CROSSROADS TRANSITIONAL LIVING PROGRAM
CODE OF CONDUCT OVERVIEW

In order to maintain a peaceful atmosphere which fosters healthy relationships and educational success, Crossroads Transitional Living Program has a strict Code of Conduct to be observed by all residents. Upon moving in, new residents have a 60 day probationary period in order to determine whether the new resident is ready to be part of our program or not. New residents within the probationary period may have their residency terminated at any time, without forewarning, if in violation of the following Code of Conduct.

Following this probationary period, in the event that a resident is in violation of a house rule such as missing curfew, engaging in conflict with another resident, or engaging in conflict with the staff through negative attitudes or disobedience, they will be placed on another probationary review period for 30 days. During this probationary period, if the resident being reviewed violates any rule for any reason at any time, their residency will be terminated immediately. This includes but is not limited to:

1. **Engaging in conflict of any kind for any reason.** This includes initiating or instigating conflict, responding to instigation poorly, or escalating conflict into violence. It is highly recommended that if a resident is considering initiating conflict or responding poorly to instigation, that resident separate themselves from the other resident(s) until they are able to return to a state of peace and reconcile. Conflicts must be resolved quickly and amicably between the two involved parties or both parties will be at risk of termination regardless of who initiated.

2. **Violating a house rule.** This includes being late for the 11pm curfew by even 1 minute without prior approval, inviting an unapproved male/female onto property or into the home at any time, using or possessing a controlled substance or alcohol, engaging in conflict with other residents, disobeying or showing disrespect of any kind to the staff, failing to help share the responsibility of keeping the living areas clean, or reluctance to participate in group dinners.

3. **Having a negative or ungrateful attitude towards Crossroads Transitional Living Program, its staff or residents.** Although listed 3rd, this is the most grievous of the listed offenses. Crossroads Transitional Living Program has been developed by a team of caring people in order to house and provide for age-out and former foster girls. Any resident of Crossroads Transitional Living Program who cannot find it within themselves to be obedient, grateful, and have a positive attitude will be removed in order to give those who will be grateful the opportunity to reside here. A negative, gossiping, discontent, ungrateful attitude is the most destructive of all to this program and it is not welcome here as it removes peace from the home. Anyone who is truly unhappy here will be removed in order to welcome those who will be happy.

Overall, Crossroads Transitional Living Program Code of Conduct helps to ensure each resident has the opportunity to live in a peaceful home where they can focus on school and/or work without the emotionally traumatic effects of continual and unnecessary drama. We want each resident to love living here and our Code of Conduct helps to ensure that reality!
CROSSROADS TRANSITIONAL LIVING PROGRAM APPLICATION

Please note: Incomplete applications will not be processed. Please make sure to answer all questions as thoroughly as possible to the best of your ability.

PERSONAL INFORMATION

Today’s Date_______________________________

Name in full (Last) ___________________ (First) ___________________ (Middle) ______

Address_________________________________________________________________________

City _________________________________ State/Province __________ Zip-code _______

Country________________________________ E-mail _______________________________

Phone ________________________________ Cell Phone _____________________________

Age _________________________ Birth date _________________ Place (City, State) _______

Citizenship __________________________ Present Occupation _______________________

Marital Status (please circle): Single Married Separated Divorced Widowed

Race (please circle): White Black Asian Native American Black/White Other

Ethnic Background: _____ Hispanic _____ Non-Hispanic

Total # of Children & ages:__________________________ Total # of Children living with you:_____

Are you currently pregnant? Yes or No. If yes, anticipated due date_________________________

Have you resided here or in similar housing before? Yes or No

If yes, please list program and dates: Who referred you?

(group home, transitional living, shelter, etc.)

FOSTER CARE HISTORY

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HEALTH

Describe your general health: ____________________________________________

Please describe any physical limitations, disabilities, or health issues that you may have: ________

____________________________________________________________________________

Do you have any chronic illnesses? ____________________________________________

Are you presently taking medication prescribed by a doctor? _______________________

If so, please explain: _________________________________________________________

GUARDIAN INFORMATION (if applicable)

Name ____________________________________________

Address ____________________________________________

Phone________________________________________________

Occupation_______________________________________________

ACADEMIC BACKGROUND

Official academic transcripts from your high school is not necessary.

