New Heartland Men’s Recovery Center *Simple Application*

Name.. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email…\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age\_\_\_ D.O.B .\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Marital status M\_\_ D\_\_ W\_\_ Sep.\_\_\_ Single (never married)\_\_\_ Engaged\_\_\_

Phone(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What is your desire for coming to this program?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Are you currently abusing drugs? Yes\_\_\_\_ No\_\_\_

Do you drink alcohol? Yes\_\_\_ No\_\_\_ Recent alcohol-related issues Y\_\_ N\_\_

Have you ever attended a residential drug or alcohol facility? Y\_\_\_ N\_\_\_\_

Do you have any pending legal matters at this time? Y\_\_\_ No\_\_\_

Do you have any upcoming court dates? Yes\_\_\_ No\_\_\_

Have you ever been charged with any arson or sexual offenses? Y\_\_\_ N\_\_

Do you have any child endangerment or abuse charges or allegations? Y\_\_ N\_\_

Do you have any dental, medical or special needs? Y\_\_\_ N\_\_

Are you taking any special prescription medications? Y\_\_ N\_\_

Have you ever received any form of mental health treatment? Y\_\_ N\_\_

Do you have any special psychiatric needs? Y\_\_\_ N\_\_

**New Heartland Men’s Recovery Center**  *Simple Application(cont’d)*

Do you have children? Y\_\_ N\_\_

Have your children ever been involved with CPS? Y\_\_ N\_\_

This is a *preliminary* application. There are no *pass/fail* answers to the above. If you were *perfect* in every regard, it wouldn’t be reasonable to apply. So please answer truthfully so that you don’t have to explain discrepancies later. Application fee is not required with this initial submission.

 Print and mail to: New Heartland

 Attn: Admissions

 P.O. Box 643, Sherburne NY 13460

Or Fax to New Heartland, 607 674-4499

Or send as email attachment to : contact@newlifestation.com

For questions, or if no response, contact Executive Director Robert Klock

at 607 343-5112 or BobK4nls@gmail.com

Recommended: submit over phone, then fax or bring your copy with you.