

# Residential Application

The application takes 20-40 minutes to complete. Please ensure you have the following information before you begin, as progress cannot be saved:

Family Summary  
Addiction History  
Prostitution History  
Abuse History  
Health History  
Arrest History  
Education and Work History

First Name \*

Last Name \*

Email \*

Phone Number

Address

Date of Birth

Name of Emergency Contact & Relationship

Phone number for Emergency Contact

Referred By:

Tell us about yourself

Please Describe your Relationship with your Family

Do you have Children?

Do you have a history with addiction?

Do you have a history with prostitution or sex trafficking?

Do you have a history with Sexual Abuse

Have you experienced domestic violence?

Are you currently in a romantic relationship?

Do you have any geographical limitations

- Yes - Florida
- Yes - other states
- No

Health Questions - please check any box that is YES

- Have you had the CoVid Vaccine?
- Do you have health insurance?
- Do you receive SSI or SSDI?
- Have you ever had a mental health diagnosis?
- Are you currently taking medications?

Have you ever been hospitalized for psychiatric reasons?

Have you ever attempted suicide?

Do you have any physical disabilities, chronic or ongoing conditions?

List any inpatient, A&D Treatment, IOP, and/or recovery programs in which you have ever participated.

ARREST HISTORY - Do you have any pending charges or warrants?

Are you on Probation?

What is your highest level of Education

Please describe your work history

What time of day is best to contact you?

I understand that The Villages of Hope is a long term residential program offering safe housing and a 2 year trauma based program for survivors of sex trafficking. We are NOT an emergency shelter or short term care facility. \*

Submit my Application