

Road 2 Redemption Guest Application



Road 2 Redemption Transitional Housing Screening Application

Applicant Information:

Full Name:

First Name: _____ Middle Name: _____

Last Name: _____

Date of Birth: _____

Gender: Male Female Other: _____

Phone Number: _____ Email Address: _____

Current Address (if applicable):

Street: _____ City: _____

State: _____ ZIP Code: _____

Emergency Contact:

Name: _____ Relationship: _____

Phone Number: _____

Incarceration Information:

Date of Release: _____

Institution Name: _____

Are you currently on probation?

a. Yes

b. No

If yes, name of probation officer and contact information:

Length of Incarceration: _____ Years _____ Months

Reason for Incarceration:

Are you currently on the registry? Yes No

Housing History:

Have you previously stayed in transitional housing?

Yes No

If yes, where and when?

Were you evicted/asked to leave by staff? _____

Employment & Education:

Are you currently employed?

Yes No

If yes, where? _____

Are you a U.S. Military Veteran?

Yes No

Are you on SSI/SSA or Disability?

Yes No

Other income sources (VA benefits): _____

Highest level of education completed: _____

Road 2 Redemption Guest Application



Health Information:

How would you describe your physical health? _____
Current Medications: _____
Medical Conditions or Disabilities: _____
Mental Health History (PTSD, depression, anxiety, etc.): _____
Are you currently in treatment or counseling? _____
Substance Use History: _____
Do you currently have health insurance? _____

Additional Information:

Is there anything else you would like us to know?

Applicant Signature:

I, _____, certify that the information provided in this application is true and accurate to the best of my knowledge.

Signature: _____

Date: _____

This form gathers essential information for evaluating the needs and suitability of applicants for transitional housing, ensuring that Road 2 Redemption Transitional Housing can provide the necessary support and resources.

For Office Use Only:

Applicant Accepted or Denied:

R2R Representative Notes:

R2R Representative Signature and Date: