



PAPA'S HOUSE
He's prepared a place for you

Hello:

We are very excited that you are considering joining the Papa's House family! We have prepared this packet to give you some basic information that should help you in making that decision. We have also included the application and attachment requests should you decide to apply.

We look forward to meeting you and discussing whether Papa's House is a good fit for your needs.

Papa's House Introduction Packet:

- Basic Description of Papa's House
- Basic overview / guidelines
- Criteria
- Application process
- Illegal Immigrants/Non-legal Citizens
- Program completion / Graduation
- Application and attachment requests

PAPA'S HOUSE

Who we are

When you come to Papa's House you will quickly meet Becky and Leigh Anne. Becky and Leigh Anne live in the home full time. They are there to serve you, pray with you and for you, and encourage you throughout your healing journey. You may also meet Connie, Cherie and Liz who are board members and are great prayer warriors, friends, and mentors. You will love each one of them.

We believe that God is the Healer and we strive to point each other to Him at all times. We believe that He has the answers to all our questions and as we learn to hear His voice, we are better equipped to follow Him.

What is Papa's House

We are a Christian organization. Papa's House is a Christ-centered, family-style residential program where emotional and spiritual healing takes place. While here, you will experience grace, mercy, and unconditional love in action.

Papa's House is not a "traditional" transition home. We live together in community and as a family. We encourage and require family members to cultivate and foster communication between the other family members. We strongly encourage each family member to share, as they feel comfortable, and participate in family activities on a regular basis. Sleep and personal time are important, but we encourage a healthy balance between rest, quiet time and interactions with others.

This is a place where real-life events are met with God's truth and healing. We learn to receive love from others and from God; then healing happens. We strive to learn to see ourselves as God sees us; fully accepted and completely loved.

Through courage, dedication and with consistent support, each family member is challenged to work through difficult issues, false beliefs and destructive cycles. We support this journey with prayer and patience; and with God as the Comforter and the Healer, transformation happens. With this transformation comes freedom, which allows us to share our joy and hope and the love of Jesus Christ with others.

Each family member will be working on their 'stuff', which can be done in several ways.

- Meet with a counselor or therapist (we do not supply – but we can help you find one)
- Obtain a drug evaluation (we are currently using IU Health Addiction Treatment and Recovery Center – but will discuss if you have other places)
- Attend local group meetings (AA, NA, Celebrate Recovery or others)
- Utilize community programs and classes
- Join in Transformation Prayer at Papa's House (This is an emotional healing prayer ministry)
- Participate in studies at Papa's House. (Some of these will be required as you will see in the House Guidelines)

Occasionally, we will have special guests come in to teach, minister, lead a craft night or teach a special skill.

At Papa's House we work on our issues and
we enjoy friendship, laughter, and fun.

At Papa's House, we live as family; so we eat meals together, play, study and pray together. Don't worry, you will have plenty of free time also.

We are not

We are not a drug rehab center, counseling service, nursing or retirement home, emergency shelter or day center.

The focus of Papa's House is always

Who Jesus is to us ♦ Who we are to Jesus ♦ Unconditional love ♦ Unconditional forgiveness ♦ Grace ♦
Accepting unconditional love, grace and mercy ♦ Being real ♦ Listening to others ♦ Sharing ♦ Tearing
down walls ♦ Honesty and openness ♦ Trust ♦ Vulnerability ♦ Feeling safe ♦ Respect ♦ Honesty ♦
Transformation – (changing, renewing our minds, trying new ways of thinking, acting and re-acting)

BASIC OVERVIEW AND GUIDELINES

Household Responsibilities

Papa's House has no paid staff, so household chores are shared by everyone. Every family member will participate in cleaning, cooking, shopping, yard work and even snow shoveling. (With consideration of health, work schedules and abilities.)

Visitors

We invite you to have friends and family visit periodically; with advance notice and within the guidelines. We would very much like to get to know your family and friends and we want them to feel comfortable visiting. Specific details and guidelines will be discussed prior to move in.

We are drug free

Papa's House is drug and alcohol free. Smoking and vaping are allowed in designated outside areas.

Respect is essential

Even when we don't agree, we must show respect. (remembering that we haven't walked in the other person's shoes.)

Personal care

Each family member is expected to keep themselves and their room clean. Personal items (clothing, books, mail, etc.) will be kept in the bedrooms rather than the shared spaces. Family members will share a room with one other lady. Personal spaces must be kept clean and free of food and dirty dishes. Each room may be randomly inspected.

Length of stay

The length of stay will be determined on a case by case basis but will average 6 mths to 2 years.

