

#5 (REVISED) (12-15-2021)

Set Free After Care Ministry Inc.

After Care Program Resident's Acceptance Agreement

Please Read Carefully – Sign - Have Witness Sign

What are your reasons for wanting to come to Set Free After Care Ministry

If you desire to only get out of prison and you have no address to parole out to you will come only to find rules, regulations and schedules. These are fact of every person's life -in or out of prison. Your chances of a successful re-entry are slim and none. Freedom comes when we are made free through Christ, repent from our old ways and start on your "second chance at life" walking a new path.

We are not a state or federal funded transitional program. We agree with the Pardon and Parole and Probation people to give you a clean, safe place to live while you are trying to get your life on the right path. We teach accountability, money management, work ethics and character building while you are learning to become responsibility for your decisions. We want to stop the prison revolving door with each of you. We ask that you submit to us and our program as those who care for your souls.

We take very seriously our instructions from Christ. We have no other motive except to love you as Christ loves you and help you succeed in this re-entry segment of your life. We don't have time and more importantly have no desire to be "hall monitors"-do this and don't do that. Should you prove to be one of those who require constant correction and/or fail to show a cooperative attitude, we will have no choice but to terminate your stay at Set Free After Care Ministry. As we understand it, failure to complete the program will result in a violation of your parole/probation.

We can provide three things for you- accountability, structure, and discipline. but we cannot accomplish the spiritual goals that are essential for a new start in life without your permission and complete cooperation. Please consider these things carefully. If you have any problems participating in Christian activities and way of living or if you want to come to the program with only the desire to rush through and get out, please do not sign this document or continue to pursuit of acceptance to Set Free After Care Ministry. There are many that are trying to get the opportunity for a chance to change their lives, just look back over your shoulder. Your decision. God Bless

I, the undersigned resident,

("Resident") do hereby agree to follow the rules and guidelines of both the Set Free After Care Ministry, Residence ("House") and Set Free After Care Ministry, Inc. ("Ministry") both of which are referred to hereunder individually and jointly.

I will reside as a resident under the Set Free After Care Program which is set up as a **1 year program**. The length of the program is determined by my progress and ability in preparing me to live on my own in a free society. This is determined by the Director of the program. If I need longer and space is available, it can be arranged.

I understand that House is operated on a space available basis and that adequate housing may not be available upon my release date. **I also realize that I am not eligible for this program if court charges filed against me are still pending.**

If I am released from prison and must ride a bus to the agreed location (Monroe, Ga.), I will arrive at the agreed upon location on time and under no circumstances leave the bus station in Monroe until I am picked up by Set Free After-Care personnel. Failure to abide by this rule will immediately VOID the agreement with Set Free After-Care Ministry.

If I am released on parole or probation, I understand that it is my responsibility to contact my parole or probation officer on time and give the House Director the name, address and all phone numbers of these officers. I understand that while at Set Free After-Care Ministry the staff will discuss and send a written report of my progress in program with D.C.S (Probation and/or Parole officers) each month.

I further understand that this is not just a transitional residence, but House is designed to build me up and establish me in the faith, as well as to assist me to plan and prepare my future by means of mandatory courses in financial management, life development, and life skills that will be supplied as soon as possible by Set Free After-Care Ministry. The goal of the House, Ministry and the Resident is to work together so that they can stop the revolving door of prisons.

Before Release from Incarceration

I, the undersigned resident, do agree to the following general guidelines that are required by Set Free After-Care Ministry, Inc. and the specific guidelines that will be required by the House.

I will:

1. Read and fill out the Ministry forms that are given to me prior to release by my Counselor and Chaplain to be mailed back to Set Free After Care Ministry, Inc. at: 3482 Keith Bridge Road, Box 108, Cumming, GA. 30041.

Inmate will read and sign: _____

(1) INMATE INFORMATIONAL SHEET Form #2 must be witnessed and signed

(2) RESIDENT'S ACCEPTANCE AGREEMENT FORM #5 , must be witnessed and signed

Chaplain will fill out and sign: CHAPLAIN'S FORM # 4 Counselor will fill out and sign: COUNSELOR FORM # 3

The Counselor will mail ALL of the forms together with the Inmate forms to **Set Free After Care Ministry, Inc. Box 108 3482 Keith Bridge Rd. Cumming, Ga.30041**

2. *****YOUR REQUEST WILL NOT BE PROCESSED UNTIL ALL SET FREE AFTER CARE FORMS HAVE BEEN RECEIVED AND REVIEWED BY THE SET FREE AFTER CARE BOARD OF DIRECTORS,**

Ministry staff or the House staff prior to release.

