



the **lighthouse** foundation

71 Lugsdale Road,
Widnes, Cheshire
WA8 6BG
Tel: 0151 420 9784

www.lighthousefoundation.org.uk

Dear Applicant,

Application for residence at The Lighthouse Foundation

Thank you for expressing an interest in coming to Lighthouse.

We have two properties situated in Widnes and accept men between the ages of 18 and 40.

If you are in need of a place, please complete the enclosed application form and send it with the referral form completed by either a probation officer, key worker, chaplain, resettlement officer or a relative to the above address.

All information is kept strictly confidential. If you are subject to any form of probation or statutory supervision order, please inform your probation officer and ask him/her to contact us, in order that a case transfer can be arranged if you are offered a place at Lighthouse.

If you have any pending court cases, please give our details to your solicitor. If you are offered a place, you will need to bring two forms of identification, one with your NI number. Acceptable forms of ID are: birth certificate, driving licence, passport, etc.

If you need any further information please do not hesitate to contact us.

Yours sincerely

Ian Aitken
Centre Manager

*a brighter future
for hurting lives*



Application for Residency

To be completed by applicant

Surname: _____ Forename: _____

Tel No: _____

Date of birth: _____ NI Number: _____

Present Address: _____

Next of kin: _____ Relationship to next of kin: _____

Tel no: _____ Address (next of kin): _____

Professional Contacts

Social worker/probation officer _____ Tel: _____

Address _____

Solicitor _____ Tel: _____

Address _____

Criminal Offences

If you have a criminal record, please list the nature of offences

Please tell us below if you have any court cases pending or if you are under any statutory supervision order.



Medical Information

To be completed by applicant

Home Doctor: _____ Tel: _____

Address: _____

Do you suffer from any physical illness, disability or allergy? Yes No

Details

Do you suffer from mental health problems eg depression, mood swings, suicidal tendencies or self harm etc? Yes No

Details

Have you been on a detox/rehabilitation programme? Yes No

Details

Do you currently receive any medication? Yes No

Details

Do you currently have an existing tenancy elsewhere? Yes No

Details

The information you have given will be kept confidential. Please return to the address above. Upon receipt we will arrange for an interview to take your application further.

Your signature _____ Date _____

Print Name _____



HOUSE RULES

The following rules apply:

All illegal drugs are completely forbidden. Any resident found in possession should be aware that legal proceedings will be taken.

- No alcohol, either on or off the site.
- No smoking in the houses or anywhere on site, except in the designated smoking corner, only.
- No bad language.
- No mobile phones.
- No gambling.
- No pornography.
- No violence or play fighting. Threatening or intimidating behaviour to another resident or staff member will not be tolerated.

Admissions

All residents must aim to comply with all of the house rules and sign the residency agreement which states that you have read the house rules. It is a contract between the resident and The Lighthouse.

Daily routine

A daily work programme and rota of jobs will be arranged by the staff and will be displayed in the house. All residents are encouraged to take an integral part in the day to day running of the houses. Residents must at all times show respect for all staff and assist them in whatever tasks they are reasonably asked to perform.

Television, music and literature

TV viewing, films, music and literature will be monitored by the staff.

Rooms

Rooms will be allocated at the Manager's discretion. It is the responsibility of each resident to look after his own room and to keep it clean and tidy.

Departure

Residents can leave at any time. If a resident wishes to leave they are requested to discuss it first with staff. If the resident is on Statutory Supervision, it is important that they discuss this in advance with their Probation Officer. Anything borrowed from the Lighthouse Foundation must be returned and all rent arrears must be settled before departure. Re-admission of any previous resident shall be only at the discretion of the Manager, Trustees, and any relevant authority.

I have read and understand the House Rules. I agree to abide by these rules at all times if I am offered a place at The Lighthouse Foundation.

Signed (applicant) _____

Date _____



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Dear Referrer,

Referral of applicants to The Lighthouse Foundation

The Lighthouse Foundation is located in Widnes and is a supported living residential centre and caters for those between the ages of 18 and 40 who are suffering the effects of substance misuse, are vulnerable or are homeless within our community. We are not a drug rehabilitation unit and applicants should be stable before coming to Lighthouse. Applicants need to complete an application form for residency and have a referral form and risk assessment completed by a referrer. If the applicant is subject to any form of statutory supervision by a probation service it is essential that his probation officer is informed and that the probation officer liaises with the national probation service. If the applicant has any pending court cases, the solicitor must be informed.

Contact numbers

Ian Aitken	0151 420-9784
Paul Daniels	0151 420-9784
Daniel Royle	0151 420-9784

We request also that the applicant sign the authority of disclosures to provide Lighthouse with information regarding the applicant's offending history and substance misuse and also a medical disclosure so that we can contact the relevant health care centre.

Yours sincerely,

Ian Aitken
Centre Manager

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Referral and Risk Assessment

To be completed by referrer

Referral Date _____

Referrer's Details

Name _____ Position _____

Address _____

Tel No _____ Email _____

In what capacity is the applicant known _____

Has the referrer interviewed the applicant? Yes No

Is the applicant suitable for The Lighthouse Foundation? Yes No

Applicant Details

Surname _____ Forenames _____

DOB: _____

Current/Last known address _____

Medical History

Does the applicant have any physical disabilities? Yes No

Details _____

Does the applicant have any past or present mental health problems? Yes No

Details _____

Home doctor _____ Tel no _____

Address _____

Does the applicant have any drug/alcohol dependencies? Yes No

If so, please give details of any detox/rehabilitation undergone.

Criminal History

Does the applicant have a criminal record? Yes No

If so, please give details of any offences.

Is the applicant subject to a statutory supervision order? Yes No

Probation officer name _____

Address _____

General Information

Does the applicant have any behavioural problems? Yes No

If so, please give details.

Are there any past occurrences that would pose a risk in a residential setting? Yes No

If so, please give details.

Signature of referrer _____

Date _____



Please read through the following check list and tick the boxes where appropriate. If you have not completed any areas shown here, your application may be returned or delayed.

Please include this form with your application.

Applicant Name: _____ Date of Birth: _____

Referrer

Have you read the letters to referrers? Yes No

Have you fully completed the referrers application form? Yes No

If no please provide details below regarding areas that cannot be completed

Signed (referrer) _____ Date _____

Applicant

Have you read the letters to applicants? Yes No

Have you fully completed the application form? Yes No

If no, please provide details below regarding areas that cannot be completed

Have you read, understood and agree to abide by the house rules for residence at Lighthouse? Yes No

Signed (applicant) _____ Date _____