



Phoenix House Recovery Home Home Entrance Application

Fax: 208.545.7917

Call: 208.918.8200

Are you applying to the Men's Home or Women's Home

NAME: _____ DATE OF BIRTH: _____

DRIVERS LICENCE: _____ STATE: _____

PHONE #: _____ EMAIL: _____

EMERGENCY CONTACT: _____ RELATIONSHIP: _____

ADDRESS: _____

CONTACT PHONE #: _____

MEDICAL INFORMATION

How long have you been sober? _____ Drug(s) of Choice: _____

Which 12 step meetings do you attend? (AA, NA, CA, etc): _____

Sponsor Name and Phone #: _____

List medical conditions: _____

List prescription medications: _____

RESIDENT INFORMATION (Please circle Y or N for the following questions)

Have you ever lived in a Sober Living home? Y / N If yes, which one?

Are you involved in any legal action? Y / N If "Yes" please explain:

Are you required to register as a sex offender? Y / N

Phoenix House of Boise is Not Currently Permitting Sex Offenders

Have you ever been convicted of arson? Y / N A felony? Y / N How many? _____

Source of income: _____ Salary (Weekly/Monthly): _____

Move in fee of \$70.00 must be paid on or before the day of arrival. Requested Move-in Date: _____

Have you ever been charged with any violent crimes in Idaho or elsewhere? Yes / No

If yes, please describe IN DETAIL the events of all the violent crimes. Use a separate page if necessary. (We consider Violent Offenders on a case-by-case basis.)

IMPORTANT NOTICE:

I have read the above notice and understand that I am applying for entrance to Phoenix House Sober Living as a member of a recovery home. I agree to abide by the responsibilities and requirements of the house and fully subject myself to the rules of the home, which include periodic/random drug testing.

I understand that I am subject to immediate expulsion from the home if any of the following occur:

- 1) I use alcohol or drugs (other than prescribed medications);
- 2) I engage in disruptive behavior (continued patterns of irresponsible behavior are considered disruptive behavior);
- 3) I fail to pay my monthly dues.

I understand that if I leave voluntarily I will submit a 3-week verbal notice to vacate to the house manager,

By signing below, I certify that the information contained in this application is true. I have read and understand the Phoenix House Sober Living rules and policies. I understand and accept the above conditions set forth for membership to Phoenix House Sober Living, and agree to abide by said conditions should I be selected as a resident.

SIGNATURE of APPLICANT: _____ DATE: _____

Please fax applications to:

Phoenix House of Boise
Fax: 208-545-7917