

## **TRANSITIONAL LIVING COMMUNITIES**

P.O. Box 1586, Mesa, Arizona 85211 (480) 833-0143 toll free (866)646-2138

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### **INFORMATION & APPLICATION FORM**

**Transitional Living Communities provides a safe recovery environment for clients who have a serious desire to stay clean and sober. Please initial in the space provided to the left of the statement.**

Have you ever been arrested for a sex crime or arson? YES \_\_\_\_\_ NO \_\_\_\_\_

\_\_\_\_\_ New clients stay on the property for 72 hours, and leave **ONLY** to attend 12-Step meetings **WITH A SENIOR CLIENT OF TLC.**

\_\_\_\_\_ Restricted clients volunteer for 4 hours daily to help upgrade and maintain TLC property.

\_\_\_\_\_ After 72 hours of restriction, clients enter "Entry Level". This allows the client to go to 12-step meetings, seek work, or report to work, without support. "Entry Level" clients have a 10:00 p.m. curfew.

\_\_\_\_\_ After 15 days (and daily 12-step meetings), a client may apply for Level One - if the client has a sponsor, a job, and is working a 12-Step program. Level One allows a client leave the property alone, to support Entry Level clients and have a curfew of 11:00 p.m. on weekdays and midnight on weekends.

\_\_\_\_\_ After 30 days as a Level One, clients may request Level Two, if they continue to meet Level One requirements and service fees are CURRENT. Level II clients have a midnight curfew weekdays, 3:00 a.m. on weekends. In addition, a Level II may request overnight or weekend passes. No electronics are allowed until Level I, no cell phones until Level II. **LEVEL TWO CLIENTS ASSUME ADDITIONAL RESPONSIBILITIES AS SENIOR CLIENTS OF TLC.**

\_\_\_\_\_ TLC charges clients a weekly fee, **in advance**, for the services it provides. Clients must report to the manager each Friday between 4:00 p.m. and 6:00 p.m., to pay for these services. TLC charges clients who leave without giving a week's notice, or who leave before completing their commitment, a notice fee. Clients who leave owing a balance will have their accounts referred to a collection agency.

\_\_\_\_\_ Breakfast: 5 a.m. to 6 a.m. daily. Dinner: 5 p.m. to 6 p.m. daily. Lunch is available for self-preparation.

\_\_\_\_\_ Each client is assigned a daily chore and does dishes at least once a week.

\_\_\_\_\_ Wake-up is at 6:00 a.m. Weekdays and at 7:00 a.m. on weekends. Morning meditation is at 6:45 a.m. weekdays and at 7:45 a.m. on weekends. **ATTENDANCE IS MANDATORY.**

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To submit this form fax to 480-833-4266 (Arizona) or 702-598-4867 (Nevada)  
You can also mail it to Transitional Living Communities, P.O. Box 1586, Mesa AZ 85211.

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**INFORMATION & APPLICATION FORM (continued)**

\_\_\_\_\_ Clients who are levels and who are employed may “sleep-in” one (1) day a week.

\_\_\_\_\_ Chores will be completed before leaving the property.

\_\_\_\_\_ Mandatory Peer Group Meetings are Tuesdays and Thursdays at 6:30 p.m.

\_\_\_\_\_ TLC offers an 8 week “Relapse Prevention” course on Sundays at 6:30 p.m. and a 12 week “Big Book Study” on Wednesdays at 6:30 p.m. **ALL CLIENTS ARE REQUIRED TO ATTEND.**

**IMMEDIATE DISMISSAL WILL OCCUR FOR THE FOLLOWING:**

\_\_\_\_\_ 1. Use of drugs or alcohol on or off the property.

\_\_\_\_\_ 2. Not informing management when a client is using drugs or alcohol.

\_\_\_\_\_ 3. Violence or threats of violence.

\_\_\_\_\_ 4. Refusal to provide a urine sample.

\_\_\_\_\_ 5. Sex on the property.

\_\_\_\_\_ 6. A “chronic” bad attitude.

\_\_\_\_\_ 7. Not paying service fee.

\_\_\_\_\_ 8. Theft.

