Resident Application

DATE: _____

LAST NAME: _____FIRST NAME: _____ MI_____

SSN: _____ DOB: _____AGE: _____HAIR_____EYES: _____

HEIGHT: _____ WEIGHT: _____PLACEOF BIRTH (City/State) _____

MARTIAL STATUS: ___Married ____Never Married ___ Divorced ___ Separated ___ Widowed

BRANCH OF SERVICE: _____

EDUCATION (Indicate highest education completed): ___Jr High ___High school __ Some College ___ Associate's Degree ___ Bachelor's Degree ____ VoTech

Next of Kin Name: _____ Relationship: _____

Street Address: _____

City: _____ State: _____ Zip code: _____

Phone number (with area code): _____

Are you on probation? ____yes ___No If so, What state/county: _____

Probation Officer's name & phone number: _____

Do you have a valid driver's license? _____ State: _____ Number_____

Resident Signature: _____

Date: _____

Resident Application

1. You must provide a copy of your DD-214 ASAP.
2. To be a resident of the BDVC you must work a full-time job. We will help you obtain employment. You will be able to use our services as long as you are making an effort to obtain employment. Until such time you will work at the BDVC.
3. If you are employed, upon arrival at the BDVC you must provide proof of employment and work telephone number to verify employment.
4. If you receive disability, contact the appropriate agency (i.e. VA, Social Security) have them provide a copy of your monthly award or provide a bank statement indicating monthly direct deposit.
5. Resident medication is to be stored in your locker.
6. All residents will pay 1/3 of their income as rent to the BDVC. We encourage residents to put 1/3 of their income in a savings account for future use.
7. Residents are responsible for keeping BDVC clean and neat. The Director will assign cleaning, laundry and cooking duties each week. Beds are to be made each morning.
8. No food is allowed in the bedrooms
9. No drinking of alcoholic beverages, illegal drugs, or weapons are allowed on the premises.
10. Warning letters will be issued for failure to comply with BDVC resident instructions, policies, rules and regulations. <u>The accumulation of three (3) Warning notices will result in immediate discharge.</u>

I HAVE READ AND UNDERSTAND THE TERMS AND CONDITIONS STATED INT THE APPLICATION

Signature: _____

Date: _____