rooms. Residents are not to close any bedrooms doors during the day. No burning of anything is allowed (i.e. candles, incense, simmering pots, etc.).

## **MEDICATIONS**

Any medication in your possession, prescription or otherwise, must be turned over to the house director, and will be provided for you to take at the prescribed times.

## **CURFEW**

Curfew hours are 9:45 pm Sunday through Thursday and 10:45 pm Friday and Saturday. Lights out will be 1/2 hour after curfew; lights out includes radios, MP3 Players and all electrical supplies. Residents are required to be in bed at this time, not preparing for bed. Residents are not to leave the house after curfew and before morning meditation except to go to work. Residents on pass may return after curfew for explainable emergency circumstances only. Call the office first if at all possible.

## **HOUSEHOLD DUTIES**

A resident will be assigned household duties, and will be expected to do them each and every day. When more than one resident is assigned to a chore, all assigned residents are responsible for the completion of that chore.

## **PERSONAL APPEARANCE and DRESS CODE**

A resident is to keep his personal appearance neat and be dressed in normal street attire throughout the waking hours. Clothing with drug, alcohol, or bar advertising or any demeaning slogans is not permitted. Shoes, slippers or sandals must be worn at all times. Personal hygiene is expected, and if necessary, will be addressed by staff.

## **ELECTRICITY and TELEVISION**

Residents are to turn off all lights, fans, radios, water and appliances when finished using them or when leaving a room for an extended period of time. Watching television is only allowed between 4:00pm and curfew Monday through Friday and 7:15am through curfew Saturday and Sunday. Recovery and step tapes may be viewed during the day with permission from the house director. Residents are not permitted Computers, personal televisions or DVD player's in their rooms.

## **MEALS**

Residents are to prepare their own breakfast and lunch. A family style sit down dinner will be served Monday through Thursday with residents rotating Cooking responsibilities; all residents are required to be at dinner unless the director has approved other arrangements. Food and/or snacks are not permitted in resident's rooms.

## **ROOM and COMMON AREA INSPECTIONS**

Residents must make their bed every morning. They must keep their rooms neat and clean. The staff, at their discretion, will make daily inspections. If it is deemed that there is an infraction of the rules as a whole, or the house is found to be dirty, all weekend passes will be suspended.

## **PHONE CALLS, AND CELL PHONES**

Residents are allowed cell phones. This a privilege, not a right. The resident unlisted Telephone number is available from staff. No phone calls will be allowed after curfew and before morning meditation, except in regards to work. Tell those who would be calling for you, the times not to call. Length of each phone call should be respectful for the use of all residents. The resident phone is always answered with "Hello this is Courageous House". Only residents may answer and use the phone. Residents are not allowed to give any information about another resident over the phone. If a resident is not able to come to the phone, you may only say "May I take a message?" or "I can take a message." Residents must get the resident receiving a call and/or take a message and put it on the telephone bulletin board. Residents may use the office phone for calls with staff permission.

## **LAUNDRY**

Residents are responsible for their own laundry. Laundry should be done in a full load, as opposed to one or two items of clothing. The washer and dryer are not to be used before 9:00am or after curfew. Laundry is not to be left unattended, and machines are to be cleaned out after every use. The last load may start at 9:00 p.m. Sunday through Thursday and 10:00 p.m. Friday and Saturday. House issue sheets and towels must be washed weekly.

## **SMOKING**

Courageous House is a tobacco free facility

Each resident is required to clean up after themselves throughout the day coffee cups, etc.; failure to maintain these areas will result in discipline.

## **PROGRESS REPORTS**

Residents are to make themselves available to the Director or appointed staff during the weekly schedule times to do their progress reports. Residents are to bring their meeting sheet, completed budget, and any alternative meetings/groups, sheets to turn in at the time of the review.

## **CHILDREN**

The Director will review requests on an individual case-by-case request.

## **WHAT TO BRING:**

Due to limited closet/drawer space, only necessary clothes will be permitted. Example: you will need 2 or 3 outfits appropriate for church and outside meetings. You will need work clothes, jeans and tee-shirts, 1 pair of casual l/tennis shoes and 1 pair of work shoes. All under clothes, socks and personal hygiene items. If available, bring a bible, 3-ring notebook or folder, paper and pens.

