



APPLICATION FOR ADMISSION

Congratulations! Completing this application is a positive move ... a major first step in your recovery! It tells us that you have courage. Many need recovery, but we can only help those who are truly brave enough to “want” recovery. It is up to you! We will give you tools to help you on your recovery journey.

About ... Faith Farm Ministries

Faith Farm Ministries has set itself apart as a unique, premier, national model for addiction recovery programs and Rescue Missions. At 65 years old, the ministry began as an overnight refuge for alcoholics in Ft. Lauderdale. It has grown to a 9-month residential recovery program with 3 campuses on 1,500 acres and 445 beds for both men and women who struggle with life controlling issues.

Faith Farm’s faith based, drug and alcohol recovery, work training program is 100% voluntary and is provided at **no cost to the student**. Campus Directors, Pastors and Administrative Staff live on campus and are available to the student 24/7 for guidance and support. A typical day will be very structured: three meals; chapel; quiet time; academic and recovery curriculum; counseling and a **Comprehensive Work Training (CWT) Program** project that includes both classroom and on the job training. The work training is not to be construed as employment, nor is it compensated. It is training.

Faith Farm provides housing, food, clothing, curriculum, life skills training, spiritual training and the **CWT Institute**. Approximately 94% of the ministry’s \$11 Million annual budget is allocated directly to programs. Over 90% of that budget is derived via the micro-enterprise project training initiatives that are supervised by staff and performed by students who are learning new job skills.

Education is at the forefront of the program. Simply put, education opens doors. If a student does not have a high school diploma, they are required to enter our **GED** preparation program. In 2014, Faith Farm’s recovery curriculum became accredited through **South Florida Bible College and Theological Seminary**. A student who completes the basic 9-month program and chooses to test may earn up to 9 college credits. According to The Association of Gospel Rescue Missions (AGRM), Faith Farm is the only known recovery program that can offer this level of educational opportunity ... for free!

Students from numerous faiths, races and socio-economic backgrounds come to Faith Farm from all over the country and beyond. **Continuing in the genius of the program’s design; to be a self-sufficient, self funding, entrepreneurial combination of micro-enterprise, results in a vision of unimaginable possibilities as a premier, national model for years to come with the capacity to help thousands of people in the midst of the addiction epidemic.**

Faith Farm is truly a place of grace serving a God of second chances. Equipping students with all the tools they need for success; a new way of thinking, a new work ethic, vocational skills, a servant’s heart, and finally, a great start on undergraduate educational goals is what makes us unique. Students receive love, grace, renewal, opportunity and hope for a bright tomorrow.

IMPORTANT NOTICE: Although we offer a free recovery program, a non-refundable Processing Fee in the amount of \$100.00 will be payable via either cash or credit card upon acceptance to help cover administrative costs of admission. NO CHECKS ACCEPTED.

Apply Now ... Go to Next Page.

Basic Information

Preferred Farm Location*

- Men's Program at Boynton Beach
- Women's Program at Boynton Beach
- Ft. Lauderdale Campus
- Okeechobee Campus

First Name *

Middle Name

Last Name *

Alias

SSN*

Gender*

- Male
- Female

Phone (Must have for contact purposes)*

Email

Street Address

City

State

- | | | | | |
|--------------------------------------|------------------------------------|--|---|--|
| <input type="checkbox"/> Alabama | <input type="checkbox"/> Hawaii | <input type="checkbox"/> Massachusetts | <input type="checkbox"/> New Mexico | <input type="checkbox"/> South Dakota |
| <input type="checkbox"/> Alaska | <input type="checkbox"/> Idaho | <input type="checkbox"/> Michigan | <input type="checkbox"/> New York | <input type="checkbox"/> Tennessee |
| <input type="checkbox"/> Arizona | <input type="checkbox"/> Illinois | <input type="checkbox"/> Minnesota | <input type="checkbox"/> North Carolina | <input type="checkbox"/> Texas |
| <input type="checkbox"/> Arkansas | <input type="checkbox"/> Indiana | <input type="checkbox"/> Mississippi | <input type="checkbox"/> North Dakota | <input type="checkbox"/> Utah |
| <input type="checkbox"/> California | <input type="checkbox"/> Iowa | <input type="checkbox"/> Missouri | <input type="checkbox"/> Ohio | <input type="checkbox"/> Vermont |
| <input type="checkbox"/> Colorado | <input type="checkbox"/> Kansas | <input type="checkbox"/> Montana | <input type="checkbox"/> Oklahoma | <input type="checkbox"/> Virginia |
| <input type="checkbox"/> Connecticut | <input type="checkbox"/> Kentucky | <input type="checkbox"/> Nebraska | <input type="checkbox"/> Oregon | <input type="checkbox"/> Washington |
| <input type="checkbox"/> Delaware | <input type="checkbox"/> Louisiana | <input type="checkbox"/> Nevada | <input type="checkbox"/> Pennsylvania | <input type="checkbox"/> West Virginia |
| <input type="checkbox"/> Florida | <input type="checkbox"/> Maine | <input type="checkbox"/> New Hampshire | <input type="checkbox"/> Rhode Island | <input type="checkbox"/> Wisconsin |
| <input type="checkbox"/> Georgia | <input type="checkbox"/> Maryland | <input type="checkbox"/> New Jersey | <input type="checkbox"/> South Carolina | <input type="checkbox"/> Wyoming |

