

Date: _____

Name: _____

Department: _____

Address: _____

City, State, Zip: _____

Greetings,

Thank you for your recent inquiry into A Fresh Start to a New Beginning Re-Entry Program. It is our pleasure to serve you and take this opportunity to tell you about our program. We have provided our intake application, personal information questionnaire, basic rules of our program, and descriptions of our program and services.

AFSNB offers a short-term, 120-day, which includes housing, one-on-one sessions, support groups, job readiness and supportive services contact information.

AFSNB's aim is to serve our clients, helping them overcome life issues through inspirational principles which will prepare them to transition back to a free society and maintain gainful employment. Our aim is also to serve the courts who refer residents to us by enforcing restrictions and reporting their progress upon request.

If you apply for enrollment in our Re-Entry Program, you will go through a screening process and personal interview either by phone or face-to-face. You must have been free of drugs and alcohol for the past six months and agree to remain that way. You must also agree not to abuse prescription medications of any kind. At the present time, our program does accept sex offenders or those who have been convicted of violent offenses.

The initial length of our program is 120 days. However, upon completion, residents with a good attitude and work ethic may apply for an extension.

To enter the Re-Entry Program, you must submit a fully completed application which will determine your eligibility. You must include all the information listed below and return it in one package:

- Re-entry Program application
- A 10-page autobiography of your life
- Copies of your TOMIS (Tennessee Offender Management Information System) criminal, medical and mental health records
- Memorandum of Understanding with the referring agency

- Counselor/ pre-release coordinator recommendation, detailing your character, conduct and any disciplinary problems while incarcerated • Your work history or resume
- Your first month service fees of \$200 (2 weeks before you arrive)

Please don't return the program application until you have gathered all of the requested information.

You must make arrangements with me for a phone interview within ten days after you send your package. My phone number is (901) 650-3107.

If we determine that you are eligible to enter the Re-Entry Program, you will be permitted to come to A Fresh Start to a New Beginning faculty location. Before being admitted into the program, you must test free from alcohol and illegal drugs.

If you pass these tests, you will be admitted into the program. However, if you fail any subsequent alcohol or illegal drug tests, you will be immediately dismissed, and the proper authorities will be notified that you failed to comply with AFSNB's program requirements.

In order for your time in the Re-Entry Program to be profitable, you must be willing to:

- Be in the requiring mandatory attendance to classes and chapel services
- Comply with the program rules or chore assignments
- Refrain from the use of alcohol or any kind of illegal drugs
- Complete the eight steps of the Celebrate Recovery program
- Pay the first month service fee of \$200 and \$100 every 2 weeks thereafter

If you are unwilling to abide by these guidelines, please do not apply.

Thank you again for your interest in the Re-Entry Program. We look forward to hearing from you.

Respectfully,

Jerico Marion, Director

Program Overview

A Fresh Start to a New Beginning Re-Entry Program is a very informative program for ex-offenders who truly desire to change and are transitioning back into society. Those who are willing to diligently seek employment are the first to be considered. The program's purpose is to give men an opportunity to leave dysfunctional lifestyles for healthy, functional relationships with family, themselves and others. Its focus is on applied positive healing of the total person and recovery from past hurts, habits and hang-ups.

Residents receive a unique blend of life skills, class work activities, work therapy, family involvement and mindset activities.

Application Procedures and Requirements

- In order to be admitted, you must thoroughly complete and sign this application and mail or fax it to the Intake Counselor.
- You are responsible for contacting the Intake Counselor with questions regarding your intake status.
- You must complete a face-to-face or phone interview with the Intake Counselor before being admitted into the program. Providing false or misleading information may result in denied admission.

Requirements for Admission

- Re-Entry Intake Application
- A 10-page autobiography of your life
- Copies of your TOMIS (Tennessee Offender Management Information System) criminal, medical and mental health records
- Memorandum of Understanding with the referring agency • Counselor/ Pre-Release Coordinator recommendation detailing your character, conduct and any disciplinary problems while incarcerated
- Work history or resume
- First month service fee of \$200 and \$100 every 2 weeks thereafter (upon being admitted into the program)

Eligibility for Admission To be a candidate for admission to the Re-Entry Program, you must:

- Be over the age of 18
- Agree to abide by all guidelines, fully participate in all aspects of the program, and refrain from any activity staff deems contrary to recovery or growth

- Be clean from the use of drugs or alcohol of any kind for the past six months and agree to stay that way
- Be willing and able to commit to an uninterrupted 120-day work program
- Be physically able to climb on a top bunk and perform work assignments such as housekeeping, kitchen, or other required duties
- Be medically able to fully participate in a program that does not provide medical care, dental care, or assistance with medications
- Remain on mental health medications (if applicable), stable and under the care of a physician for accountability.
- Be willing to refrain from the pursuit of romantic or sexual relationships other than with a legally married spouse while in the program
- Be willing to pay a program service fee of \$100 every 2 weeks on time
- Refrain from any form of illegal financial gain, including selling drugs, hustling, or panhandling
- Be willing to actively and diligently seek work

Print Name: _____ Signature: _____

Date: _____

Violation of the above guidelines may result in disciplinary measures and possible dismissal.