## **WHAT NOT TO BRING:**

NO drugs or pills of any kind except aspirin, unless staff approved.  
NO pornographic or suggestive material (including pictures of wives/girlfriends).  
NO clothes with advertisements of drugs or alcohol.  
NO secular (non-Christian) literature or music (Christian, jazz and classical are o.k.).  
NO body building products. Steroids, Creatine, Pre workout supplements.  
NO valuables, we will not be responsible for lost or stolen items.

## WHAT IS EXPECTED OF YOU:

COMMITMENT to growth and a willingness to fully work on all of your problems.

HONESTY to share from your heart and to be truthful regarding your past.

SINCERITY to work your program. We will help you as long as you are working a program.

RESPONSIBILITY to complete all assignments, work a full-time job, and budget your income.

ACCEPTANCE to change and be willing to listen and practice suggestions.

ACCOUNTABILITY – a willingness to be held accountable for ALL of your actions & attitudes.

This is a committed, rigorous program that will not tolerate excuses for non-compliance. Addiction and criminal thinking are fatal problems causing devastating effects on individual lives, families, and communities. We will treat them as such and be passionate about addressing them and correcting them with intentional measured and accountable behavior.

## GENERAL RULES:

1. No defiance of staff or senior brothers.
2. No profane or loose language.
3. No drugs, alcohol or medicine that contains alcohol (cough syrups, mouthwash, etc.)
4. Drug tests are done regularly. If you come up dirty, you WILL BE discharged.
5. Follow all schedules without question.
6. Attend all functions graciously and gratefully.
7. Be to classes, groups & quiet time 5 minutes before they start with appropriate materials.
8. Bible, pen and notebook is required at all classes/meetings.
9. Notes must be taken in all classes. (Must be left on top of bed every morning.)
10. You are expected to respect/observe and participate in “Quiet time” activities each morning.
11. Leaving the living quarters before 5:00 a.m. is permitted only with prior staff approval.
12. If an argument arises, try to resolve it, if you can't, call staff immediately. (Matt. 18:15-17).
13. There is NEVER any need for a physical confrontation.
14. No bragging about the past (war stories), they only bring others down & make you look silly.
15. Respect each other's recovery process. Careful not to discourage others.
16. Dissatisfied talk or talk of leaving only serves to upset others.
17. Notify staff when you see someone feeling extremely troubled. **Help your brothers succeed.**
18. No health food medicines without staff approval some contain MaHung or Ephidrine.
19. Report to staff any drugs or other contraband. **Helping others from falling is not betrayal.**
20. If you disregard the rules & leave, please take your belongings. Courageous House is not responsible after 24 hrs.
21. Clients on restriction who must work on Saturday must notify staff & sign out before leaving.
22. If you are not on restriction, Saturday free time 1pm-to curfew with completion of sign-out log.
23. No wrestling or rough playing.
24. Only Christian, jazz or classical music.
25. All rented movies must be PG13 or prior approval by staff. Only 2 rentals per weekend.
26. No astrology, witchcraft, occult or new age related items (crystals, pyramids, tarot cards, etc.)
27. No card playing, no gambling.
28. All personal hygiene items are kept in your room, including your towels.
29. No hats worn inside the buildings.
30. Any personal food items or containers must be properly marked with your name or its free to all.
31. Sleeping will not be permitted from 8:00am until 4:30pm.
32. A/C and/or Heat to be turned on with staff permission only.
33. If you have a day off, you must stay at Courageous House, notify staff if you have errands to run.
34. Expect to receive consequences for your actions. Break rules, receive a disciplinary action.
35. Own up to your own responsibilities.
36. Take your own DMI. Don't worry about what others are doing unless it affects someone's sobriety.
37. All homework must be turned in on time – NO exceptions.
38. Do whatever a senior brother or mentor asks of you without question.

