

BACKGROUND INFORMATION

Are you currently practicing a faith? If so, what, and a brief history.

Are you currently in recovery? If so, describe your step work.
If not, please describe your relationship and understanding of the steps of Recovery.

EDUCATION (High school, University, Higher studies)

Name/Location	Major/Minor	Degree/GPA	Dates	Honors/Awards
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All information on this page can be continued on additional pages if necessary.

Name

SSN

WORK HISTORY (Include Clubs and Volunteering Experience)

Title/Responsibilities	Dates	Organization/Location	Supervisor/Contact Info
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REGARDING PAST MILITARY, AMERICORPS/PEACECORPS, RELIGIOUS LIFE

Dates	Description
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Continue on additional pages if necessary.

Name

SSN

HEALTH

Primary Care Physician, Dental Care Information and Health Insurance Provider Information

Allergies and Medical Conditions including medication and prior hospitalizations

Psychiatric History Concerns including medication and prior hospitalizations

Current prescriptions/dosages and/or dietary needs/preferences

Please list any hospitalizations or admissions to any RehabCenters (dates, location, reason)

LEGAL

Saint Juan Macias Missioners will be conducting a background check to verify pertinent information. Please inform us of an past or pending criminal charges, child-support responsibilities, etc.

Charge/Dates	Outcome/Explanation
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Continue on additional pages if needed.

Name

SSN

ADDITIONAL NARRATIVES

Saint Juan Macias Missioners is committed to answering the Gospel call of service and life with respect to the 12 steps of Recovery. We are interested in your interest and would like to provide prayerful community for you to gather strength and experience in your endeavors. To get to know you better, please give us short reflections on the following topics and attach them with this application.

- 1.A description of your family dynamic and thoughts on how you relate with your family.
- 2.Personal challenges you recognize and would like to work on in your time with us.
- 3.Your thoughts on the term “pastoral care”.
- 4.Your experience and interest in “green” or “sustainable” living and care of livestock.
- 5.Your concerns, needs and hopes regarding living in prayerful community.

Date of Application

Desired dates or length of stay

We are here to assist you as you follow the inspiration of your heart. Feel free to contact us at any point in this process to discuss concerns or questions you may have. We look forward to welcoming you.

DECLARATION

I, _____, attest that the information I have provided is truthful. I also recognize that any information provided is private and confidential, solely used for the discernment of Saint Juan Macias Missioners and for use in obtaining a background check.

Signature

Date

Printed Name

Thank you!

**“Comfort. Give comfort to my people, says your GOD.
Like a shepherd He feeds His flock;
in His arms He gathers the lambs,
Carrying them in His bosom, and leading the ewes with care.”
Isaiah 40:1&11**