



# the lighthouse initiative

Fill out this application completely and honestly. All information on this application will be kept confidential. The purpose behind every question is to confirm that we will be able to create a plan to match services according to your needs for your own success in Lighthouse and in life. Therefore, complete accuracy and honesty is required to benefit you and to facilitate your healing. Incomplete applications will be returned for more information before progressing to the interview phase. Inability or unwillingness to thoroughly complete the application will indicate that the applicant may not be ready to do the work that is required to be in Lighthouse. The rules and guidelines for Lighthouse are included in the application because in order to submit the application, all applicants must read, understand, and be completely willing to comply with Lighthouse requirements. Total honesty and compliance with Lighthouse guidelines is required to assure success and maintain a Lighthouse for the duration of your Lighthouse experience. Dishonesty and/ or noncompliance could result in termination of the applicants Lighthouse experience. If there is not enough room on the front of the sheet to answer the question, use the back of the sheet.

Date: \_\_\_\_\_

### PERSONAL

Name \_\_\_\_\_  
(Last) (First) (Middle)

Address: \_\_\_\_\_  
Street # or Apartment # City State Zip Code

Phone #(\_\_\_\_)\_\_\_\_\_ Date of Birth: \_\_/\_\_/\_\_\_\_ SS# \_\_\_\_/\_\_\_\_/\_\_\_\_

Relationship Status: Single \_\_\_\_ Married \_\_\_\_ Separated \_\_\_\_ Divorced \_\_\_\_ Widowed \_\_\_\_

Highest grade/ level of training completed (including trade school or journeyman program: \_\_\_\_\_

### LEGAL

Have you ever been convicted of a felony? YES/ NO If yes, complete for each:

Person or Non Person: Charges convicted of:

Date (year) of Conviction:

Have you ever been convicted of a misdemeanor? YES/ NO If yes, complete for each:

Charges convicted of: Date (year) of Conviction:

Have you ever been accused of, investigated or charged with any type of abuse or violence, sex offense, or a crime involving a minor? YES / NO  
If yes, please explain:

Do you possess a firearm or a conceal and carry?

Have you ever been incarcerated? YES / NO If yes, please list DOC Number: \_\_\_\_\_

Is there currently a warrant out for your arrest? Yes/ No If yes, explain on the back of this sheet.  
Are you currently charged with a crime, awaiting trial, or otherwise dealing with legal issues? Yes/ No  
If yes, explain:

Are you currently on Corrections/ Probation/ Parole? YES / NO  
If so provide the following:

Name: \_\_\_\_\_  
(Last) (First) (Name of Agency)  
Phone#(\_\_\_\_)\_\_\_\_\_

Terms and Conditions of Corrections/ Probation/ Parole:

Next of kin: \_\_\_\_\_ Relationship to you: \_\_\_\_\_

Phone#( ) \_\_\_\_\_ Other contact information: \_\_\_\_\_

Do you have a valid driver's license? YES / NO State: \_\_\_\_\_ Expires: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Type of Driver's License: \_\_\_\_\_ (If CDL, List all endorsements)

### MENTAL AND PHYSICAL HEALTH

Year of most recent health physical: \_\_\_\_\_ Date of recent mental health evaluation: \_\_\_\_\_

Date of most recent substance abuse assessment: \_\_\_\_\_

Do you have any medical condition that would prevent your participation in strenuous physical activity or walking up three flights of stairs? YES / NO

Have you ever been diagnosed with a chronic or intermittent health condition? YES / NO  
If yes, please explain and include any treatment plan or medical protocol you are following or have been prescribed to follow:

Have you ever been diagnosed with or received treatment or counseling for any mental health issues or been in a mental hospital? YES / NO  
If so please explain:

Are you taking any type of medication? YES / NO  
If yes, please explain:  
Do you have a pet and if so what plans do you have for their care if you are offered Partnership in Lighthouse?

