



**Project Unity for Life**  
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**You are asking to have Unity House be your residence for the next few**

**Months. What are your intentions for moving into Unity House?**

**What do you hope to accomplish by moving into Unity House?**



<p>18. Marital status [Check One]</p> <p>Married ____ Single ____ Divorced ____</p>	<p>19. Do you have a medical doctor?</p> <p>YES _____ NO _____</p> <p>Telephone number: ( _____ )</p>
<p>20. How many times have you been to treatment for alcoholism and/or drug addiction?</p> <p>One time only _____</p> <p>2-4 times _____</p> <p>5 or greater _____</p>	<p>21. Do you take prescription drugs?</p> <p>YES _____ NO _____</p> <p>List the drugs and the Doctor who prescribed them.</p>
<p>22. Date of move in? Immediately _____ Other _____</p> <p>If "other" list the date you would want to move in, if accepted, and why the date is in the future rather than immediately.</p>	
<p>23. Have you ever lived in Unity House before? YES _____ NO _____</p>	
<p>24. List emergency Numbers _____ Relationship _____</p> <p>25 I realize that Unity House to which I am applying for residency has been established in compliance with the conditions of §2036 of the Federal Anti-Drug Abuse Act of 1988, P.L. 100-690, as amended, which provides that the house requires the house residents to (A) prohibit all residents from using any alcohol or illegal drugs, (B) expel any resident who violates such prohibition, (C) Pay household rent, promptly. (D) Expulsion from the group is different than the normal due process afforded by some local landlord-tenant laws. If terminated for (A) or (C) above, removal will be immediate.</p> <p>26. I have read all of the material on this application form including the limitations set forth in item I have also answered each question honestly and want to achieve comfortable recovery from alcoholism and/or drug addiction without relapse.</p> <p>Signature _____ Date _____</p>	

I agree:

That I will stay current on my rent, not more than 2 weeks in arrears.

That I will follow a Faith based approach as presented by Project Unity for Life (PUFL).

That I will attend all Project Unity for Life (PUFL) required classes and Bi Monthly Unity House meetings. Meetings are currently the first and third Tuesdays of the month.

That I will NOT use alcohol or Drugs (unless Doctor prescribed) while I live in Unity House. Clients rooms maybe subject to property search with Board approval.

That I will abide by the Smoke Free policy in and around Unity House.

That I will not tolerate or use violence or threat of violence while living at Unity House and I will respect all property of others at Unity House.

That I will be responsible for the cleanliness of Unity House which means I will clean up after myself and remind others to do the same.

That while not employed, I will seek employment daily and will be required to volunteer at non-profits in the area when not attending meetings, work, or job application situations.

That I will work with the other Unity House members to resolve issues of Unity House members.

That I will attend at least 4 AA or NA meetings weekly, or explain nonattendance to house members and get their approval for nonattendance.

That I will search out a Faith community (church) and regularly attend services

Upon leaving Unity House I will take all personal property (PP) with me. Any PP left after One week will be donated to Goodwill unless specific arrangements are made with the Board.

That I may be subject to PBT's and /or drug screens as directed by PUFL.

That there will be no animals allowed in Unity House.

That I will follow all rules regarding visitors as follows:

- All visitors are to be 18 years or older (unless prior approval is given by PUFL).
- All visitors must be accompanied by a house member at all times while in Unity House and must not be given individual access to Unity House.
- Visitors may not be in any bedroom in the house at any time (no exceptions) and must leave house by 11:00 PM.

Failure to comply with any of these requirements may result in immediate removal from Unity House, at the discretion of the Board.

Signed \_\_\_\_\_

Date \_\_\_\_\_

## UNITY HOUSE MANIFESTO

- “When problems occur, we’ll be prepared to talk openly about them and act quickly to respond to them.”
- “If any Unity House member should know about an issue or problem which could affect Unity House, they will voluntarily talk about it as quickly and as completely as we can.”
- “When problems or changes occur, we will keep the Board and Unity House members posted on a schedule they set until the problem or changes have been thoroughly explained or resolved.”
- “We will answer any questions Unity House members or the Board may have and suggest and volunteer additional information on matters members have yet to ask questions about.”
- “We will be cooperative with the Board and Unity House members, but our primary responsibility is to communicate directly with those most directly affected by our actions as soon as possible.”
- “We will respect and seek to work with each Unity House member.”

Welcome! As you complete this worksheet, you are likely to discover something new about yourself. In a way, you are self-coaching by establishing clarity about what you want to have happen in your own life. You may have more insight about what goals you want to achieve and what you may need to do to achieve those goals. For each of the following statements rate your level of agreement from 1 to 5 with 1 meaning you are not in agreement and 5 meaning you are in full agreement. Mark your answers with a circle around the number that best indicates your level of agreement with the statement as things are for you today.

For example:

If I had my life to live over, I would do it just the same.

1 2 3 4 5

(To circle 1 would mean “no way” and to circle 5 would mean – “sure thing”. To circle 3 would mean “maybe”.)

