



RESIDENT APPLICATION

***Applicants must carefully read and sign all forms including Resident Application, Cornerstone For Recovery Handbook, and Health Questionnaire. An original copy must be received upon arrival.**

1. Applicant's name _____

2. Phone number where you can be reached _____

3. Email address _____

4. Current home address _____

5. Current treatment facility. Include Length of stay and projected discharge date

6. Number of prior treatment facilities _____

7. List all drugs of choice _____

8. What specifically is your aftercare program _____

**I hereby authorize Cornerstone for Recovery to communicate with previous treatment facilities and Outpatient programs at any time regarding my status*

_____ (signature)

9. List any criminal history and current status _____

admissions@cornerstoneforrecovery.com

cornerstoneforrecovery.com



RESIDENT APPLICATION

1. Have you ever been convicted of a sex crime or are a registered sex offender? Y/N

2. List approved and prescribed medication and purpose. *Any current medications must pass drug screen tests given at Cornerstone for Recovery* _____

3. List 2 emergency contacts

Name _____

Relationship _____

Phone# _____

Name _____

Relationship _____

Phone# _____

4. Marital status _____

**House management may notify one of these contacts in the event you are dismissed from the house or to report a medical emergency*

admissions@cornerstoneforrecovery.com

cornerstoneforrecovery.com



RESIDENT APPLICATION

5. Resident Fees:

-\$140 a week includes rent, cable, utilities, drug screens

-\$200 admission fee (non-refundable)

6. List amount and source of monthly income. If receiving support, list contact information _____

7. Any additional comments or information you would like to provide _____

8. Cornerstone for Recovery is a residential sober living environment with limited structure. Management expects residents to be self-motivated and supportive to other residents. Please describe why you are a suitable candidate _____

Signature: _____

Date: _____

admissions@cornerstoneforrecovery.com

cornerstoneforrecovery.com