39. Clients are not allowed to have personal items, such as furniture, pets, exercise equip, etc.
40. Staff housing is off limits, except by invitation.
41. Clients are not to counsel each other, but rather to share with staff who is equipped to help.
42. If you leave the program early/not on good terms, you will NOT be allowed to contact the remaining clients by mail, phone, or visitation. (You may re-apply to the program in 30 days.)
43. Vehicles are permitted providing they are properly registered, insured & your license is valid.
44. All clients ride together to groups & church or carpool in a caravan only.
45. All incoming mail is distributed to you and subject to review by staff.
46. All client mail must be addressed to:  
     Your Name  
     c/o Courageous  
     House 7828 SW  
     Wildwood Dr.           The telephone number you give to family and prospective employers is (772) 888-3901  
     Stuart, FL 34997
47. Respect the rights and belongings of others.
48. Respect the authority within the house. If you disagree with what you've been told, be willing to do it anyway. and discuss the matter later with staff.
49. Avoid arguments – but don't stuff – DEAL with your emotions correctly.
50. Do NOT gossip. It tears down others and yourself.
51. Avoid sarcasm and off-color jokes – they are not Christ like.
52. Learn to live with each other's fault's, look for Jesus in everyone & be respectful of others.
53. Keep your daily attitude positive, be thankful and appreciative.
54. Speak courteously, seek after peaceful relationships.
55. Encourage positive group spirit, build one another up, not put down.
56. Take care of the property & facilities. This program belongs to God & you should respect it.
57. Be considerate of other's needs. If you can help someone, ask staff for permission.
58. Negative talking is totally unacceptable; in particular, talking about staff is not permitted.
59. Profanity is absolutely NOT in our vocabulary – a bad habit that is not edifying.
60. Love yourself, but consider one another more important than yourself. (Phil. 2:3).

### **HOUSING RULES:**

61. DMI, journal & class notes are to be left in the journal box every day for staff review.
62. Lights are to be turned off when there is no one in the room.
63. Each person's space is private and is not to be violated.
64. We encourage you not to lend or borrow at all. If you must, staff needs to approve it.
65. Lights out at 11:30 p.m.
66. All lights out in rooms at scheduled time – not later.
67. Keep bedrooms clean and neat at all times, making bed tight when you first arise.
68. Hang towels neatly on the bedpost or in a designated area.
69. Beds must have a fitted sheet, flat sheet and/or blanket on at all times.
70. Dresser tops clean & neat. Toiletries are to be kept in container or bag not on dresser.
71. Closets kept neat with dirty clothes out of sight (in laundry bag).
72. Trash cans in living quarters will be emptied daily.
73. Drawers kept neat, clothes folded.
74. No food or drinks allowed in the sleeping areas.
75. No shirts or hats hanging on bed posts.
76. Because we are cleaning ourselves, only Christian, jazz or classical music.
77. No posters or pictures hung on walls without staff approval. Use wall hanger for pictures.
78. Remain in class, activities, dinner table, etc. until they are fully complete.
79. Dress appropriately. No pants below the waste, no ripped clothes, collared shirts & socks are to be worn to church.
80. No one is allowed in another resident's room without staff permission.
81. No overly loud music or television, - be courteous of your roommates.
82. You are responsible for washing your own laundry including your bedding.

83. Use time efficiently (bathrooms & showers), conserve energy and supplies.

**SICKNESS:**

84. When sick, you may only miss class or work if approved by staff & you must be in bed.

85. If you are too sick to work, you are too sick to have free-time. You will stay in bed for the day.

86. All medication is kept and administered by staff.

87. For emergency visits to doctor or hospital, client will be financially responsible.

**VISITATION AND PHONE PRIVILEGES:**

88. NO overnight furloughs except as approved by staff

89. Visitation can begin the third weekend after admission.

90. Visitation is limited to Saturdays 1pm to 7pm and only 2 immediate family members.

91. Staff must be notified immediately of any guests on property.

I \_\_\_\_\_, have read and understand fully that these rules and requirements are non-negotiable and are required for my opportunity to remain at Courageous House and participate in its transitional program. I do understand that although I may be given an opportunity to use mistakes as a learning lesson, violation of these rules, requirements, and the agreements of this application/contract can result in my immediate dismissal from the program and require me to leave the premise without delay upon the direction of the Program Directors.

Signature \_\_\_\_\_

Date \_\_\_\_\_