Zip Code

Date of Birth*

/ /

Age

Ethnicity

- White (not Hispanic)
- Black (not Hispanic)
- Hispanic
- American Indian/Alaska Native
- Asian/Pacific Islander

Height

Weight

Hair Color

Eye Color

Marital Status

- Never married
- Married
- Separated
- Divorced
- Spouse Deceased

Number of Children

Who has Physical Custody of Minor/Dependent Children?

Education Level

- Less than Grade 12
- High School Diploma
- GED
- Vocational School
- Associates Degree
- Bachelors Degree
- Masters Degree
- Doctorate Degree

Referred by

- Self
- Relative
- Spouse
- Court
- Medical Professional
- Other

Referred by Other

Referred by Phone

Emergency Contact

Emergency Contact Phone

Emergency Contact Relationship

Driver's License or ID Card Number *

Driver's License or ID Issuing State

- | | | | | |
|--------------------------------------|------------------------------------|--|---|--|
| <input type="checkbox"/> Alabama | <input type="checkbox"/> Hawaii | <input type="checkbox"/> Massachusetts | <input type="checkbox"/> New Mexico | <input type="checkbox"/> South Dakota |
| <input type="checkbox"/> Alaska | <input type="checkbox"/> Idaho | <input type="checkbox"/> Michigan | <input type="checkbox"/> New York | <input type="checkbox"/> Tennessee |
| <input type="checkbox"/> Arizona | <input type="checkbox"/> Illinois | <input type="checkbox"/> Minnesota | <input type="checkbox"/> North Carolina | <input type="checkbox"/> Texas |
| <input type="checkbox"/> Arkansas | <input type="checkbox"/> Indiana | <input type="checkbox"/> Mississippi | <input type="checkbox"/> North Dakota | <input type="checkbox"/> Utah |
| <input type="checkbox"/> California | <input type="checkbox"/> Iowa | <input type="checkbox"/> Missouri | <input type="checkbox"/> Ohio | <input type="checkbox"/> Vermont |
| <input type="checkbox"/> Colorado | <input type="checkbox"/> Kansas | <input type="checkbox"/> Montana | <input type="checkbox"/> Oklahoma | <input type="checkbox"/> Virginia |
| <input type="checkbox"/> Connecticut | <input type="checkbox"/> Kentucky | <input type="checkbox"/> Nebraska | <input type="checkbox"/> Oregon | <input type="checkbox"/> Washington |
| <input type="checkbox"/> Delaware | <input type="checkbox"/> Louisiana | <input type="checkbox"/> Nevada | <input type="checkbox"/> Pennsylvania | <input type="checkbox"/> West Virginia |
| <input type="checkbox"/> Florida | <input type="checkbox"/> Maine | <input type="checkbox"/> New Hampshire | <input type="checkbox"/> Rhode Island | <input type="checkbox"/> Wisconsin |
| <input type="checkbox"/> Georgia | <input type="checkbox"/> Maryland | <input type="checkbox"/> New Jersey | <input type="checkbox"/> South Carolina | <input type="checkbox"/> Wyoming |

U.S. Citizen?

- Yes
- No

If No ID or Not U. S. Citizen, Select Alternate

- | | |
|--|--|
| <input type="checkbox"/> None | <input type="checkbox"/> Certificate of Citizenship |
| <input type="checkbox"/> State Government Issued Birth Certificate | <input type="checkbox"/> Certificate of Naturalization |
| <input type="checkbox"/> U.S. Military ID | <input type="checkbox"/> Resident Alien ID |
| <input type="checkbox"/> Country Passport | <input type="checkbox"/> Temporary Resident ID |
| <input type="checkbox"/> Social Security Card | <input type="checkbox"/> Employment Authorization |

Homeless?

- Yes
- No

Speak English?

- Yes
- No

Receive Government Benefits?

- Food Stamps
- Social Security
- VA Benefits
- Work Comp (Active)
- Work Comp (Seeking)
- None

Previously Enrolled at Faith Farm?

