

Resident Application

For immediate service: (844) 762-3747

To apply online or for more information please visit www.VanderburghHouse.com

Vanderburgh House welcomes residents looking to continue their recovery journey! We carefully screen applicants to ensure a good fit in our recovery communities. Our Resident Handbook can be accessed on our website. Please provide all information to the best of your ability; we cannot process incomplete applications.

		М / F / Т		
First Name	Last Name	Birth Date	Gender	
Requested move-in date (or ASAP	Requested location	How did you hear abo	out us?	Referred by:
				ied / Divorced / Widowed
Email Address	Cell Phone #	Other Phone #	Relationship	Status
Y / N				
Are you in a program? Wh	ich one? (if applying from a pr	rogram) Caseworker	Caseworker's P	hone Number & Extension:
Are you in recovery from use	of drugs or alcohol: Ye	s / No Date of last use	: Do	you attend AA or NA: Yes / 1
How will you pay rent: Wor	k / Friend / Family /	/ Scholarship / Assistan	ce (SSI, SSDI, etc	.) / Other
Yes / No		Yes / No		
Are you a felon? Nature of conviction?		On probation? Probation officer name & phone number		
Yes / No				
	are of conviction?	Are you on parole?Parole officer name & phone number		
Yes / No				Yes / No
Are you legally mandated to live in a sober house?		If so, by whom?		
Medication Information: Plea	se list any medication you	are prescribed or that you ar	e taking:	
Medication:		Reason:		_ Prescription: Y / N
Medication:		Reason:		_ Prescription: Y / N
Medication:		Reason:		_ Prescription: Y / N
Medication:		Reason:		_ Prescription: Y / N
income, housing, treatment, crin	ninal history, or any other pertaining to me, to Vand	public records. I authorize a	ny individual, com	review of my background includ apany, or public agency to release a photocopy or scanned image of t
			TO SI	BMIT APPLICATION
			1000	DIVILL IN LEICHTION
				VanderburghHouse.com

Proud supporters of **SOBERHOUSE**DIRECTORY COM

Call us at:

Fax to:

(844) 762-3747

(508) 901-4615