## **APPLICATION**

Applications can be mailed or emailed to above. Once you receive "Letter of Acceptance" and would like to reserve a bed, please mail first month's guest fee of \$515 plus application fee of \$50 at least 10 business days prior to move-in. You can also make payments in person at our office between 8:00am and 4:00pm (M-F). Money orders should be made payable to TLC. No checks will be accepted. (All payments are non-refundable).

	Topper:Termer:	Rider:	
Today's Date:			
IDOC or LE #			
Name:			
Gender:	Male   Female (Circle One)		
Address:			
City / State / Zip:			
Phone Number:		Email:	
Email:		Age:	
Emerg <mark>ency</mark> Contact:		Phone Number:	
Preferred City of Housing:	Eagle   Nampa   Caldwell	(Circle One)	
Have you previously resided at Rising Sun?	Yes   No	(Circle One)	
Are you an alcoholic/addict?	Yes   No	(Circle One)	
Drug(s) of Choice:			
Date of Last Use:			
Date Housing Needed:			
	If left blank application will no arrival and/or release.	ot be processed. Please give a real date of expected	
How will your first month be paid?	IDOC   Private	(Circle One)	
Have you been convicted of a misdemeanor or			
felony?	Yes   No	(Circle One)	



The Saenz House Office: 208-860-6981

Were you under the influence of drugs/alcohol when crime was committed?

Yes | No (Circle One)

List all charges: Also: Plea	se explain in detail any violent charge	PS:
Name of Case Manager:		
Will you be on probation or parole while in housing?	Yes   No (Circle One)	
Name of Idaho County you will be reporting to:		
Probation/Parole Officer Name, if known:		
Do you have any special accommodations? If so, please explain:		
read all materials provided t Saenz House rules and polica application. When I am acce Saenz House, corporate offi providers from all claims, ac	cies. A copy of the House Rules has be epted to The Saenz House, and take r cers, property owners, independent s tions, and liabilities.	below, I am agreeing to follow all of The been provided to me as part of this residency, I agree to hold harmless The
parties a <mark>nd/or</mark> their represer at The Saenz <mark>House</mark> Sober I	itatives as it relates to the application	process and housing status while living payments to The Saenz House Sober
have read both statements	above, understand its contents, and	voluntarily agree to its terms.
Printed Name:	Signature:	
Date:		



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Thank you for choosing The Saenz House as your housing provider. If you have any questions, feel free to contact us at 208-860-6981 or write to us. A response letter will be sent within 48 hours of receipt and will provide instructions for "Move in Day." **We look forward to meeting you soon!** 





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