

Isaac's Recovery Home Full Intake Packet

Personal Information

Full Name: _____

Phone Number: _____

Email Address: _____

Emergency Contact: _____

Move-in Date: _____

Substance Use

Drug of Choice: _____

Length of Use: _____

Last Date of Use: _____

Medical History

List any medical conditions, medications, mental health diagnoses, and allergies:

Legal Background

Criminal Background:

Personal Statement

Why do you want to join Isaac's Recovery Home?

Why is sobriety important to you?

House Rules & Agreement

Employment Requirement: Residents must search for employment daily from 9:00 AM – 4:00 PM and complete 3–4 applications per day with proof.

Support: Contact Program Director Justin Gomez Medrano at 940-232-8252 for help.

Accountability: Residents must have an accountability partner during their first week.

Meetings: Residents must attend at least 2 AA meetings per week and church on Sundays.

Drug Testing: Residents are subject to random drug testing.

Curfew: Residents must follow house curfew unless employed.

Conduct: No guests or unauthorized visitors without approval.

Agreement & Signature

Resident Signature: _____

Date: _____