3. Agree to a face-to-face and/or phone interview with either Set Free After Care

Requirements for Acceptance to Set Free After care

1. **### Resident must have his Social Security card in his personal file.**

******NOTE**** this is a non-smoking Christian Facility *******

2. **## Resident must have his birth certificate (or a certified copy) in his file to bring with him. *** We will not accept you without the birth certificate ******

3. Resident must MAIL or bring with him, his first two (2) weeks rent in advance (\$ 550) to Ministry, (If possible) This will be held in a special bank account awaiting his arrival.

4. Resident must bring his \$25 debit card from prison (unused) with him for his personal items upon arrival. House and Ministry will assist you in acquiring them the next day

5. ******* MOST IMPORTANT*******

ITEMS 1- 2 MUST BE CONFIRMED BY THE INMATE , HIS COUNSELOR, OR THE CHAPLAIN BEFORE WE WILL ACCEPT HIM INTO THE PROGRAM. You need to make sure you take care of this BEFORE your release date. YOUR RESPONSIBILITY. The Parole Board will not be happy if you if YOU mess this up.

6 .If you must be on EM (Electronic-monitoring) It would be to your advantage to find an outside sponsor to help insure this monthly Parole Monitoring fee is paid. We will not pay it for you.

THERE ARE NO EXCEPTIONS TO THIS RULE -YOU MUST MEET ALL REQUIREMENTS IN 1 TO 5. SET FREE AFTER CARE MINISTRY AND ITS STAFF OR VOLUNTEER PARTNERS WILL NOT AND CANNOT PAY THE RENT FOR YOU.

7. Resident will also agree that he is responsible for any willful damage to the House and repair expenses will be deducted from his earnings in funds deposited.

After arrival at Set Free After Care Ministry House

1. I will submit myself to the guidance of Set Free After Care Ministry, House and House Director and its staff and will “walk in love” as defined by: NO negative talk, coarse language, profanity, and/or racial slurs directed towards anyone in the Ministry or resident at the House. This will not be tolerated.
2. Be accountable for my actions and attend all regular programs and life skill programs as required by House.
3. I will not use, have on my possession, or bring **ANY alcoholic beverages and/or illegal or non-prescribed drugs, tobacco or any forms of tobacco parafanila, or pornography onto the property; this means NO SMOKING ANYWHERE. This is grounds for immediate dismissal from the House.**
4. I will submit to random alcohol and drug testing done by House at any time deemed necessary. Failure of any test will be grounds for immediate dismissal from the House and program and you will be responsible for the cost of that failed test..
5. I will diligently seek employment. No nights or Sunday employment will be permitted without permission from the House Director.
6. When seeking employment I will provide the House Director with a daily list of names and numbers of the places visited for employment. This will be filed by the House Director in the resident's file.
7. I will immediately contact House upon receiving a job and give them the complete name, address, and phone number of my employer.

As part of financial management (budgeting) training

I agree to accept and follow the guidelines of the House concerning the money management practices concerning my paychecks which will follow these guidelines:

All paychecks come back to the house director for processing as part of learning money management. All monies given by family, earned at TC, or on the books will be turned in to be put in your savings account (no exceptions) All money mailed from family or friends for the resident will be handled in like manner and will be deposited in the resident's saving account. This applies to ALL money and/or checks

1. Upon arrival at the HOUSE, the resident will sign over a limited Power of Attorney for the Ministry to collect and cash payroll checks. *****Resident WILL NOT CASH HIS OWN CHECK***** Rent, savings and other costs will be left to the discretion of the individual House managers. Each week the House Director will prepare and issue a "Funds Tracking Sheet" to the Resident showing and tracking every penny that he brought with him, earned, received or saved.

2. A savings account will be set up for the resident so that a portion of his regular paycheck will be deposited for his future use and returned to the resident upon completion or dismissal from the one year program.

This money will NOT be used by Resident unless deemed necessary by The House Director.

3 Resident will not be allowed to keep his entire check, nor allowed a checking or savings account , nor a debit card/ credit card and will not be allowed to withdraw this money out of the bank

4. The resident **WILL NOT HAVE OR PURCHASE** and automobile.

5 The resident **WILL NOT PURCHASE** a cell phone or incur any debt or liabilities while they are a resident in the Ministry House. If the resident is on food stamps, the prepaid cell phone issued by Defaces is allowed. After he has reached **\$550** in his account, he will be eligible for (running money) **\$30** out of his next check. If he has a pre-paid cell phone he will have to pay it out of the running money. Residents parents or relatives may purchase him a phone (no contracts or bills to pay).

