



A Faith-Based, Christ Centered, Transitional Home

Dear Friend,

Thank you for your interest in the Onesimus Discipleship Program.

Onesimus is a man in the Bible that had done wrong and had to go to prison. While in prison, he met the Apostle Paul who led him to Christ. When Onesimus was ready to get out of prison and go home, he didn't have a place to go. Paul wrote a letter to Philemon (the book of Philemon in the Bible) and asked Philemon to take him in, help him out, and get him started in his Christian life on the outside of prison. That is exactly what we want to do.

If you have ever wondered how much God cares about one guy getting out of prison, one whole book out of sixty-six were written for that reason.

We are looking for men who are sincere in their walk with God, who want Christ to change their life, and never again go back to jail. If that is you, then we welcome you to apply. This is not a simple halfway house, or a secular program. This is an intense Christian discipleship program. We want you to be committed to leave the things of the world alone, and to dedicate yourself to Christ.

The purpose of this program is not meant to be a strict, hard program, but a place where you can see, feel, and experience the joy and abundance of the Christian life.

We are excited to help you in your journey to have the best life you could ever imagine. Now, the devil doesn't want this life for you. He wants to steal, kill, and destroy your life. He wants to see your life wasted by drugs, alcohol, and worldly women. He wants to see you come in and out of jail until you die. He would love to take your life.

Surrender to God and let us show you what a great life you can have with Christ.

God bless you and your future,

David Baker
Chaplain and Director

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Columbia, TN 38401
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Pastor David Baker, Director | (931) 797-1816
Chaplain Dave Baker, Asst. Director | (931) 982-1914
Patrick Martin, Program Manager | (931) 286-1060

****In order to be considered for enrollment, you must follow each of these steps in their entirety:***

- Read and consider the attached Application and General Rules thoroughly.
- Fill out the application neatly and completely, including the financial agreement.
- Return the completed application to our office.
- After allowing time to receive and review your application, call to have a phone conference with our Director.

You must personally seek help. No second party requests will be considered after the application is received. Once again, thank you for your interest in Onesimus Discipleship Program. If God leads you to this ministry, we will join with you in a commitment to rebuild a life that has true freedom found only in Jesus Christ!

Aftercare Application

Personal Information:

Name _____ Age _____ D.O.B. _____ / _____ / _____

County & State you lived in before the age of 18 _____

TOMIS# _____ DL/ID# _____ State _____

Phone# _____ Marital Status _____

of Children _____ Ages _____ Who has custody? _____

SS# _____ Have you ever served in the military? _____ Do you receive Food Stamps? _____

Emergency Contact Person _____ Phone# _____

Address _____ Relationship _____

Do you have your High School Diploma or GED/HSE? (**Circle**) Yes or No

What is your expected release date? _____

Will you have any outstanding criminal cases when Released (**Circle**) Yes or No

If yes, where? _____

Will you be on Parole or Probation when Released (**Circle**) Yes or No If yes (**Circle**) Probation or Parole

Employed (**Circle**) Yes or No If yes, Where? _____

Monthly Income _____ Income Source _____

Are you a registered sex offender or have pending charges? (**Circle**) Yes or No

If yes, Please explain: _____

Alcohol & Drug Use History:

Drug(s) of choice: _____

Pattern of use (in the last 30 days **or** the last 30 days of your most recent use) _____

Have you ever overdosed? (**Circle**) Yes or No If yes, when? _____

<u>KINDS</u>	<u>AMOUNT</u>	<u>FREQUENCY</u>	<u>DATE OF LAST USE</u>	<u>AGE OF 1ST USE</u>

Medical Information:

List all allergies: (Medication and Food) _____

Are you diabetic? (**Circle**) Yes or No

****Onesimus Discipleship Program has an absolute right to be aware of any prescription drugs taken by its residents.***

Six-Month History of Prescribed Medication and Over-the-Counter Medication:

<u>KINDS</u>	<u>AMOUNT</u>	<u>FREQUENCY</u>	<u>DATE OF LAST USE</u>	<u>DR WHO PRESCRIBED</u>

For medications that have been stopped, the reason(s) why they were stopped _____

Have you ever considered or attempted suicide? (**Circle**) Yes or No If yes,

when? _____

****I give my permission to release all of my medical records from _____,
to the Onesimus House & Dr. Samuel Richardson III.***

Applicant Signature: _____ Date: ____/____/____

****READ THESE GUIDELINES - Failure to comply is unacceptable and may be cause for dismissal.***

House Management:

Onesimus House residents are all under the supervision and authority of the Director (David M. Baker), Assistant Director (David C. Baker), and Residential House Manager (Patrick Martin), who are Onesimus Discipleship Program staff.