- Yes
- No

If yes, which campus?

- Ft. Lauderdale
- Boynton Beach
- Okeechobee
- Eastham Home for Women

List Date(s), Duration, and Comments for previous Faith Farm Enrollment.

Who is completing this Application?

- Self
- Intake Counselor
- Family Member
- Friend
- Other

If other, please specify.

Substance History

Select all substances used in last 6 months

- Alcohol
- Cocaine
- Heroin/Opiates
- Marijuana
- Crack
- Meth
- Xanax/Benzo
- Other

Last Alcohol Use

Last Cocaine Use

Last Heroin/Opiates Use

Last Marijuana Use

Last Crack Use

Last Meth Use

Last Xanax/Benzo

Last Other Use

Describe other

List Previous Detox/Rehabilitation Programs

Health Status and History

Current Health Condition

- Excellent
- Good
- Fair
- Failing
- Poor

Any Current Physical Disability?

- Yes
- No

If yes, please describe disability.

History of Seizures?

- Yes
- No

Physically able to work 8 hours per day?

- Yes
- No

Currently taking any prescription medication?

- Yes
- No

List all current medications.

Any emotional or mental (Psychiatric) conditions?

- Yes
- No

List all emotional or mental (Psychiatric) conditions.

Any pending health/dental/vision appointments?

- Yes
- No

List all pending appointments.

Any special diet requirements?

- Yes
- No

Describe special diet requirements.

Ever had any of the following? (Check all that apply.)

- | | |
|---|--|
| <input type="checkbox"/> Arthritis or Rheumatism | <input type="checkbox"/> Asthma |
| <input type="checkbox"/> Dizziness or fainting spells | <input type="checkbox"/> Varicose Veins |
| <input type="checkbox"/> Head Injury | <input type="checkbox"/> Back injury |
| <input type="checkbox"/> High Blood Pressure | <input type="checkbox"/> Loss of hearing |
| <input type="checkbox"/> Kidney or bladder problems | <input type="checkbox"/> Loss of sight |
| <input type="checkbox"/> Phlebitis | <input type="checkbox"/> Amputations |
| <input type="checkbox"/> Knee Injury | <input type="checkbox"/> Hepatitis A/B/C |
| <input type="checkbox"/> HIV/AIDS | <input type="checkbox"/> Cancer |
| <input type="checkbox"/> Herpes | <input type="checkbox"/> Heart Problems |
| <input type="checkbox"/> Polio | <input type="checkbox"/> Hernia Rupture |
| <input type="checkbox"/> Back surgery | <input type="checkbox"/> Industrial or Work related injury |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Physical disability |
| <input type="checkbox"/> Epilepsy | <input type="checkbox"/> Tuberculosis |

Legal Status and History

Sexual Offender?*

- Yes
- No

Convicted of Murder?*

- Yes
- No

Felony Conviction(s)?*

- Yes
- No

Date of last felony conviction.

/ /

List all Felony Convictions.

Currently on probation?*

- Yes
- No

Probation Type.

- Felony
- Misdemeanor

Probation State

- | | | | | |
|--------------------------------------|------------------------------------|--|---|--|
| <input type="checkbox"/> Alabama | <input type="checkbox"/> Hawaii | <input type="checkbox"/> Massachusetts | <input type="checkbox"/> New Mexico | <input type="checkbox"/> South Dakota |
| <input type="checkbox"/> Alaska | <input type="checkbox"/> Idaho | <input type="checkbox"/> Michigan | <input type="checkbox"/> New York | <input type="checkbox"/> Tennessee |
| <input type="checkbox"/> Arizona | <input type="checkbox"/> Illinois | <input type="checkbox"/> Minnesota | <input type="checkbox"/> North Carolina | <input type="checkbox"/> Texas |
| <input type="checkbox"/> Arkansas | <input type="checkbox"/> Indiana | <input type="checkbox"/> Mississippi | <input type="checkbox"/> North Dakota | <input type="checkbox"/> Utah |
| <input type="checkbox"/> California | <input type="checkbox"/> Iowa | <input type="checkbox"/> Missouri | <input type="checkbox"/> Ohio | <input type="checkbox"/> Vermont |
| <input type="checkbox"/> Colorado | <input type="checkbox"/> Kansas | <input type="checkbox"/> Montana | <input type="checkbox"/> Oklahoma | <input type="checkbox"/> Virginia |
| <input type="checkbox"/> Connecticut | <input type="checkbox"/> Kentucky | <input type="checkbox"/> Nebraska | <input type="checkbox"/> Oregon | <input type="checkbox"/> Washington |
| <input type="checkbox"/> Delaware | <input type="checkbox"/> Louisiana | <input type="checkbox"/> Nevada | <input type="checkbox"/> Pennsylvania | <input type="checkbox"/> West Virginia |
| <input type="checkbox"/> Florida | <input type="checkbox"/> Maine | <input type="checkbox"/> New Hampshire | <input type="checkbox"/> Rhode Island | <input type="checkbox"/> Wisconsin |
| <input type="checkbox"/> Georgia | <input type="checkbox"/> Maryland | <input type="checkbox"/> New Jersey | <input type="checkbox"/> South Carolina | <input type="checkbox"/> Wyoming |

Probation Officer Name.

