A New Beginning For Women and Children

First Call Intake Form

Date: Name: DOB:

Number of kids: Ages: Custody of Kids?

Do you have an open CPS case? Worker name?

Contact number: Can you pass a drug screen?

How long have you been in and out of addiction/homelessness?

Homeless Domestic Violence Addiction

Last time of drug use?_____Drug of choice_____ How often ____

Your living situation? Car Friend Rehab Jail

What city are you currently in? _____

When was your last arrest? For what? _____

Do you have a PO officer? Name? On parole?

Can you work Full Time? Do you have an eating disorder?

Can you take care of personal needs?

Circle the disorders you've been diagnosed with?

Bipolar Depression Anxiety Schizophrenia Split Personality

Do you take Medications? _____

Who is the prescribing Doctor? _____

Do you get food stamps? Do you get a medical card?

Do you have a vehicle? What identification do you have?

Do you have a SS card ? Do you have a birth certificate ?

Circle any past abuse? Sexual Physical

Do you have any STD's?

When was your last job?

How do you plan to be successful in this program?

List the family/friends who will support you? Names and how they support you?

Have you been in and out of your kids' life? Is this the first time you've been a single mother?

What special needs do your kids have?

How do you discipline your kids?

What things do you think you will need our help with?

What steps do you plan to take to be successful and independent in the 9-months?

Where do you see yourself in 5 years?

Email for background check: _____

They have to Work FT & do house chores & we charge a program Fee

We have: rules, curfew, accountability, work schedules, pay off debt, save money for deposits, public transportation (if no vehicle), no relationships (inside or outside of home), no visitors, we are in Mayfield/Graves area, bring limited amount of clothing/shoes, wash clothing when arrive here, 9 month program

Notes: _____

_____

We will review this with staff and let you know if you are a good fit for our program and to make sure we can help you

Revised: 6/2/25