House Rules

- Gossiping, cursing, complaining or negative talk do not is not allowed.
- Gang attire, grills, piercing or gang-related culture are not allowed on or off property. Clothing with drug or alcohol logos is not permitted.
- All clothing must be worn in traditional fashion. Pants must be pulled up onto the hips and may not be worn in a manner meant to convey gang affiliation.
- Racist materials, conversation, or attitudes will not be tolerated. Music, movies, and literature of an overtly sexual or violent nature or that glorify drugs and alcohol will not be allowed.
- Treat others with the courtesy and respect that you would like to be treated.
- You must submit to and obey those who have the responsibility to make this a safe place.
- No smoking in the building. Smoking is allowed only in the designated smoking area on the east side of the building – NOT in front of the building or in the parking lot.
- No loitering or hanging out in front of the building, the parking lot, or the park across the street. You are either in the building or somewhere off the property. No exceptions.
- Use of cell phones is not allowed in the dorms after 'lights-out' (10 p.m.), and they must be turned off after midnight.
- The lounge and recreation area will be open until midnight.
- Your bed must be made before you leave the dorm in the morning.
- All personal belongings, including bags, must be kept neatly in your assigned cubicle. Nothing will be allowed to hang on the outside of the cubicle.
- Theft, vandalism, fighting or threatening behavior will be cause for ***immediate dismissal***.
- Selling, loaning or borrowing money of any kind is ***strictly prohibited***.
- Visitors will be limited to legally married spouses and immediate family members. All exceptions require the pre-approval of staff. Visitors will not be allowed in the residence area: dorms, kitchen, or lounge at any time. Visitors must be seen in the front lobby area during its normal working hours. No exceptions.
- After your first 3 weeks of the program, you must actively and diligently seek employment. You will be given direction for possible employment.
- Personal vehicles are allowed with proper licensing and insurance.

Print Name: _____ Signature: _____

Date: _____

Violation of the aforementioned guidelines may result in disciplinary measures and possible dismissal.

Rules for Passes

- Overnight passes will be allowed on the weekends after your first 30 days in the program.
- During the first week you are only allowed to go to pre-approved Board of Probation & Parole meetings.
- There will be a 10 p.m. curfew each day. Returning late will result in a strike and may be grounds for dismissal.
- Passes must be signed by the Director or a Supervisor when you return.
- You are required to sign out each time you leave the building and sign back in when you return. The Program Director or Supervisor must know where you are at all times.
- You will only be able to leave with or stay with immediate relatives. Proof of relationship will be required.
- All passes need to be confirmed and signed by the Program Director or Supervisor no later than 72 hours in advance.
- Assigned chores must be completed in a satisfactory manner before being approved for a pass.
- You will be subject to a drug and alcohol test upon your return.

Print Name: _____ Signature: _____

Date: _____

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Personal Items

You are allowed to have items that staff deems conducive to recovery and Christian growth. You are responsible for the management of your own money. However, you may choose to participate in the Resident Savings Fund account. The Mission will not be responsible for theft of items.

Your basic necessities will be supplied. However, you may bring your own personal items as long as they fit neatly in your assigned cubicle. Cubicles are 7' tall x 2' wide x 2' deep with a clothes rod.

Mental and Medical Health

A Fresh Start to a New Beginning is not a hospital or mental health facility, nor does it provide these services to our clients beyond assisting with appointments needed to maintain medication. If you have an appointment, the appointment card request to be submitted as soon as you are aware of the appointment. A 72-hour notice is required however this rule can be adjusted.

Print Name: _____ Signature: _____

Date: _____

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Re-entry Intake Application

This form must be completed by the candidate for admission.

Personal Data

Name: _____ Birth date: _____

Address: _____ City: _____ State: ____ Zip: _____

RNI No.: _____ Religious/Denominational Preference: _____

Occupational Background: _____

Emergency Contact: _____ Emergency Phone Number: _____

Why do you want admission to the Re-entry Program?