Probation Officer Phone.

Probation Officer Email.

If on probation, is PO aware of Faith Farm Application?

Yes

No

Probation reporting information.

Any pending legal issues?*

Yes

No

List all pending legal issues.

Occupation Information

Check all applicable experience.

- | | | |
|--|---|--|
| <input type="checkbox"/> Office/Clerical | <input type="checkbox"/> Computing/IT | <input type="checkbox"/> HVAC |
| <input type="checkbox"/> Janitorial | <input type="checkbox"/> Plumbing | <input type="checkbox"/> Carpentry |
| <input type="checkbox"/> Landscaping | <input type="checkbox"/> Call Center | <input type="checkbox"/> Electronic Repair |
| <input type="checkbox"/> Warehouse/Logistics | <input type="checkbox"/> Auto Mechanic | <input type="checkbox"/> Painting |
| <input type="checkbox"/> Sales | <input type="checkbox"/> Auto Body Repair | <input type="checkbox"/> Food Service |
| <input type="checkbox"/> Appliance repair | <input type="checkbox"/> Maintenance | <input type="checkbox"/> Other |
| <input type="checkbox"/> Truck driver | <input type="checkbox"/> Electrical | |
| <input type="checkbox"/> Fork lift operator | <input type="checkbox"/> Welding | |

Describe other experience.

Spiritual Information

Religious Background

- | | | |
|------------------------------------|-----------------------------------|--------------------------------------|
| <input type="checkbox"/> Christian | <input type="checkbox"/> Buddhist | <input type="checkbox"/> Rastafarian |
| <input type="checkbox"/> Muslim | <input type="checkbox"/> Hindu | <input type="checkbox"/> Santaria |
| <input type="checkbox"/> Jewish | <input type="checkbox"/> New Age | <input type="checkbox"/> Other |
| <input type="checkbox"/> Catholic | <input type="checkbox"/> Mormon | |

Follower of Jesus Christ?

- Yes
 No

Is there an intense desire to have God change your life?

- Yes
 No

Willing to participate in a Biblical/Faith-based program?

- Yes
 No

Religious Experience Comments.

Disclosures

1. Applicant acknowledges he/she is NOT a convicted sex offender.
 Acknowledged Disclosure 1
2. Applicant acknowledges he/she is only authorized to leave campus once every 30 days.
 Acknowledged Disclosure 2
3. Applicant acknowledges he/she is permitted visitation by immediate family and spouse only – NO girl/boyfriend or fiancé.
 Acknowledged Disclosure 3
4. Applicant acknowledges he/she will not be allowed visitation during first 30 days in program.
 Acknowledged Disclosure 4
5. Applicant acknowledges he will be required to maintain a haircut above the ear and neckline. (men only)
 Acknowledged Disclosure 5
6. Applicant acknowledges he/she will be required to attend Church services twice weekly.
 Acknowledged Disclosure 6
7. Applicant acknowledges he/she will be required to apply for food Stamps while in the program.
 Acknowledged Disclosure 7
8. Applicant acknowledges he/she does NOT have HIV/AIDS or TB.
 Acknowledged Disclosure 8
9. Applicant will NOT possess a cell phone or other electronic devices while in the program.
 Acknowledged Disclosure 9
10. Applicant has in their possession a copy of their State Issued ID and Social Security Card.
 Acknowledged Disclosure 10
11. Applicant acknowledges he/she will be required to work toward a GED while in the program if no high school diploma.
 Acknowledged Disclosure 11
12. Applicant acknowledges he/she is committing to a 9 to 10 month recovery program.
 Acknowledged Disclosure 12
13. Applicant acknowledges he/she has a 45 day supply of any required medication(s), if applicable.
 Acknowledged Disclosure 13
14. Applicant acknowledges he/she is detoxed and NOT experiencing any acute/primary withdrawal symptoms.
 Acknowledged Disclosure 14
15. Applicant acknowledges he/she cannot have a vehicle on campus.
 Acknowledged Disclosure 15
16. Applicant acknowledges she is not pregnant.
 Acknowledged Disclosure 16

