**A Crozier House Overview**

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| Crozier House is a voluntary 3-6 month Residential Recovery Program serving adult males in a the treatment of Substance Use and ‘Co-occurring Capable’ disorders (ASAM 3.1)  ***All residents are expected to comply with the following requirements while in this program.*** |

* Agree to a 30 day Orientation period, (as described in the Resident Manual).
* Attend all morning and evening groups (whether in-house or outside self-help meetings).
* Meet weekly with your assigned Counselor to design a Treatment Plan and complete all requested paperwork including completing weekly reports, homework assignments, etc.
* Attend a minimum of 5-7 outside self-help meetings per week.
* Find a Home Group and retain (at the very least), a temporary sponsor within 60 days.
* After Orientation stage ends, begin Career Search and find gainful 1st shift employment. (or Volunteer work if deemed appropriate due to SSD, SSI status).
* Engage in and complete all daily household chores, including keeping your room clean.
* Observe all curfews, 5:00pm House Curfew and 6:00pm Dinner Curfew (5:00pm dinner curfew on weekends).
* Follow Cell Phone Policy at all times.
* Submit to drug screens as requested.
* Follow all Crozier House Rules and Program Rules as stated in the Crozier Resident Manual all times. (Manual to be provided at time of admission).

***By signing below you attest that all of the information you have shared or will share during the Intake Interview will be true and accurate.***

**Name of Referent (print):** \_\_\_\_\_\_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**\_\_\_\_\_\_\_\_\_  **Date:** \_\_\_\_\_\_\_\_\_\_\_\_

**Signature of Referent:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**\_\_\_\_\_\_\_\_\_\_\_\_ Date:** \_\_\_\_\_\_\_\_\_\_\_\_

**Signature of Witness: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:** \_\_\_\_\_\_\_\_\_\_\_\_