### ADDICTION HISTORY AND MANAGEMENT

Please describe your drug use history including:

Drug of choice: \_\_\_\_\_ Age of first use: \_\_\_\_\_ Date of last use: \_\_\_\_\_

IV drug use: YES / NO Other info:

Do you smoke cigarettes or use a vape? YES / NO If so, at what rate? \_\_\_\_\_packs/day or \_\_\_\_\_% juice

Describe any family history of addiction:

Are you or have you been romantically involved with someone living with active addiction (explain):

Please list any detox, in-patient, or out-patient rehabilitation services you have participated in either voluntarily or by court order:

#### FINANCIAL HEALTH

What is your current source of income?

What amount of debt are you carrying?

Do you have health insurance?

Do you have KanCare?

Do you have a car? Yes / No

If yes, what amount are your monthly payments?

Is there currently an order in place for you to pay or receive child support and/ or alimony, how much per month? Are you current with those obligations or behind?

Do you receive any form of state or federal assistance? If so, what benefits are you currently receiving?

#### OCCUPATIONAL HEALTH

What was your most recent job?

Are you currently working there? YES / NO

If not, explain why:

What is your chosen profession?

Have you completed the necessary training for this occupation or do you have more training to complete?

What are your occupational goals?

Do you have reasons that might make securing a job difficult?

#### RELATIONAL HEALTH

Briefly describe your childhood and upbringing:

**Briefly describe your romantic and/ or marital history:**

**Have you ever:**

**Been involved in an abusive relationship as an adult? YES / NO (circle any that apply)**

**Physical    Mental/ Emotional    Sexual**

**Been involved in a codependent relationship? YES / NO**

**Been the caretaker of a parent as a minor? YES / NO**

**Been the primary caregiver of a sibling as a minor? YES / NO**

**Are you a survivor of:  
(circle any that apply)**

**Sexual assault**

**Violent crime**

**Suicide of a loved one**

**Childhood abuse**

**Violent death of a loved one**

**Suicide attempt**

**Do you have children? List names, ages, and custody status for each:**

**Do you currently have children in foster care? YES / NO**

**If yes, please list:**

**Your case worker's name:**

**Your child/ children's case worker's name:**

**Are you actively working toward reintegration? YES / NO**

**SPIRITUAL HEALTH**

**What are your religious beliefs?**

**How do you picture God?**

**Describe your relationship with Him:**

**Have you committed your life to Jesus Christ? YES / NO**

**If yes, when?**

## INTENTION

Have you ever taken part in a Partnerial or nonPartnerial discipleship, treatment, or new start program before? YES / NO If yes, please explain which one(s) and your experiences:

What do you feel are your most serious problems or obstacles?

What are your reasons for applying to the Lighthouse Initiative?

What goals would you like to accomplish when you complete the Lighthouse Initiative?

Please list personal references (not relatives) and contact information:

Name: \_\_\_\_\_ Contact Information: \_\_\_\_\_

Name: \_\_\_\_\_ Contact Information: \_\_\_\_\_

Name: \_\_\_\_\_ Contact Information: \_\_\_\_\_

Previous Address: \_\_\_\_\_ Circle One: Rented Owned

If rented, landlord name: \_\_\_\_\_

Previous Address: \_\_\_\_\_ Circle One: Rented Owned

If rented, landlord name: \_\_\_\_\_

Previous Address: \_\_\_\_\_ Circle One: Rented Owned

If rented, landlord name: \_\_\_\_\_

*Be Advised: Rules are subject to change at any time. Failure to comply with any of the rules at any time or the terms of the lease can result in sanction, fines, or immediate expulsion/ eviction from the Lighthouse Initiative and/or the Lighthouse. Be Advised: Lighthouse Leadership / LUTD Volunteers do not offer medical, psychiatric, or legal advice or counsel and any conversation involving those (or related topics) should not be perceived as such. We are not a professional counseling/ therapy organization and do not claim to be such. If medical, psychiatric, or legal advice is needed, we urge you to see your primary care physician, therapist, attorney, parole officer, and/or case worker. If you feel at risk for suicide or have any other medical emergency, call 911 immediately. We are happy to be a part of your support team and will willingly work with any licensed/ credentialed professionals under whose care you choose or are required to be.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

The following is our Partnership Covenant. You will be asked to sign the agreement and abide by it if we extend a partnership offer to you. Please read and sign the acknowledgement below once you have read the document.