Personal Growth (exceptions made for some of these for work – more details in Family Member Manual)

Each family member is required to participate in:

- Family devotion/prayer time at 9:00 each morning.
- Dinner each evening at 6:00.
- Family devotion/prayer time following dinner.
- Family prayer time at end of day.
- Current family book, Bible study or teaching series – one evening per week.
- Attend church service weekly.
- Transformation Prayer (training and at least 10 sessions)
- Monthly Encounter Hour.
- Personal growth – this can be accomplished in a variety of ways – which may include:
 - Weekly counseling, therapy or Transformation Prayer sessions
 - Attending weekly meetings (AA, NA, Celebrate Recovery, etc)

Donations

Each women's suggested donation will be determined based on income and ability to pay.

Criteria

Papa's House will accept single woman who fits the following eligibility requirements:

- 20 years old or older
- 30 days clean from drugs and/or alcohol
- Committed to following Papa's House guidelines
- Committed to actively seeking God and building a relationship with Him as your God and your healer
- Committed to self-improvement and learning healthy habits
- Committed to separation from abuser if a victim
- Experiencing patterns of repeated or prolonged involvement in unhealthy decision making, relationships or environments
- Committed to recovery and/or seeking healing

Application Process

A three-step application process is required to assess appropriateness for participation.

The three steps of the application process include, in this order:

1. Written Application—Applications, eligibility requirements, and other information will be provided to candidates upon request via mail, email, or in-person.

Applicants are placed on the waiting list based on the date and time the completed application is returned to Papa's House.

2. Phone Interview—A phone interview with designated family member is scheduled to discuss details and to answer questions after the written application has been completed and returned.

The family member who will conduct the phone interview will make a minimum of two attempted contacts with the applicant at the contact numbers listed on the application. If there is voicemail available, messages will be left including the date, time, and a statement asking for a time to complete a phone interview.

If there is no follow-up contact from the applicant after two attempts the applicant is removed from the waiting list.

3. A copy of the Family Member Guidelines / Expectations section of the Family Member Manual will be sent to the applicant for review.

4. Face-to-Face Interview—(or another phone interview if face to face is not possible) If the previous three steps have been completed, this interview is scheduled with the next woman on the waiting list shortly before an opening in the program becomes available.

The applicant will be contacted to set up the face-to-face interview, and a message will be left on a voicemail or with another person that answers at the given number. The applicant will be given 48 hours to respond indicating she is still interested in the interview. The date and time of the 48-hour deadline is to be stated in the message and documented on the written application. If no contact is made by the applicant within 48 hours, the applicant is removed from the waiting list.

If an applicant has completed the face-to-face interview and staff has deemed the applicant appropriate for Papa's House, the applicant will be contacted at the phone number given to staff. If the applicant does not answer this phone call, a message will be left on voicemail or with another person that answers at the given number indicating a deadline of 48 hours for the applicant to contact Papa's House to indicate interest in accepting the available room. If no contact is made by the applicant, the applicant is removed from the waiting list.

If an applicant has been removed from the waiting list but makes contact to be considered or reconsidered for the program, the applicant's name will be added to the waiting list according to the date and time order that the most recent contact was made.

Illegal Immigrants/Non-legal Citizens

Papa's House will not knowingly accept an illegal immigrant or non-legal citizen into the home.

Appropriate identification (social security card, birth certificate, state picture identification) is needed to connect to resources including but not limited to: employment, FSSA benefits (Medicaid, SNAP, TANF), and medical care. Due to the extreme barriers to receive help and connect with resources, if these forms of identification are not available, Papa's House will not accept a woman into the program who is not able to produce basic forms of legal identification or documentation of working to obtain this identification.

Define Successful Program Completion / Graduation

- Have completed all goals set upon move in
- Show the ability to build and grow relationships with proper boundaries
- Have a healthy understanding of self-worth
- Display the ability to handle conflict in a healthy way
- Have meaningful purpose (Job, School, Volunteer, etc.)
- \$1,000 in savings
- Display the ability to maintain a monthly budget
- Write and share your testimony / story with family members
- Create a move out plan approved by staff



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Papa's House Family Member Application

Date: _____

Applicant Information

Full Name _____ Birth Date _____
Last First M.I.

Current Address _____
Street Address Apartment/Unit #

City State ZIP Code

Home Address _____
Street Address Apartment/Unit #

City State ZIP Code

Personal Phone # _____ Other Phone # _____

Email _____

Emergency Contact: _____ Phone: _____

Relationship _____ Address _____

Marital Status: Married Separated Divorced Single

Children? Yes No Who has custody? _____

Do you have a valid driver's license? Yes No

Vehicle: (Make, Model, Year) _____

Current Monthly Income: _____ Source: _____

Are you or will you be on probation? Yes No

Have you ever been convicted of a crime? Yes No

Do you have pending/unsettled charges? Yes No

If yes to either please list

Charge, Date, Sentence:

Medical

Primary Care Physician: _____ Phone: _____

Physician Address: _____

Allergies: (food / medicine / environmental) _____

Special Diet requirements: _____
(Please include or send a copy of the diet sheet you received from your doctor.)

