



Dear Mercy House applicant,

Thank you for your interest in Good News Outreach's Mercy House Men and Mercy House Women reentry program in Tallahassee, Florida. Please read this letter carefully when deciding whether Mercy House will be the best program to serve your needs.

Mercy House Men and Mercy House Women are faith-based participant transitional programs which operate independently and are gender-specific. We serve those who have been involved in the criminal justice system and may have had problems with substance use disorders. Mercy House follows the 12-step recovery model, and participants *may* be required to attend AA/NA 12-step meetings regularly and work the steps with a sponsor. Participants also attend weekly meetings to address any program policy issues, employment opportunities, participate in our Criminogenic Life Skills training, and other helpful volunteer trainings.

The men's program operates out of two homes in a quiet neighborhood on the north side of Tallahassee. The homes consist of one- and two-person bedrooms, shared bathrooms, and common areas being the kitchens, and living areas. The property includes a workout area, fire pit, and picnic table, the latter of which often serve as gathering spots for recovery meetings and other get-togethers. The women's program operates from our Main Campus where we have housing in 2BR / 1 BA modern apartments located in Midtown Tallahassee. Two women share one bedroom and the designated house manager occupies the single room. The living room and kitchen serve as common areas and seating is provided outside each apartment for outdoor leisure. This site also has a picnic table available for use.

Our program provides a stable base for men and women as they navigate reentry, find long-term sobriety, if applicable, and develop their wellbeing. We do so by walking alongside participants as they rebuild relationships, develop healthy coping skills, implement positive thinking patterns, and introduce them to Tallahassee's recovery community if needed, all while pursuing meaningful work goals. The program aims to equip participants to create the sustainable futures they deserve.

We understand the timeline will vary for everyone. As such, the program is 12 months. Each participant will move through six phases, the first of which centers on orientation and intake. Phases are progressive and are designed to help participant to get acclimated, set goals, recover

and heal from trauma, rebuild self-esteem, and develop healthy habits dealing with family, finances, and life as needed.

We ask that you complete the enclosed application and write a letter of interest so that we can ensure the program is a good fit for your needs. Your classification or release officer can expedite this process by emailing your completed application and your letter to Re-entry Program Manager, Nikki Moye at: nikim@goodnewsoutreach.org. The application and letter can also be mailed to: Good News Outreach, PO Box 3304, Tallahassee, FL 32315-3304. We are happy to answer any questions you may have about the program. Whichever route you choose, we wish you all the best.

Yours in Service,
Nikki Moye
Re-entry Program Manager



MERCY HOUSE
P.O. Box 3304
Tallahassee, FL 32315-3304

Date: _____

NEW PARTICIPANT APPLICATION

Legal name: _____

Preferred name (if different): _____

Date of birth: _____ Race/ethnicity: _____

DC Number: _____

Current prison: _____

Previous prison(s):

1. _____
2. _____
3. _____

What are your current charges?

Please explain what happened.

Which county are the charges from?

What was the sentence?

Have you EVER been convicted of a sex offense? YES NO

If yes, do you have to register as a sex offender? YES NO

When is your expected release?

What programs and/or classes have you participated in while in prison?

What impact has those programs and/or classes had on your life?

Have you had any DRs while incarcerated? If yes, please explain.

What jobs have you had during incarceration?

Have you attended Kairos? YES NO

What is your religion, if any? If applicable, please elaborate on which denomination you associate.

Substance use

Have you EVER misused drugs or alcohol? YES NO

What was/is your substance of choice?

Have you been to a treatment facility for drug or alcohol addiction? YES NO

If yes, where and for how long?

If yes, what was your biggest takeaway from the treatment?

If yes, what did you dislike most about the treatment?

Have you attended any recovery meetings (AA / NA / Celebrate Recovery)? YES NO
If yes, which?

If yes, what did you like the most?

If yes, what did you dislike the most?

Health

On a scale of 1 to 10, with 1 being not good at all and 10 being very good, how would you rate your physical health? (Circle)

1 2 3 4 5 6 7 8 9 10

How would you rate your mental health? (Circle)

1 2 3 4 5 6 7 8 9 10

Does your mental or physical health prevent you from obtaining employment? YES NO
If yes, how so?

Do you take any medications? YES NO

If yes, please list the medications along with what they are prescribed for.

Do you have any additional mental or physical health concerns not addressed above? YES NO

If yes, please elaborate.

Education

What is the highest schooling you have completed?

Are you interested in additional schooling?

YES NO

If yes, for what?

Employment

What was the last job you worked, prior to incarceration?

What other jobs have you worked (not while incarcerated)?

What is the longest you have been at a job?

What is your favorite job you have worked? What did you like about it?

What is your least favorite job you have worked? What did you not like about it?

Support systems

Are you married? YES NO

If yes, please list your spouse's name and contact information below.

Do you have any children? YES NO

If yes, please list their names and ages below.

If any are under the age of 18, who are they living with?

Please list any other familial support (i.e. parents, siblings, cousins, etc.) below. Include their name and relation to you.

On a scale of 1 to 10, 1 being none at all and 10 being very incredibly strong, how would you rank your current support systems? (Circle)

1 2 3 4 5 6 7 8 9 10

How would you rate your relationship with your family? (Circle)

1 2 3 4 5 6 7 8 9 10

How would you rate your relationship with friends? (Circle)

1 2 3 4 5 6 7 8 9 10

I certify that the information I have given on this form is honest and accurate.

Signature

Date