



DOING THE MOST GOOD

# The Salvation Army

## CSRC Pre-Enrollment Application

All potential candidates **MUST** pass a drug urinalysis & breathalyzer at intake

Candidate's Name: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Current Address: \_\_\_\_\_

Phone number where you can be reached: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

1. What's going on in your life right now?  
\_\_\_\_\_  
\_\_\_\_\_

2. What is your number one need from a Salvation Army Program?  
\_\_\_\_\_  
\_\_\_\_\_

3. Why do you believe the CSRC Program will help you fulfill this need?  
\_\_\_\_\_  
\_\_\_\_\_

4. Are you a drug addict, alcoholic or both?  Drug Addict  Alcoholic  Both

5. If a drug addict, what is your drug of choice?  
\_\_\_\_\_

6. Have you been diagnosed with a psychological disorder?  Yes  No

7. List all psychological disorders you've been diagnosed with (I.E. Schizophrenia, Bi-Polar, etc):  
\_\_\_\_\_  
\_\_\_\_\_

8. Do you have any medical issues and/or physical disabilities or handicaps? (List All)  
\_\_\_\_\_

9. What medications do you take?  
\_\_\_\_\_  
\_\_\_\_\_

10. Do you have any legal issues or cases pending?  Yes  No

11. What charges are you facing?  
\_\_\_\_\_  
\_\_\_\_\_

When is your court date? \_\_\_\_\_

12. Have you been convicted of past crimes?  Yes  No

**Dates of Convictions & Offenses:**

Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Offense: \_\_\_\_\_

Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Offense: \_\_\_\_\_

Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Offense: \_\_\_\_\_

Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Offense: \_\_\_\_\_

Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Offense: \_\_\_\_\_

13. Are you a registered sex offender?  Yes  No

14. Have you been in the CSRC Program before?  Yes  No Year(s): \_\_\_\_\_

*(If answered yes, please answer questions 16-18)*

15. If you have been in the CSRC Program in the past but did not complete the program, why didn't you complete it?

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16. Why should be readmitted into the program?

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17. What steps will you take to ensure that you will remain compliant with the Policies and Procedures for the CSRC Program?

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*All of the information provided in the application is accurate and true. I understand that the Salvation Army will conduct a verification check of my social service and program history to consider me for enrollment in the CSRC Program. I understand that this information will be used to verify my eligibility for the program and to help design specific program goals, if accepted. I understand that by completing this application and allowing a verification check, the Salvation Army is under no obligation to enroll me into their program and I am not guaranteed entry. I understand that all of my personal information, including, but not limited to, my Social Security number, social service and program history will be kept in the strictest of confidence and will not be exposed to outside agencies. I understand that the Salvation Army is under no obligation to enroll me into their program; rather enrollment is solely dependent on my pre-enrollment application, my pre-enrollment interview, and my ability to meet all of the program guidelines.*

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Signature