



*Community  
Empowerment*  
Enterprises LLC

## ***Supportive Transitional Housing for Women***

**Strength. Support. Sisterhood.**

# **ADMISSION FORM**

## **Applicant Information**

- Full Name: \_\_\_\_\_
- Date of Birth: \_\_\_\_\_
- Phone Number: \_\_\_\_\_
- Email Address: \_\_\_\_\_
- Current Address: \_\_\_\_\_

## **Emergency Contact**

- Name: \_\_\_\_\_
- Relationship: \_\_\_\_\_
- Phone Number: \_\_\_\_\_

## **Housing History**

Are you currently homeless or unstably housed?

- Yes     No
- If yes, please explain:
- Previous housing within the last 12 months:

## Reason for Seeking Placement

Please describe why you are seeking supportive/transitional housing:

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## Legal / Justice Involvement (if applicable)

Are you currently on probation or parole?

- Yes     No
- Officer Name & Contact:

Any upcoming court dates?

Yes     No

- If yes, list dates: \_\_\_\_\_

## Health & Wellness

- Do you have any medical conditions we should be aware of?

Do you take prescribed medications?

Yes     No

- If yes, list medications:

Do you require assistance with medication reminders?

- Yes     No

## Substance Use History

*(This information is confidential and used only to determine appropriate support.)*

Are you currently in recovery?

- Yes     No
- Last use date (if applicable): \_\_\_\_\_

Are you willing to participate in recovery support?

- Yes     No

## Employment & Income

Current employment status:

- Employed  Unemployed  Seeking Work  Other
- Employer (if applicable): \_\_\_\_\_
- Monthly income: \_\_\_\_\_

## Support Needs

Check any areas where you would like support:

- Life Skills
- Employment Readiness
- Financial Literacy
- Trauma Support
- Transportation
- Goal Setting
- Peer Support
- Other: \_\_\_\_\_

## Program Agreement Acknowledgment

I understand that Community Empowerment Enterprises LLC is a **supportive transitional home**, not a medical or licensed treatment facility. I agree to follow all house rules, participate in supportive services, and contribute to a positive, respectful environment.

**Applicant Signature:** \_\_\_\_\_

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