Other physical limitations / special needs: _____

References

Please list three personal references.

Full Name: _____ Relationship: _____

Email: _____ Phone: _____

Full Name: _____ Relationship: _____

Email: _____ Phone: _____

Full Name: _____ Relationship: _____

Email: _____ Phone: _____

Employment History

Current Job: _____ Job Title: _____

Address: _____ Start Date: _____

3 Most Recent Positions Held

Company: _____ Job Title: _____

Start Date: _____ End Date: _____

Company: _____ Job Title: _____

Start Date: _____ End Date: _____

Company: _____ Job Title: _____

Start Date: _____ End Date: _____

Treatments / Programs

Are you currently seeing a Counselor or Therapist? _____ Name: _____

Frequency: _____ Start Date: _____

Are you currently seeing a Psychiatrist? _____ Name: _____

Frequency: _____ Start Date: _____

Diagnoses: _____

What treatment centers / programs do you currently attend or have completed:
(Name, frequency, begin date, end date if completed):

Are you currently attending a church: _____ Name: _____

Other Information

What has caused you to look for a place such as Papa's House? _____

What do you want to get out of a stay at Papa's House? (add attachment if more space is needed)

Why do you think Papa's House is a good fit for you? (attach a page if more space is needed)

How did you hear about Papa's House: _____

When do you anticipate coming to
Papa's House?

Papa's House is committed to following the letter and spirit of the Federal Fair Housing law by respecting the diversity and differences within our client base by providing equal service to all, without regard to race, color, religion, sex, handicap, familial status, national origin or other protected status.

I have read and understand the above statement.

Signature

Signature: _____ Date: _____

(By signing this – you are giving us permission to run a background check)

Additional Information

Please click on the following links or go to the following sites and complete the questionnaires.
(These will help us to better serve you.)

Love Languages: <https://www.5lovelanguages.com/quizzes/singles-quiz/>

Basic Personality: <https://www.16personalities.com/isfp-conclusion>

Print and attach the resulting reports or email them to us at: Papas.house.office@gmail.com

Or mail to:

Papa's House
412 S West Street
Summitville, IN 46070

Attachments

Please list all medications / prescriptions that you take. (Include over the counter medications)

Name: _____

Dose: _____

What for: _____

Doctor Name: _____

Name: _____

Dose: _____

What for : _____

Doctor Name: _____

Name: _____

Dose: _____

What for: _____

Doctor Name: _____

Name: _____

Dose: _____

What for: _____

Doctor Name: _____

Name: _____

Dose: _____

What for: _____

Doctor Name: _____

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Dose: _____

What for: _____

Doctor Name: _____

Name: _____

Dose: _____

What for: _____

Doctor Name: _____

Name: _____

Dose: _____

What for: _____

Doctor Name: _____

Papa's House
NOTICE REGARDING BACKGROUND INVESTIGATION

A consumer report (background screening report) and/or an investigative consumer report which may include information obtained through personal interviews concerning your character, employment history, general reputation, personal characteristics, police record, education, qualifications, motor vehicle record, and mode of living, may be obtained in connection with your application for and/or continued employment, contract for services or volunteer services with Papa's House. **A consumer report and/or an investigative consumer report may be obtained at any time during the application process or during your employment, contract for services or volunteer services with Papa's House.** You have the right, upon written request made within a reasonable time after receipt of this notice to request disclosure of the nature and scope of any investigative consumer report. Please be advised that the nature and scope of the most common form of investigative consumer report obtained with regard to applicants for employment is an investigation into your education and/or employment history conducted by Safe Hiring Solutions LLC, P.O. Box 295, Danville, IN 46122 888-215-8296.

AUTHORIZATION

By signing below, I, _____, hereby voluntarily authorize Papa's House to obtain either a consumer or an investigative consumer report about me from a consumer reporting agency and to consider this information when making decisions regarding my application for and/or continued employment, contract for services or volunteer services at Papa's House. I understand that I have rights under the Fair Credit Reporting Act, including rights discussed above, and have received a Summary of My Rights Under the FCRA. This report may be delivered in either written or electronic form.

Print Name (last, first, middle)

Social Security Number

Date of Birth (MM/DD/YYYY)
(For ID Purposes Only)

Driver's License Number

Driver's License State

Any other names I have been known by: _____

Current Address: _____

Previous Addresses (Last 7 Years): _____

Signature

Date