I have read the Partnership Covenant and understand that I will be required to comply with all of it should I be extended a partnership offer.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

## **Lighthouse Partnership Covenant**

*A Lighthouse partner is someone who is seeking to partner with Light Up The Dark to make the world a better place by taking inventory of their own life, aligning their life with God's will for them, learning to live responsibly in freedom, and investing in the lives of others who also want to walk out of darkness and into light.*

*Lighthouse is not easy. Lighthouse is work because healing is work; but at Lighthouse, we KNOW that freedom is worth the work.*

*Lighthouse is not a "program". Lighthouse is a whole-life experience.*

*Lighthouse is not a buffet. You cannot choose to do certain parts while ignoring others. Lighthouse is all or nothing.*

*Lighthouse changes lives.*

*If we have extended this partnership covenant to you, we are committing to partner with you as you walk out your Lighthouse journey. Let's look at what this experience would require to make sure that we are on the same page in terms of expectations. Then, if you are offered partnership and you choose to sign, you understand what you are agreeing to.*

### **The Backbone of Your Lighthouse Experience:**

Lighthouse is built on relationships and structured on empowering tools gained from the following three essential elements: Discipleship, Daily Living, and Discovery. Meetings, homework, and relationships are associated with each. During Lighthouse, the Partner will attend and actively participate in weekly meetings with their assigned Advocate and the Executive Director called Goals Meetings. Partners will complete all goals set at the previous Goals Meeting before each upcoming meeting.

#### **Discipleship:**

The Partner will keep all meetings with their Advocate and be present ahead of time and ready to work. If there is an illness or other type of emergency that would keep the Partner from being able to meet, it is their responsibility to communicate with the other party *and reschedule at that time*. During Discipleship, the Partner will attend and actively participate in weekly meetings with their assigned Advocate called One-on-Ones. Partners will complete all assignments associated with the One-on-One before each upcoming meeting. During Discipleship, the Partner may begin monthly meetings with an Operation Restore Mentor or Lighthouse Family as well. Such meetings are to be treated with respect. Communication/ rescheduling due to conflicts is the responsibility of the Partner. Giving is part of growing so each Partner will tithe to their home church, Light Up The Dark, or other Christian faith-based organization or church where God is moving.

#### **Daily Living:**

While in the Initiative, the Partner will obey all city, county, state, and federal laws. It is the responsibility of the Partner to coordinate with facilitators to complete the steps of Daily Living work. If there is an illness or other type of emergency that would keep the Partner from being on time or being able to meet, it is the Partner's responsibility to communicate with the other party and reschedule.

If the Partner enters the Initiative unemployed, they will be required to be diligent in searching for employment, presenting copies of at least five applications weekly to the assigned Advocate until gainful employment is established. First shift work is strongly recommended but regardless of the shift, Partners are required to attend and participate in all Lighthouse meetings. Income level must be able to sustain independent living. Partner will allow leadership to hold them accountable with finances from earned wages/employment; each Partner will agree to the following: establish savings and checking accounts, establish accounting of pay stubs, plan for financial transition goals such as monthly rent, utilities, down payment, and other necessities.

#### **Discovery:**

Discovery requires weekly meetings with our Beacon Faith and Family Counselor. The Partner will complete all meetings with our counselor as well as all assignments associated with those meetings on time. If conflicts occur, it is the responsibility of the Partner to communicate with our counselor *and reschedule ahead of time*. Partners must make counseling appointments a priority because much healing work is during and as a result of these appointments. Partners are required to have homework for these appointments done ahead of time and have prioritized giving significant thought and effort when completing it. The Partner will work with the Advocate, Executive Director, and Counselor on creating their exit plan no later than ten months from departure. The Partner will complete the exit plan no later than thirty days prior to completion of the Initiative.

