# Rochester Community Housing Program Application

Thank you for applying to the Damascus Way Rochester Community Housing program! Please be sure to fill this application out completely. Carefully read and sign the Resident Housing Covenant. When completed, send either by email to nick.abbott@damascusway.com or by mail to 1449 4th Avenue SE Rochester, MN, 55904. After we have received your application and signed Covenant, we will review your application, send a letter verifying we have received the documents, and contact your caseworker/counselor to plan out the next steps in the process, which may include an interview.

**Personal Information**

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| **Name:** (First) (Last) (Middle)  |

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| **Date of Birth:** |  | **Today’s Date:** |  |

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| **Race:** |  **Black** |  **Native American** |  **Hispanic** |  **White** |  **Other** |

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| **Where do you call home?** |  |

**Incarceration History**

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| --- | --- |
| **Current Facility Name** |  |
| **Current Facility Address** |  |
| **Recent County of Conviction** |  | **Release date:** |  |
| **Caseworker/Counselor** |  | **Phone #** |  |
| **Probation/Parole Officer** |  | **Phone #** |  |
| **List date and nature of all convictions** |
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| **Have you ever applied to or participated in the Damascus Way program?** |  Yes  No | **If yes, when and which location** |  |

**Medical History**

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| **Do you have any major medical issues?** |  |
| **Are you taking any prescription medications?** |  |
| **Do you have any addictions?** |  Drug  Alcohol  Other (Gambling, Pornography, etc.) |
| **If yes, what is your drug of choice** |  |
| **Have you ever had a mental health evaluation** |  Yes  No (If yes, when) |
| **Are you being treated for any mental health condition?** |  |

**Personal History**

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| **How did you hear about Damascus Way?** |
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| **Why are you interested in being a resident at the DW Community Housing Program?** |
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| **What does your support network consist of in the Rochester, MN Area?** |
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| **What are your goals when you get to Damascus Way:** |
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| **Work History/Job Skills:** |
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| **Tell me about your faith journey:** |
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Please ensure that you have fully completed the Community Housing Program Application, read and signed the Program Housing Covenant. Thank you again for applying and we will contact you and/or your Caseworker/Counselor regarding your application when we receive it.

**Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_ /\_\_\_\_ /\_\_\_\_\_\_\_\_\_\_\_



 **DAMASCUS WAY COMMUNITY HOUSING**

**Program Housing Covenant**

Damascus Way Rochester’s Community Housing Program is a program that provides affordable housing and services in a safe, Christian environment. Residing at Damascus Way involves a commitment to being in healthy relationships, participating in healthy activities, and taking care of your personal responsibilities.

As a resident of Damascus Way Rochester’s Community Housing Program, I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, agree to commit to the following…

* I will pay my Program Fees on a monthly basis and on time. (Monthly payments are $500.00 and are due the 1st of each month. All late payments received after the 5th of any given month will incur a penalty of $10.00 per day.)
* I will work a full-time job while residing at Damascus Way. If I am unable to work I will volunteer my time at a local church, food shelf, or other civic organization.
* I will attend at least one support group per week – Church, AA, NA, Men’s Group, Bible Study, etc.
* I will attend ALL programing while residing at Damascus Way to include, House Meetings, and Work Days.
* I will be subject to Staff walk-through’s weekly to ensure the apartment is well maintained and clean. (Apartments are subject to searches by staff at any time.)
* I will not have any visitors in the Damascus Way Apartments.
* I will not use any tobacco products, e-cigs, or vaporizers in the apartment. (The only smoking area is on the patio outside of the 1449 building.)
* I will abstain from the use of alcohol, illegal drugs, abuse/misuse of prescription drugs, and any other substance abuse to include medical marijuana or CBD products.
* I will be subject to random UA’s and BA’s and refusal will result in immediate termination
* I will not have pornography (*ANY* material that is sexually suggestive in any manner), music that contains profanity, or movies with explicit sex scenes and/or drug/alcohol use.
* I will contribute to the care and maintenance of the apartment and its surroundings. I understand that my apartment must be kept clean at all times. (Every resident will be assigned a house job and will agree to do their house job to the expectations of Damascus Way.)
* I will inform the staff if I am going to be away from the apartment for more than 3 days.
* I will report any damages to the apartment or furnishings immediately to Damascus Way staff. (Damages observed but not reported will become the financial responsibility of each person residing in that apartment.)
* I will inform Damascus Way staff of my plans to vacate my apartment at least 30 days prior to doing so.
* I will maintain an active Driver’s License if I intend to have a vehicle on the Damascus Way Rochester’s Community Housing property.
* I will maintain active registration and insurance on any vehicle I have in my possession while residing in the Damascus Way Rochester’s Community Housing. (All residents are authorized ONLY one vehicle while in the apartments unless authorized by the Damascus Way Staff. There will be no trailers, boats, personal watercraft, or atv/utv type vehicles stored on the Damascus Way Rochester’s Community Housing property.)

I have read the above covenant and my signature below means I agree to abide by this covenant. I understand that I do not follow through with the expectations in this covenant I may be asked to leave the Damascus Way Rochester’s Community Housing Program.

**Resident Signature:**   **Date:**

**Staff Signature:**  **Date:**