



List **ALL** Previous Incarcerations (use a separate sheet if necessary):

Date	Offense	Sentence	Time Served	Institution

Educational Background:

Dates of Enrollment	Educational Institution (name and address)	Highest Year or Degree Completed

Work History (Please also include current DOC or FBP positions also. List last employer first.):

Dates of Employment	Employer (Company Name, Supervisor, and Address)	Type of Work	Your Responsibilities	Reason for Leaving	Honors/Awards

Have you been tested for HIV?  Yes  No Results? \_\_\_\_\_

Have you been tested for Hepatitis C?  Yes  No Results? \_\_\_\_\_

Have you been tested for any other highly contagious or communicable disease?  Yes  No Results? \_\_\_\_\_

Do you smoke cigarettes?  Yes  No How long? \_\_\_\_\_

Are you now taking any medication?  Yes  No If yes, what? \_\_\_\_\_

Do you have any food/pet allergies?  Yes  No If yes, what? \_\_\_\_\_

Marital Status: (Circle One)      Single      Married      Widowed      Separated  
    Divorced      Remarried      Living common law

Name of Spouse		Spouse's Age	
Address			
City		State	Zip
Spouse's Home Phone	Years Together / Years Married		Date of last contact with spouse

Have you or your spouse filed for divorce?  Yes  No

If you are divorced, or in the process of a divorce, what was the cause of the break-up?

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Are you presently in a romantic relationship (either emotionally or physically)?  Yes  No

Do you have children?  Yes  No

If yes, please provide the following information about your children:

First Name, Last Name	Age	Current Address

Please answer the following questions on separate sheets of paper, using detailed explanations.

1. Describe your current relationship with your children.
2. List all unpaid debts, if any. Include alimony, child support, loans, inmate educational expense, court-ordered restitution payable to probation/parole departments or other agencies. Include amount owed, payment plan (schedule to pay), and current status (current, deferred or behind). Do you have any outstanding traffic fines?
3. Is your present or any past incarceration and/or arrest drug or alcohol related? When did you last use drugs or alcohol?
4. Have you ever participated in any drug or alcohol treatment programs on an inpatient or outpatient basis?
5. Was your participation in treatment program(s) court mandated?
6. Did you comply and satisfactorily complete all and/or any of the treatment program recommendations?
7. Identify any support programs (such as "12-step") offered at your current institution. If offered, have you participated in any support programs during your current incarceration?
8. Have you had any positive drug or alcohol screens during your present incarceration?
9. Please identify all illegal drugs you have *tried*. (Also, please include legal drugs you have abused.)
10. What has been your longest period of not using any drug you cited above?
11. Have you or a blood relative ever had a severe emotional problem?
12. Have you ever been treated or hospitalized for mental illness? If yes, what was the nature of the illness and what type of treatment did you receive?
13. Have you ever had any psychotherapy or counseling in or out of prison? If yes, where were you treated? Name the medications prescribed to you?
  14. What was the outcome?
  15. Have you ever been treated for depression or anxiety? If yes, how often and how does it affect you?
  16. Have you ever thought about suicide? If yes, include how often you have had these thoughts.
  17. Have you ever attempted suicide? If yes, include what method you used, when and what your reason was.
  18. If someone close to you could use 5 words to describe you, what would those 5 words be?
  19. Do you have any problems sleeping? Include how many hours you sleep per day.
  20. How do you deal with your anger? Please explain.

21. Please identify all of the following practices with which you have been involved and to what degree: Ouija board, palm reading, séances, horoscopes, Satan worship, fortune telling, witchcraft, divining, spell casting, occult based games, hypnotism, voodoo, tarot cards, other.
22. Do you have any tattoos? Describe and explain.
23. Please identify any gang affiliation you have had in the past five years. Please note any rank held and length of affiliation.
24. Have you ever viewed pornography? To what degree?
25. Have you ever been/are addicted to sex or pornography? To what degree?
26. Have you ever been interested in homosexuality?
27. Have you ever willingly had a homosexual encounter, even experimentation? If yes, how many partners?
28. Does any type of homosexual activity play a part in your life at the present time?
29. Explain what gives you the certainty that God exists.
30. What does "faith" mean to you personally?
31. How did God become real to you? Please explain.
32. Of all the things you know about the nature or character of God, what means most to you personally.
33. What do you find most difficult to understand about God?
34. Of all the teachings of Jesus Christ, what has come to be most significant in your life?
35. In what way does your relationship to God make your way of facing life any different?
36. Describe any biblical studies or correspondence courses you have pursued.
37. How do you see yourself fitting in with the program of Rural Reentry as described in the *Discipleship Covenant*?
38. Describe a recent time when scripture or Biblical teaching convicted your heart.
39. What character issues/unwise choices/addictions led you to your position in prison?
40. What are your short-term and long-term goals for yourself for now and at Rural Reentry?
41. Describe the kind of person you hope to be at the end of your program at Rural Reentry.
42. After reading the *Discipleship Covenant*, the *Non-Negotiable Rules*, and *Biblical Rules*, do you have any comments or questions about the information presented?
43. Do you have any current infractions? If so, for what? When did they occur? (List all that apply)

**Please enclose your Christian testimony** – a detailed story of how Jesus found you and what your life with Jesus is now like. Also refer to the cover sheet, Step Two, for other items required in order to process your application. This application WILL NOT be considered until it is complete.

Please provide three references: (Persons not presently incarcerated, if possible)

Name	Address	Phone
Name	Address	Phone
Name	Address	Phone

I hereby certify that the information provided on this application is true and accurate, to the best of my ability; that it is provided in confidence and that it will be used, in part, to determine my potential for admission to the program.

I understand that this application is not a guarantee of my admission. If accepted into the program, I agree to abide by the guidelines, policies and rules of Rural Restart Ministry and to submit to the proper authority

Applicant's Signature	PRINT Applicant Name	Date
Prison/Jail Counselor or Caseworker Signature	PRINT Name	Date
Chaplain or Christian Worker Signature	PRINT Name	Date
Daytime Phone	Evening Phone	

**Please return this application to: Rural Restart Ministry; 624 ½ W. Mason St. Odessa, MO 64076.**