#### **Your Physical, Mental, and Spiritual Safety:**

The location and address of the Lighthouse will be kept as confidential as possible. Partners are expected to protect themselves, their families, their neighbors, and future transitional housing Partners by using discretion when disclosing the address. Safety is always a top priority. Partners are expected to develop safety plans with

their families, and to protect any children in the transitional housing by keeping the residence in a safe condition. Light Up The Dark recommends that each Partner set up a post office box for address confidentiality. If you would like, you can use the Light Up The Dark post office box: P.O. Box 306, Sterling, Ks. 67579. Please be advised that the box may not get checked every day.

Copies of any current PFA or PFS orders need to be given to the Advocate and/ or Leadership. Abusers from whom Partners might be fleeing are not allowed on the property, and should not be informed of the location of the transitional housing. Abusers who come onto the property will be considered trespassers and will be subject to local authorities. Partners whose abusers discover their location may be asked to change locations or move to another property if one is available for their safety. Partners who plan to leave the housing for more than a normal work day should clear this with their Advocate at least 24 hours in advance. Visitors to the property or communication with certain individuals may be restricted at any time due to potential physical, mental, emotional, or spiritual danger to the Partner, and/or potential threat of relapse or decline in healing. Partners agree to grant permission for the exterior of the property, including all exits and windows, to be monitored through video and by local law enforcement. Verbal, physical, and emotional abuse are behaviors that Light Up The Dark is against. Partners are expected to refrain from these behaviors while they are participating in Lighthouse. No weapons or illegal drugs are allowed in the housing at any time. For accountability and safety purposes, partners will be required to have a mobile app on their phone (regardless of whether it is their personal property or property of Light Up The Dark), that makes their location, texts, and call logs visible to Lighthouse Leadership. Partners who use multiple phones will be required to have the app on all phones. Partners are required to be in their cottage by a reasonable hour each night, spend no more than two nights (with permission) away from their cottage, and if curfew is determined to be necessary, to abide by the curfew agreement. Signing this covenant is granting permission for random drug testing to be done which is part of the Lighthouse process.

While living in a Lighthouse, all overnight trips will be cleared with Advocate or Leadership. No more than two nights per month will be spent off property. No overnight or live-in guests are allowed. Visitation of children needs to be cleared with Advocate. There will be no housing of persons who have a warrant out. Use only non-narcotic pain relievers unless cleared through a doctor and your Advocate.

Partners agree to answer all texts from Lighthouse personnel within a reasonable time (less than 12 hours). After no more than 48 hours of no contact from a partner, a phone search will be conducted and a missing person's report may be filed.

Partners are to be honest. We understand that life is a process. We CAN DEAL with TRUTH. Lies create distrust and make moving forward in Lighthouse more restrictive than necessary. We are in this together so be honest with yourself and with us.

### **Finances, Fees, and Funding:**

All Partners agree to work toward financial independence which means working away from state and federal assistance. As a part of Lighthouse, Partners agree to be held financially accountable to meet budgeted financial obligations. This means transparency with Advocates and Leadership about income, expenses, and account balances.

Residence in each Lighthouse cottage is directly related to the partner's voluntary willingness and active participation in the Lighthouse Initiative as a faith-based, educational, and therapeutic process. When a partner resides in a Lighthouse, they do so with the understanding that they ARE NOT entering into an agreement with the landlord to rent the property; they ARE entering into a residential educational process where their ability to continue residing in the dwelling is dependent upon their active participation in the process AND Lighthouse's willingness to continue to extend partnership. Each cottage is owned by landlords who agree to rent exclusively to Light Up The Dark for the specific purposes of the Lighthouse Initiative. Light of the Dark is funded through private, tax deductible charitable donations. There is no fee to move into a Lighthouse cottage, however Lighthouse would not be able to function as a self-sustaining initiative so some expenses are paid by partners through Lighthouse (expense) Shares. Lighthouse Shares help Light Up The Dark cover expenses such as usage fees, property maintenance and upkeep, counseling services, curriculum, and other operating expenses. In order to cover the Lighthouse Share expense and work toward financial independence, Partners are required to work or earn living credits for 30-40 hours per week. Until employment is secured, living credits are acceptable payment for Lighthouse Share expense as well as gift cards for groceries and household supplies. During the Living Credit time period, tithe will also go to Light Up The Dark to help offset the cost of Lighthouse. Once employment is secured, the partner will pay their Lighthouse Share on a sliding scale based on income and partner status (*see the Levels of Partnership section below*). Lighthouse shares decrease over your time in Lighthouse.