Residential House Manager:

The House Manager is an appointed program participant of the house. He will report directly to the Director and Assistant Director. Your questions or matters concerning your housemates are to be directed to the House Manager. The House Manager will assist the participant with issues regarding a participant in violation of House Rules, and any other matters pertaining to a participant, or the house itself. House Manager has the option of in private, single bedroom.

Program Phases:

There are four phases in the Onesimus Discipleship Program. (Freshmen, Sophomore, Junior, & Senior) In order to graduate to the next phase, there will be a meeting with the directors, manager, and your mentor to evaluate your growth.

Automatic Loss of Residence:

****You cannot live here if you do any of the following:***

- Any use or possession of alcohol, unapproved prescription or illegal drugs, on or offsite.
- Any fighting or threat of physical harm.
- Any criminal activity.
- Any disruptive or ill-mannered behavior towards staff, participants, and neighbors.
- Any damage to Onesimus House, neighbors, or community property.
- Any possession of a firearm(s), knife(s), or other weapons used for self-defense or intent to harm others.
- Knowingly withhold information regarding a relapsed participant.
- Refusing to abide by Parole/Probation and Onesimus House rules and policies.
- Any association with women outside of structured Onesimus House programming or meetings, including passes, community/volunteer service, church services, and work.

Suspicion of Use:

If a suspicion of relapse exists, the suspected Participant will be addressed by either the Director, Assistant Director, and/or the House Manager. If suspicion is confirmed, a special house meeting must be scheduled to determine resolution of relapsed participant. Onesimus House Manager and Aftercare Manager will be notified immediately.

****Drug tests will be administered by Onesimus House Staff periodically and/or at random. Our policy is zero tolerance of drugs and/or alcohol. Refusal to adhere to this rule is reason for termination of participant.***

Postings and Rules:

- Chores - it is your responsibility to check and complete your designated chore(s) each week.
- Sign In and Out - it is your responsibility to sign in and sign out when leaving and returning to the house.
- Pass Request - it is your responsibility to complete a Transportation Request Form and have it approved by staff and the house leader at least 7 days prior to the date of day or overnight pass. No passes allowed for the first 30 days.
- Transportation Request - it is your responsibility to complete a Transportation Request Form and have it approved by staff and your house leader at least 7 days prior to the date of your appointment.
- House Phone - residents are not permitted to have a cell phone until they are in the 3rd phase of the program. There is a house phone that can be used in order to make essential calls. The house manager is in charge of the house phone.
- House Phone Messages - it is your responsibility to check your phone messages on the bulletin board located in the designated area.
- Locks are on bedroom doors. It is your responsibility to keep all of your belongings safely locked away. House Staff reserves the right to check your room and your property at **ANY** time.
- No rated X movies, nor movies with a high volume of profanity, sex scenes, or drugs allowed.
- No movie rental, online movie rental, or special event rentals are allowed without prior house staff approval.
- Paying Program fees - program fees are \$115 + gas. You are required to pay all fees on time. All program fees are final. If you decide to leave the program, you will **NOT** be reimbursed for any fees you have already paid.
- We will help you get a job. Your actions at work reflect on the Onesimus House. Getting fired from your job is unacceptable and may be cause for dismissal.
- Onesimus Discipleship Program is not responsible for any items left in the residence after two weeks of someone leaving the program. (We will dispose of all items after two weeks).

Things To Bring:

- King James Bible
- 3 sets of dress clothes and dress shoes
- At least 3, but no more than 5 sets of work clothes
- Personal hygiene items
- Alarm clock without radio, cassette, or CD player
- Bedding for a twin bed
- Supplies:
 - Paper, 3x5 cards, pens, envelopes, stamps, etc.
- Starting costs: (\$380 total)
 - *If you are unable to bring the full amount in when you arrive, your remaining balance will be taken out over the next 10 weeks.***
 - \$115 rent and \$115 deposit
 - \$100 for food
 - We will try to set you up with food stamps when you enter the program.
 - \$50 for curriculum
 - NO Cell phones, CDs, DVDs, Radios, MP3 Players, etc.