I believe I am in good physical health. 1 2 3 4 5

I have a good sense of inner peace. 1 2 3 4 5

I am happy with my work and/or a career. 1 2 3 4 5

I am content with my most significant personal relationship(s). 1 2 3 4 5

I am content with my relationships with family and/or friend(s). 1 2 3 4 5

I feel good about my personal growth, improvement, or development. 1 2 3 4 5

I am on a solid path of spiritual growth or maturation. 1 2 3 4 5

I have a good sense of humor. 1 2 3 4 5

I believe in right living: being honest, having integrity, and taking responsibility. 1 2 3 4 5

I have resolved most of my resentments against people, places, and things. 1 2 3 4 5

I have forgiven all the people in my life who have hurt me in any way. 1 2 3 4 5

I feel no shame for my past behavior(s). 1 2 3 4 5

I feel no guilt for my past behavior(s). 1 2 3 4 5

I like helping other people get what they need in life. 1 2 3 4 5

I am able to get most of my needs met without any outside help. 1 2 3 4 5

Most everyone has some things in their lives with which they just put up with. What are three of the things you are putting up with in your life today? These would be things about you, not other people, places, or things. For example, some people put up with a bad habit, or with having a bad temper, or with laziness. What's on your list of things you would be better off without yet you tolerate them?

- 1.
- 2.
- 3.

What three things do you absolutely love; Could be relationships, maybe hunting, maybe surfing the net, or playing baseball – whatever. What things do you love or love doing? Also, if you could have more of that or do it more or more often, what would it be and what makes it that way for you?

- 1.
- 2.
- 3.

Of all the things about you that you want to change, which changes would you want to have completed in the next six months? What makes those changes important to you – in other words, if you made the change, what would you have then that you don't have now?

- 1.
- 2.
- 3.

What might be at risk for you to make those changes? Usually, if there was no risk, you would have already made the change. A risk is usually something we would have to give up or a responsibility we have tried to avoid. What would be different in your life if you made the changes?

- 1.
- 2.
- 3.

Six months have passed; you have achieved your goals; what is different now? How do you feel?

## LIFE PLAN ASSESSMENT THE IMPACT OF SABOTAGE

Please consider the following and answer as best you can by checking the response most appropriate for you today.

### I might sabotage my efforts to build a better life for myself through:

Procrastination:	YES	NO	SOMETIMES
Insisting on being right:	YES	NO	SOMETIMES
I don't need no stinking help – going it alone; being the tough guy:	YES	NO	SOMETIMES
Tolerating situations and behaviors I know need to be changed:	YES	NO	SOMETIMES
Saying yes when I really want to say no:	YES	NO	SOMETIMES
Trying to control or manipulate people, places, and things to get my way:	YES	NO	SOMETIMES
Avoiding opportunities to say yes because I'm afraid I will fail:	YES	NO	SOMETIMES
Spending time on secondary goals that I know won't get me what I want:	YES	NO	SOMETIMES
I lie, withhold the truth, or am less than honest:	YES	NO	SOMETIMES
Avoid uncomfortable situations:	YES	NO	SOMETIMES
Won't stick with things when they are or become difficult:	YES	NO	SOMETIMES
Blame others for what is going on in my life:	YES	NO	SOMETIMES
Being selfish and/or self-centered:	YES	NO	SOMETIMES

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## LIFE PLAN ASSESSMENT

Following is a list of some goals/objectives/actions that many people want for themselves. To the right of the list are three columns. In the first column, rate from 1 to 5 the importance you place on that item. In the second column, write what step needs to be taken to achieve that goal/objective/action. In the third column, note who should take the action necessary.



Goal/Objective/Action	Importance					Next Step?	Who?
	1	2	3	4	5		
<b>PHYSICAL</b>							
Get health insurance/Medicaid and visit doctor							
Take care of current medical needs							
Follow medication or treatment plan							
Gain access to rehabilitation services							
Take care of dental needs							
Access vision care services							
Consistent exercise and recreation							
Overall fitness and weight							
<b>SPIRITUAL</b>							
Relationship with God/Higher Power							
Relationship with religious fellowship/members							
I am comfortable with my spirituality							
I take time each day for prayer or Meditation							
I am disciplined about my spiritual practices							
Determine what you value and what principles, beliefs are important to you.							
I need to develop a spiritual sense and spiritual practices							
<b>SOCIAL</b>							
The reintegration process – parole/probation guidelines							
Food/meals/meal planning/Bridge Card							
Shelter/housing/mailling address							
Transportation – access to vehicle, bus, rides							
Finances – income, loans, taxes, fees, fines, tuition							
Legal assistance							
Personal ID card/Driver License							
Access to cell phone							
Community contacts...professional/legal							
Getting out and meeting other people.							
Support group (AA, NA, other)							
<b>EMOTIONAL</b>							
My thoughts and feelings are well controlled							
Maintaining a positive attitude is a priority							
I see support and express my emotions in a suitable manner							
Setting priorities							
Accepting mistakes and learning from them							
Maintaining a balanced work and family life							
I cope with stress in a practical way							
Vocabulary development/management							
Make friends easily							
I am outgoing and have several friends							
Developing a healthy relationship							
Goal/Objective/Action	Importance					Next Step?	Who?
	1	2	3	4	5		
<b>LIFE CHALLENGES CHECK</b>							
Employment							
Housing							
Cash – money management – bank account							
Sex							
General literacy – read, write, speak, listen							
Addictions/co-dependency							
Pending court/legal action							

## GOAL IDENTIFICATION

The idea is to consider what you have reflected on and rated as important in your life. In this section, the opportunity is presented for you to identify the goals established in your Recovery Plan from your treatment. The achievement of these goals will signify your completion of your stay at Unity House. Completion of these goals will indicate your readiness to move on with your life as a valued member of the community. Each plan should be established in conjunction with your therapist upon departure from rehabilitation treatment. If you did not develop a plan upon leaving treatment, you must take the time now to develop your recovery plan. House members and the Board will assist you in development of a plan if you do not have one.

***Please bring your treatment plan with you to the interview. House members are responsible for determining who will be selected to move into Unity House.***

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