As a part of accountability in all life areas, if infractions occur, Partners understand that there could likely be disciplinary actions including fines, volunteering, reflection exercises, and other appropriate actions up to and

including expulsion from Lighthouse.

### **Levels of Partnership:**

There are two levels of partnership: Apprentice Partnership and Advanced Partnership. There are different requirements and benefits for each. Research has shown that those with life controlling issues have a 75-85% better chance of being sober five years after being in a longer term (13-16 months) transitional program. We encourage you to prepare for 13-18 months unless otherwise discussed. Lighthouse is a faith-based experience. You do not have to have a relationship with God to be a part of Lighthouse. Many have entered Lighthouse that have had a history with God marred with wounds and scars. That's okay. Lighthouse is full of people who were once skeptics, but are now supporters. We are real people with histories colored by addiction, rape, all kinds of abuse, and all kinds of loss. Messy doesn't scare us. We know that healing is possible for anyone who chooses it.

**Apprentice Partnership-** Apprentice partner status is the status you will be when you transition in. Lighthouse is about building the life that God designed for you. This level of partnership is appropriately named because during this time, we will be walking together as Apprentices of Christ. Transition into Lighthouse can be equally freeing and stressful; freeing in the sense that there is hope, a plan, and support for moving forward and stressful because Lighthouse is a total life change. Many habits, relationships, and familiar routines of life are suddenly different which can be both difficult and healthy. We have requirements for Apprentices to help make transition easier and also to safeguard them from potential hazards to healing. Apprentices are required to do the following:

Earn 30-40 hours of Living Credits per week/apply for five jobs a week  
OR Secure employment (30-40 hours/wk minimum)

Attend church weekly  
2-3 small groups weekly  
2-8 Apprentice Academy class hours monthly  
Mentoring

Maintain weekly Goals, 1-on-1, and Counseling mtgs  
Daily/ nightly check-ins  
Weekly volunteering  
Collaborative budgeting/ budget maintenance

***Pay Lighthouse Share monthly (based on income)***

**Advanced Partnership-** Advanced partner status is granted when a minimum six months of participation in Lighthouse has been reached, requirements for Apprenticeship have been met, and with Leadership Team approval. Advanced partners continue with Apprentice requirements with the following additions or adjustments:

Mentor an Apprentice

Build A.R.C. Plan

P.H.A.R.O.S. Project

***Pay Lighthouse Share monthly (decreased from Apprenticeship)***

### **Transition in and out of your cottage:**

Upon entrance into dwelling, all possessions are surrendered to Lighthouse Leadership Team for an authorized search. Leadership will determine what is acceptable to keep in the Lighthouse. Paperwork for in-take will be presented at this time (PFA/ PSAs, Case Plans, Mental Health Evaluation, SACK Assessment, etc.). Upon moving in, the Partner and Leadership will complete the itemized checklist for content of dwelling, condition of the dwelling and appliances, and state of the property. The Partner is responsible for cleaning, general upkeep, and care of the Lighthouse and the property associated with it. The dwelling and property will be cleaned and cared for frequently and regularly, keeping things in safe and good condition. The Partner is responsible for caring for the yard and keeping the yard clean and safe. Smoking is NOT ALLOWED inside of any Lighthouse. Depending on the assigned property and the landlord's requirements, anyone who smokes, including visitors, must smoke completely outside of the house and must pick up butts and litter. *We do have properties where smoking is not allowed at all per landlord requirements.* At some point during the Lighthouse experience, the goal will be to work toward the elimination of all addictions, including nicotine. Applicant MUST stop all use of alcoholic and tobacco products and complete detox if necessary prior to entering The Lighthouse Initiative. Once a month, your Advocate will perform a home check. It is possible that unannounced dwelling and property searches by Lighthouse Leadership or police under the direction of Lighthouse Leadership could occur and by signing this covenant, you are giving your permission for this level of accountability and security. Landlords have the right to be on their properties, but they will give ample warning if they plan to come. Lighthouse Leadership will also arrange for repairs and maintenance as much ahead of time as possible. Generally, the first Goals Meeting happens at move-in to establish the schedule for the next week, safety protocols, Lighthouse contact information, phone set-up, and other necessary transition-in tasks. In most properties pets are not allowed.