Commitment:

(Circle Yes if you agree or No if not)

Yes or No I will faithfully attend Onesimus House partner church with other residents.

Yes or No I agree to having an assigned mentor and meeting with him regularly.

Yes or No I will attend all required meetings. (some may be last minute due to ministry needs)

Yes or No I commit to NOT using any illegal drugs onsite or offsite while I am in the program.

Yes or No I commit to NOT consuming any alcoholic beverages while I am in the program.

Yes or No I commit to NOT have any sexual relations while I am in the program.

Yes or No I commit to NOT looking at any pornographic material while I am in the program.

Yes or No I commit to paying program expenses on time. (currently \$115 a week plus gas)

I, _____, have been made aware of and agree to the following

statements.

- I recognize my need for help, and I am therefore applying for admission to the Onesimus Discipleship Program. I understand that O.D.P. is a Christian organization and is dedicated solely to the spiritual regeneration and social rehabilitation of people like me.
- I have carefully read and understand all of the rules of the Onesimus Discipleship Program. If accepted into the program, I agree to keep all of the rules and regulations of the ministry. I understand that any flagrant or repetitive violation will be grounds for my dismissal from the program.
- I understand that my admission to the program and my continued residence is dependent upon my willingness to restructure my life to conform to biblical Christianity, to learn to live a victorious Christian life, and my willingness to help myself, including chores and duties as may be assigned to me.
- I agree for myself, my heirs and assigns, that should any incident occur involving personal injury to myself, or loss, or damage to my property during my residence at the Onesimus Discipleship Program, the church harmless from any and all liability in connection therewith.
- I authorize investigation of all statements contained in this application as may be necessary in arriving at a decision. I understand that false or misleading information given in my application or interview may result in my termination from the program.
- In the event that I quit the program and leave the O.D.P. House before graduation, I understand that the program is in no way responsible to provide me with transportation from the Onesimus House to any location. I further understand that if I were to leave the Onesimus House without completing the program, I must take all of my belongings with me, as I will not be permitted to return to the property.
***O.D.P. will not be responsible for storage or shipment of any of my personal belongings.**

Applicant Signature: _____ Date: ____/____/____

Staff Signature: _____ Assesment Received Date: ____/____/____

Approved: _____ **Denied:** _____

RELEASE OF CRIMINAL CONVICTION RECORDS

I, THE UNDERSIGNED, DO HEREBY AUTHORIZE the Onesimus Discipleship Program to examine any and all criminal records and arrests on file in the counties in the State of Tennessee or any other State. In doing so, I understand that I am waiving my right of confidentiality concerning my criminal history to the staff of O.D.P. alone.

Today's Date

Signature

Print Applicant's Name

Driver's License Number

____-____-_____
Social Security Number

Street Address

City State Zip Code

DRUG SCREEN AUTHORIZATION AND CONSENT

I authorize and give full permission to have Onesimus Discipleship Program and/or their medical company physician drug test for the presence illegal drugs, or prescription medication taken without a prescription.

I will hold all parties concerned harmless, meaning I will not sue nor hold responsible for any alleged harm to me or interfering with my obtaining a job or continuing employment due to not submitting to the tests or as a result of report of the test. This includes, but not limited to, possible clerical or laboratory error. This policy and authorization has been explained to me in a language I understand and told if I have any questions they will be answered about the test. I understand this is a legal binding document which is binding. I UNDERSTAND O.D.P. WILL REQUIRE A DRUG SCREEN TEST AT ENTRANCE AND RANDOM OR WHENEVER AN ON THE JOB ACCIDENT OR INJURY IS REPORTED IN ACCORDANCE WITH O.D.P. POLICY AND THIS AUTHORIZATION AND CONSENT. MY REFUSAL TO DRUG TESTING OR A POSITIVE RESULT WILL BE GROUNDS FOR TERMINATION FROM MY EMPLOYMENT AND TENANCY IN THE DISCIPLESHIP PROGRAM.

Print Name

Today's Date

Signature

Work Release Form

I, _____, understand that this is a work program. I understand that I will be required to do physical labor while in the program. If I have physical limitations, or am unable to work for any reason, I understand that I am to inform O.D.P. before I enter the program.

Please list any physical limitations below:

Print Name

Today's Date

Signature