\_\_\_\_\_ 9. Arson.

\_\_\_\_\_ 10. Knowingly breaking any laws (local, state or federal)

TLC RULES WERE DEVELOPED, WRITTEN, AND ARE ENFORCED BY THE CLIENTS OF TLC. Management reserves the right to intercede at any time it deems necessary to change or alter any decision made by the clients.

I, \_\_\_\_\_ desiring to become a client of TRANSITIONAL LIVING COMMUNITIES, understand clearly the rules and regulations as set forth herein and will comply with them to the best of my ability.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

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### **ENTRY QUESTIONNAIRE**

1. What is your secondary drug of choice? \_\_\_\_\_
2. How old were you when you first used / drank? \_\_\_\_\_
3. Have you ever been in Drug/Alcohol Treatment? \_\_\_\_\_
4. Have you ever been in a halfway house? \_\_\_\_\_
5. Number of year's school completed? \_\_\_\_\_ Graduate High School? \_\_\_\_\_ GED? \_\_\_\_\_
6. Have you ever been in prison? \_\_\_\_\_ How many times? \_\_\_\_\_
7. Have you been in jail other than overnight? \_\_\_\_\_ If Yes: How many times? \_\_\_\_\_
8. Have you ever been ARRESTED for a sex crime or arson? YES \_\_\_\_\_ NO \_\_\_\_\_
9. What state did you live in before moving here? \_\_\_\_\_
10. What kind of work do you do? \_\_\_\_\_
11. What is your means of transportation? \_\_\_\_\_
12. What is your source of income? \_\_\_\_\_
13. Check ONE: Are you Married \_\_\_\_\_ Single \_\_\_\_\_ Divorced \_\_\_\_\_ Separated \_\_\_\_\_
14. Have you ever received any DUI's or DWI's? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, how many? \_\_\_\_\_
15. What kind of problems has drinking and/or drugging caused you? \_\_\_\_\_
16. To what lengths are you willing to go to change? \_\_\_\_\_
17. Do you have any problems with rules? \_\_\_\_\_ With authority? \_\_\_\_\_
18. Are you prejudiced towards any GROUP or RACE? \_\_\_\_\_
19. Can we help you with any legal problems? \_\_\_\_\_
20. What kind of medical problems (physical or emotional) do we need to know about? \_\_\_\_\_
21. Have you ever considered suicide? No \_\_\_\_\_ Yes \_\_\_\_\_ If so, how long ago? \_\_\_\_\_
22. If yes, I agree to enter into a plan of action with staff \_\_\_\_\_
23. What is your national origin? \_\_\_\_\_

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**INTAKE FORM**

ID# \_\_\_\_\_

House: \_\_\_\_\_

Name: **(PRINT)** \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Zip: \_\_\_\_\_ S. S. #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Veteran? \_\_\_\_\_

Branch: \_\_\_\_\_ Probation / Parole? \_\_\_\_\_ Where? \_\_\_\_\_

PO's Name: \_\_\_\_\_ PO's Phone #: \_\_\_\_\_

I'm taking the following medication(s): \_\_\_\_\_

Drug(s) of Choice? \_\_\_\_\_ Last Use?: \_\_\_\_\_

Referred By: \_\_\_\_\_ Entry Date: \_\_\_\_\_

Lived at **ANY** TLC before? \_\_\_\_\_ When/Where? \_\_\_\_\_ TLC Commitment: \_\_\_\_\_

CONDITIONS OF ENTRY: [ ] 90 meetings in 90 days [ ] Pay Service Fees Wkly [ ] \_\_\_ Day Entry

[ ] Big Book Study (12 wks) [ ] Relapse Group (8 wks) [ ] No new relationships for \_\_\_ months

***I will bring all of my uncashed paychecks to the TLC office. I will continue to bring them until my service fee balance is zero. The house manager will advise me when my balance is zero. I also agree that I will donate any change(less than \$1.00) from my cashed check, to house funds.***\_\_\_\_\_

Other Conditions \_\_\_\_\_

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**BY MY SIGNATURE BELOW, I AGREE WITH THE ABOVE CONDITIONS:**

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

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