



Advocate House

P. O. Box 9083
 Huntington, WV 25704-0083
 Fax Number: (740) 451-0509
 Website: advocatehouse.com

Email Address: AdvocateHouse@yahoo.com

Please contact Bobby Borders
 at 304-208-0215 when you
 have a completed application.

ADMISSIONS APPLICATION FOR INMATES

ALL BLANKS MUST BE COMPLETED!

Name:		Inmate ID #:		Date:
Age:	Date of Birth:		Marital Status:	
Race:	Height:	Weight:		
SSN:	Education Completed:			
Do you have a photo ID? Yes or No		What type of photo ID?		

AN INMATE ID IS NOT AN ACCEPTABLE ID FOR JOB HUNTING. YOU WILL NEED YOUR BIRTH CERTIFICATE AND SOCIAL SECURITY CARD BEFORE YOU ARE RELEASED. IF YOU DO NOT HAVE A SOCIAL SECURITY CARD YOU WILL NEED YOUR BIRTH CERTIFICATE AND AN UNOPENED LETTER FROM A DOCTOR'S OFFICE TO GET ONE.

Have you been in our house before? Yes or No	When:
Why have you chosen our house?	

What is the date of your next parole hearing?

Case Worker's Name:	Phone Number:
Case Worker's Email Address:	

Attorney's Name:	Phone Number:
Attorney's Email Address:	

MEDICAL/PSYCHIATRIC HISTORY			
Psychiatric History		Yes or No	
Where?		When?	
Reason for admission:			
Current medical conditions including HEP C, AIDS, HIV positive, etc.:			
Current emotional status:			
Current Medication	For What?	Current medication	For What?
Have you ever attempted suicide? Yes or No			

ALCOHOL/DRUG TREATMENT PROGRAMS/HOUSES		
Where:	When:	Length:
Detoxification:	When:	Length:

ALCOHOL/DRUG HISTORY	
Have you ever been to AA? Yes No	Have you ever been to NA? Yes No
Are you an alcoholic? Yes No	Date you last drank:
Are you an addict? Yes No	Date you last used:
Seizures? Yes No	If yes date of last seizure:
History of DT's? Yes No	Blackouts? Yes No
Marijuana? Yes No	Hallucinations? Yes No
Cocaine? Yes No	Valium? Yes No
List any other drugs and date last used:	
Longest period of previous sobriety?	

EMPLOYMENT	
Work experience:	How long:
Work experience:	How long:

Are you receiving any other form of compensation? If yes, what type?

LEGAL HISTORY	
List all charges pending:	
Probation? Yes No	If yes for what?
P. O. Name:	P. O. Number:

Parole? Yes No	If yes for what?
If yes time remaining?	

Are you a convicted felon? Yes No	For what?
Have you been convicted in the last 7 years of a drug felony? Yes No	If yes when?
Have you ever been classified a sexually oriented offender or sexual predator? Yes No	
Have you ever been convicted of arson? Yes No	

INCARCERATION HISTORY	
Where are you incarcerated? Include the address.	
What are your offenses?	
What is the length of your sentence?	How long have you served?
What programs have you been enrolled in while incarcerated?	
What programs have you completed while incarcerated?	

Were you previously incarcerated? Yes or No	Where?
When?	How long?
What were your offenses?	

What is your financial plan to pay the house fees and purchase essentials?