Partners will attend church at least weekly with their Advocate or with someone their Advocate has approved of. Partners will dress in a way that respects their own total health and well-being as well as respects those they come in contact with. To that end, no vulgar terminology, skulls, satanic, or other articles of clothing containing/ displaying pictures or phrases deemed inappropriate or offensive by the Leadership will be worn for the duration

of Lighthouse. Partners will cover all areas of the body covered in a “G” rated movie. Females will be mindful of cleavage and wear undershirts if necessary. If in a dating relationship, Partners agrees to a relationship of integrity, leaving no perception of wrong doing.

While living in the Lighthouse, the Partner will obey all city, county, state, and federal laws. Upon leaving the Initiative, the Partner and Lighthouse will complete the itemized checklist for content of dwelling, condition of the dwelling and appliances, and state of the property.

Lighthouse is a voluntary Initiative. At any point the Partner may choose to leave by going through the proper steps: talking with their assigned Advocate, telling Leadership, and completing the housing checklist with Leadership. If a partner feels that they cannot complete the requirements of Lighthouse, it is possible and acceptable for a partner to terminate the partnership agreement and simultaneously the sublease at any time. If the Partner leaves voluntarily, they may not re-enter the Initiative for at least six months and/or will be placed at the bottom of the waiting list. Early voluntary transition out of Lighthouse will likely have emotional, financial, and logistical implications and should not be entered into lightly. If the Partner is expelled from the Initiative, before leaving they will complete the housing checklist with Leadership. Any property of Light Up The Dark, including furnishings, bicycles, or other possessions will remain in the possession of Light Up The Dark are not to be taken with the Partner. It is also possible and acceptable for Light Up The Dark to terminate the sublease and simultaneously the partnership agreement in situations such as, but not limited to, the following:

- if goals scores, care team assessments, benchmarking assessments, and other progress instruments indicate that the partner is not participating in the process
- if laws are broken
- if a pattern of relapse is established
- if leadership determines that Lighthouse services are not at a sufficient level to assist the partner in healing
- other such situations.

If a partner’s personal property is left on the premises and if no contact has been made in 48 hours, next of kin will be notified. If all keys have been turned into Lighthouse Leadership, next of kin will have 5 days to remove the partner’s belongings. If property keys are still out and not in the possession of Lighthouse Leadership, the next of kin will have 24 hours to remove the partner’s personal property. At the end of that time, anything that remains becomes a donation to Light Up The Dark and locks will be changed to protect the property, Light Up The Dark, and the landlord from property damage.

Please list next of kin in the order that you want them contacted in case of emergency or possession care/retrieval. If the first isn’t available, we will move on to the next contact.

Name: Phone:

Name: Phone:

Name: Phone:

If a partner voluntarily vacates the property not intending to return, and notifies Lighthouse Leadership or Advocates that he or she no longer plans to be a partner, any remaining items become property of Light Up The Dark.

Please be informed that if a partner chooses to leave Lighthouse permanently, and that partner takes Light Up The Dark property with them, Light Up The Dark could file a police report for the stolen property. There will be an inventory checklist for each particular cottage in the partner’s notebook.

Light Up The Dark agrees to maintain safe dwellings and address issues in as timely a manner as possible.

Issues due to normal wear and tear are the responsibility of Light Up The Dark or the landlord. Neither Light Up The Dark nor the landlord are responsible for damages to the property caused by the partner, their family, guests, pets, etc. The partner is responsible for damages.

By signing this covenant, you are acknowledging that you understand and will comply with this covenant. You understand that to be found out of compliance with this covenant could jeopardize your partnership, your ability to continue in Lighthouse, and your permission to live in the Lighthouse.

We are excited that you are joining our Lighthouse community and look forward to the wonderful journey ahead with you.