Name of High School attended_______________________________________________

Graduation Date (Mo/Yr) __________

City, State, Country

____________________________________________________________________________

GPA ______________ SAT/ACT scores, if applicable _______________
EMPLOYMENT HISTORY (List most recent first)

Company _________________________________________________________________
Manager _______________________________________________________________
Position Held _____________________________________________________________
Phone Number __________________________________________________________
Reason for Leaving _______________________________________________________
Dates of Employment ____________________________________________________

Company _________________________________________________________________
Manager _______________________________________________________________
Position Held _____________________________________________________________
Phone Number __________________________________________________________
Reason for Leaving _______________________________________________________
Dates of Employment ____________________________________________________

REFERENCES

List names, addresses & telephone numbers of two persons (unrelated adults)

Name and Relation ________________________________________________________
Phone _________________________________________________________________
E-mail _________________________________________________________________
Address ________________________________________________________________

Name and Relation ________________________________________________________
Phone _________________________________________________________________
E-mail ________________________________________________________________

Address ______________________________________________________________

CRIMINAL HISTORY
Have you ever been arrested?  Yes or No
If yes, Explain: ______________________________ Were the charges dropped Yes or No
Have you been convicted of a felony?  Yes or No
If yes, explain: __________________________________________________________________

FINANCES
Explain your anticipated source of income (if any) while in Crossroads Transitional Living Program:

____________________________________________________________________________
____________________________________________________________________________
What are your current financial obligations (i.e. student loan, credit card, car loan/insurance, cell phone, etc.)? Please list and explain.

____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

PERSONAL EVALUATION
Please give an honest estimation of yourself in the following areas. Rate 1-10 (10 being highest)

______ Personal Discipline  ______ Initiative  ______ Spiritual Maturity

______ Making New Friends  ______ Consistency/Faithfulness  ______ Finishing Projects

______ Leadership Abilities  ______ Listening  ______ Submission to Authority

______ Lifestyle Example  ______ Positive Speech  ______ Self-Confidence
Response to Correction
Obedience
Maintaining Friendships
Financial Discipline
Punctuality
Excellence in Homework

What tends to upset you the most?

____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

How much time do you spend watching TV?

____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

Internet / Video games / Movies?

____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

How do you generally spend free time?

____________________________________________________________________________
____________________________________________________________________________
CODE OF CONDUCT

As a member of the program you must commit to comply with all aspects of the Pledge of Honor in order to remain eligible for Crossroads Transitional Living Program.

CHARACTER
I pledge to act as a positive example of Crossroads Transitional Living Program and carry myself as such.

AUTHORITY
I pledge to be under the authority and covering of Crossroads Transitional Living Program and its leaders.

STUDY
I pledge to study to show myself approved and grow in my knowledge and the instruction of the program.

STEWARDSHIP
I pledge to be responsible in the area of my finances and all my financial commitments.

FAITHFULNESS
I pledge to be prompt and faithful in my attendance to all meetings, activities, and church services.

PURITY
I pledge to avoid immoral or illegal activities or engage in any behavior that is contrary to Biblical conduct and ethics.

FELLOWSHIP
I pledge to be an encouragement to my fellow residents and build solid relationships with others.

LEADERSHIP
I pledge to develop my leadership gifts by taking initiative, both verbally and practically.

FOCUS
I pledge to prioritize my focus and recognize the importance of my school studies and my studies in the program and to plan accordingly to reflect these values.

EXCELLENCE
I pledge to communicate a spirit of excellence in my speech, conduct, appearance, and attitude.
CODE OF CONDUCT (cont...)

I, ____________________________________ have read and agree to Crossroads Transitional Living Program Code of Conduct and program materials. I am fully committed to the requirements of Crossroads Transitional Living Program. I recognize that participating in Crossroads Transitional Living Program is a privilege and I should treat it as such. I also recognize that it is my own responsibility to succeed in the program. Furthermore, I understand that Crossroads Transitional Living Program leadership has the right to terminate my residency at any time for any reason they deem necessary.

I pledge to respect the leadership and understand their role is to assist in the further maturing of my character, the strengthening of personal disciplines in my life, the sharpening of my social skills and the development of life-long friends.

I pledge that if admitted to Crossroads Transitional Living Program, I will at all times conduct myself as a dutiful participant, faithfully and diligently adhering to Crossroads Transitional Living Program requirements, and promptly meet all obligations. I have thoroughly considered the time commitments, character expectations, and personal devotion required to succeed as a resident and I am willing to apply myself to these standards.

I hereby accept the entire Code of Conduct and agree that I will comply with the Code of Conduct to remain eligible for Crossroads Transitional Living Program.

Signature __________________________________________ Date _______________

Print ____________________________________________ Date _______________
APPLICATION ESSAYS

Please answer the following questions to the best of your ability. Submit questions on a separate piece of paper.

Each answer should be a minimum of two paragraphs and a maximum of one page typed (12pt, double spaced).

1. Give a brief account of your personal history. Include what you perceive to be the most influential aspects of your story (i.e.— living situations, events that helped shape your life).

2. Explain your expectations of Crossroads Transitional Living Program and what areas you believe that it can help you in and what you would like to get out of the program.

3. Describe your three personal character strengths and areas of needed growth (weaknesses) and what changes you would like to see in these areas.