List your past addictions and the last time you used:

Alcohol _____ Amphetamines _____

Gambling _____ Self abuse _____

Sex _____ Heroin _____

Cocaine _____ LSD _____

Marijuana _____ Opium _____

Sedatives _____ Psychotropics _____

Inhalants _____ Tobacco _____

Spice/GC/K2 _____ Methamphetamines _____

Have you ever been in a recovery program before? _____ If so, when? _____

Who referred you to A Fresh Start to a New Beginning? _____

Have you ever been treated for an alcohol or drug addiction before? __ Yes __ No

If so, where, when and how long did you stay in each?

Marital Status:

Co-habitation Divorced Married Separated Widowed Single

Number of children: _____

Health Issues

List physical disabilities:

Heart Disease Type 1 Diabetes Type 2 Diabetes Seizures Epilepsy

Others: _____

Have you tested positive for any of these communicable diseases:

Tuberculosis H.I.V. Hepatitis of any kind

List any medications you are ***supposed*** to be taking and their purpose:

Do you have any other medical problems? If yes, explain:

Do you have any type of health insurance? Yes No

Mental Health Issues

List any mental health treatment (give diagnosis, if known) and any medications prescribed:

List dates of any suicidal actions in the last five years: _____

List any family or relationship problems you are currently experiencing:

Do you have homosexual tendencies? Yes No

Justice System

Probation/Parole Officer's name and telephone (if applicable): _____

List any court cases pending: _____

List your record of criminal charges, jail or prison time (if applicable):

Have you ever been accused of child molestation? Yes No

Are you a sexual offender? Yes No

If yes, in which city are you registered? _____

Have you ever been convicted of a violent crime? Yes No

Are you required to pay child support? Yes No

Are your payments current? (Explain): _____

Education Highest grade level completed: _____

If you did not graduate from high school, do you have a GED? Yes No

List colleges or vocational schools and degrees attained: _____

Finances

List the monthly amount and source of any income you have (Disability, SSI, etc.):

Who will finance your medical needs? _____ Phone number: _____

Do you agree to comply with all the requirements for admission as listed in this application?

Yes No

Are you able to and do you commit to completing 120 days of uninterrupted Re-Entry Program at A Fresh Start to a New Beginning? Yes No If not, why? _____

Are you physically and mentally able to fully participate in all aspects of this program, including work assignments? Yes No

I have read and personally completed all pages of this application, and I agree to the terms and conditions which it contains for my admission to Memphis Union Mission's Re-Entry Program. Falsifying information given on this application may be grounds for dismissal from our program. In addition, it may preclude you from entering other Mission programs.

Print Name: _____ Signature: _____

Date: _____

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RELEASE OF INFORMATION

To Whom it May Concern:

I hereby authorize A Fresh Start to a New Beginning to secure information from, and/or release information to, any person, corporation, society, organization, governmental agency, institutions, or any other entity regarding my case records and/or my circumstances.

I also hereby authorize any person, corporation, society, organization, governmental agency, institutions, or any other entity to release to A Fresh Start to a New Beginning any information regarding my case records and/or my circumstances.

My case information will remain available indefinitely to the person(s) or agency(ies) indicated above. A copy of this release shall be as valid as the original.

You must sign this Release of Information form and send it to the Records Department at the prison in order to have their medical, mental and criminal records released.

Print Name: _____ Signature: _____

Date: _____

Violation of the above guidelines may result in disciplinary measures and possible dismissal.

DISCIPLINE PROCEDURES

Disciplinary Rules

There are rules for program participation. We have designated five rules for which there are strict guidelines for immediate dismissal from our programs. These are:

- Use of any drugs or alcohol after entry into our programs
- Tampering with the integrity of our drug testing procedure
- Theft of property
- Threats or acts of violence
- Failure to comply with requirements for passes

You will be dismissed from the Re-Entry Program if you break these rules, and the appropriate authorities will be notified immediately. In the case of a relapse on drugs or alcohol, you may have the option of entering a recovery program.

There are other infractions which are of a more minor nature, but those rules are just as important to the smooth operation of our program. Repeated violations of these rules are grounds for the discipline of our residents short of dismissal from the program.

Violation of Rules

Incidents which require written reports are called strikes and will be placed in your file.

Consequences include any other violations of the program rules which require a written report by the Executive Director. An incident report is to be included in your file on a red sheet of paper.

If you obtain three strikes within the 90 days, you will be dismissed from the program and the proper authorities will be notified. After 3 weeks of no other consequences the last consequence will be removed.

I have read these expectations and I understand them and will abide by them.

Print Name: _____ Signature: _____

Date: _____

Violation of the above guidelines may result in disciplinary measures and possible dismissal.