6 Rent is due every week (Currently \$275.00) and if the resident has not gotten a job after the first two weeks, the rent becomes his responsibility and any back rent will come out of his future earnings. Rent will be paid in full prior to anyone leaving the program or getting a visitation pass.

Resident will abide by all of the posted House rules concerning the House activities: curfew, chores, programs, visitation, rent, signing in/out sheet, attitudes etc.

Failure to comply with the House Rules and policies are grounds for dismissal from the program. Your privileges are determined by how you follow rules.

The resident agrees to give up his rights under the Georgia Tenants Act and agrees to leave immediately and peacefully when and if asked to do so by the House Director.

If the resident is on parole or probation, it is the obligation of the House and Ministry to notify them that the resident no longer lives at this location. The resident is totally responsible for meeting all of his requirements with his parole officer, probation officer and the courts (fines, reporting, drug/alcohol test, and driver's license suspensions, EM monitoring).

Resident is responsible for paying all of the Parole Board fees and charges. As part of money management, the House will assist the Resident to purchase a money order from his savings to pay these parole obligations.

All payments and money orders will noted on " Funds Tracking Sheet".

The resident hereby releases the House and Ministry of any and all legal responsibilities for his personal safety while he is a resident at the House.

Limitations of Ministry's Responsibilities.

The Ministry shall act only as facilitator in relation to Resident and House and is to perform no other services except for those stated herein. The Ministry's duties are ministerial in nature and is only being engaged based upon its duties as set forth herein and, other than due diligence inquiries, the Ministry shall act in "execution only" capacity, and shall not exercise any independent judgment in relation to any of the matters referenced herein.

House has the option to either accept or reject any particular Resident referred to it by Ministry. The Ministry is not responsible for any acts or omissions of either the House or the Resident. The Ministry expresses no opinion as to the eventual suitability or likelihood of success for any particular Resident to fit within the House, its Rules and its other inhabitants, whether Residents referred by Ministry or not. Although Ministry is available as a Resource to accomplish its goal of integration of Resident into regular, productive life and will provide assistance and teaching as requested, it is the responsibility of House and Resident to work together to accomplish these goals.

Release and Hold Harmless.

House and Resident hereby irrevocably fully and completely release and hold the Ministry harmless for all matters concerning House and Resident, other than for its own breach of this Agreement. Further, House shall fully indemnify the Ministry from any claim, proceeding, judgment or penalty that any person, business, governmental body or Court may bring against Ministry related to the Placement of Resident and his behavior in the Community or any collateral issues thereto which indemnification shall include, but is not limited to, all attorneys' fees as and when they might arise, through to final appeal, together with the imposition of any tax, judgment, levy, penalty, impost, duty, assessment, or lien against the Ministry and any damages (whether actual, general, consequential, special, punitive or otherwise) arising out of the performance of the Ministry's duties hereunder or in the performance of its duties as required by law.

Residents will be assigned a mentor from the outside as soon as possible that will work with them, when available, to help them work through life as the stumbling blocks appear. The resident will be expected to treat the mentor with respect and complete the assignments given to him to work on between the meetings.

REMEMBER THESE MEN ARE GIVING THEIR TIME, WITHOUT PAY, TO HELP YOU STAY OUT OF PRISON.

The purpose of these guidelines is to produce a mutual winning situation for the Resident, the transitional House, and the community. Ministry wants to effectively provide each Resident with the help needed to complete this year of restoration toward becoming a productive and crime-free citizen while protecting the House and its Director from any Resident who would not fit into the program or who may attempt to waste the hard work and money that has been put forth in his behalf.

We also want to protect the House from the negative impact of any community that may not be in agreement with a second chance ministry such as Set Free After-Care Ministry or the House.

We are very serious about our mission to help you get back on your feet. There are four things that will cause you to fail in this program.

STAY COMPLETE AWAY FROM THEM: Drugs, Alcohol, Tobacco, Pornography and Women.

SECOND CHANCES LIKE THE ONE THAT SET FREE AFTER CARE MINISTRY HAS GIVEN YOU ARE NOT NORMAL IN TODAY'S SOCIETY, CHERISH IT AND THANK GOD FOR HIS BLESSING.

I, the undersigned Resident, have read and do understand everything contained in this program. **I agree to abide by the rules of this program, House and its staff.** I agree to do this with a cooperative spirit realizing that the only reason this program exists is to help me to be able to succeed, so that I can once again become a crime free citizen who can earn an honest wage and not have to return to prison.

I have agreed to this one -year program on this date

X _____
Resident

X _____ Date _____
Witness: MUST SIGN (Counselor, Chaplain or Other DOC Member)

X _____
On behalf of House (House Staff)