

Hope Manor

HOUSE GUIDELINES FOR GUESTS

Please read carefully as this is an agreement between residents and Hope Manor

Hope Manor is NOT a housing community; we are a **recovery-oriented** community. Our Philosophy is rooted in the 12 steps of recovery. We are here to encourage you through this life-saving, life-enriching process and to hold you accountable to the following rules and guidelines:

Violation or an inability to comply with the following rules is grounds for immediate discharge from Hope Manor. Please note that if you are mandated by parole, probation or court and you are discharged for any reason that the incident will be reported immediately to the supervising officer. We will also notify the person you list as relative. **No refunds are given under any circumstances.**

Law Enforcement, Parole/Probation officers are granted access to house and info on all residents at anytime.

1. NO use of alcohol or any mind-altering and/or mood-changing drugs.
 - a. If you assist, or allow another resident to use (this includes informing managers in you are aware of another resident in violation) you will be immediately discharged from Hope Manor.
2. All Doctor prescribed medication and all over-the-counter drugs MUST be approved.
 - a. Applications must clearly state any and all medication a person is taking and for what condition, in order to determine whether that person is eligible to be a resident at Hope Manor.
 - b. Hope Manor reserves the right to attend doctor appointments with residents and confirm ALL medical information with Doctors, Dentists, Hospitals, etc., before and during residency at Hope Manor.
 - c. All residents must check with House Manager before taking any medication including over the counter and supplements.
 - d. Residents may not use mouthwash, or any other product, unless it is alcohol-free.
3. Residents must submit to urine drug screens and/or breath tests upon request.
 - a. Refusal to submit to a drug screen and/or breath test will be considered an admission of using.
 - b. Once asked for a urine sample, you MUST produce it within 1 hour and you may not leave the eye sight of manager until results are finished.
 - c. The results of the drug test will be considered final. If resident insists test is incorrect then resident will be taken immediately to ER for a drug test. The test will be at the expense of resident and if positive the resident will not be allowed to re-enter Hope Manor at any time.
 - d. If Hope Manor suspects you are using or drinking, a positive urine result is not required for discharge.
4. Residents are not allowed to work in or go into any alcohol-serving or adult entertainment establishments while at Hope Manor including, but not limited to bars, nightclubs or casinos. Any questionable establishment should be cleared with house manager.
5. If a resident relapses, she/he may be allowed back to Hope Manor after two weeks, with careful consideration by management.
 - a. The period for re-entry and/or length of Phase 1 and 2 may be lengthened by management.

6. Residents will attend AA and/or NA meetings. If resident is employed (20 hours or more) they will attend a minimum of 7 meetings per week. If unemployed (or less than 20 hours) residents will attend a minimum of 14 meetings per week.
 - a. Number of meetings is not negotiable. Treatment/outpatient, Celebrate Recovery, church, sponsor meetings, counseling, etc., do not count as meetings.
 - b. Residents will attend 3 meetings chosen by Hope Manor.
 - c. Residents must participate in the program of AA/NA, which means getting a home-group, a sponsor, commitments, and actively taking the 12 steps.
 - d. Residents **must** have meeting cards signed by house manager or chairperson running the meeting, immediately after the meeting has ended.
 - e. Proper meeting etiquette is required at all meetings. Cards will not be signed if resident is not in seat before meeting opens, leaves before final closing, uses phone or is disruptive in any manner.

7. Each resident is expected to be self-supporting and must contribute financially to the running of the Hope Manor house. Payment of \$250 fee is due on the 1st and the 15th of each month. If fee is not paid or is late, residents may be placed on Financial Probation, which includes:
 - a. A modified Phase I.
 - b. Providing manager with pay stub and a written budget/financial plan.
 - c. If resident is unable to pay, depending upon the individual situation/circumstances, you may be asked to leave Hope Manor.

8. Each resident is allowed to bring the equivalent of 2 large suitcases.
 - a. Residents are responsible for keeping their personal areas neat and clean, including nightstands, dressers, closets, under their bed, etc.
 - b. A resident's clothing and personal belongings must be stored neatly at all times. All rooms are subject to random inspection for cleanliness and contraband. This includes drawers, closets, etc. Please be mindful that limited space means limited belongings.
 - c. Photos, posters etc. must be placed on each person's billboard and are not allowed on walls.

9. Guests and visitors:
 - a. No visitors of the opposite sex are allowed in the Hope Manor houses.
 - b. Adult visitors are only allowed at the invitation of a resident, must be approved by manager and can only be in the common areas of the house.
 - c. All visitors, including sponsors, are allowed from 10am and must leave by 10pm.
 - d. No overnight guest(s) are permitted in Hope Manor houses.
 - e. Sponsors may meet with residents in approved rooms.
 - f. No resident or guest is ever permitted in another person's bedroom.
 - g. If resident has children ongoing visitation guidelines will be determined by management. All visits must be approved by the manager and must take place in the common area of Hope Manor or in the back yard.

10. No Resident may date or have romantic relations with any other Hope Manor Resident who lives in the same house.
 - a. If resident is on probation or parole, she/he must get written permission to spend one on one time with any individual, outside of Hope Manor, who is also on probation/parole.

11. No stealing, fighting, or threats of physical violence.
 - a. Derogatory slurs of any kind will not be tolerated.
 - b. Absolutely no pornographic or racial hate materials allowed in Hope Manor.
 - c. No paraphernalia or weapons are allowed on Hope Manor property at any time.

- d. There is ZERO tolerance of a resident taking other resident's food and a \$50 fine will be charged for all violations.
12. No participation or involvement in any illegal activities.
- a. This includes being in the presence of illegal activities.
 - b. Any and all incidents must be brought to the attention of management immediately.
 - c. All interaction with law enforcement must be brought to the attention of management immediately.
13. At Hope Manor we practice the principle of being self-supporting, as such all Residents are required to work or attend school a minimum of 20 hours per week.
- a. No Resident is allowed to work more than 40 hours per week.
 - b. Residents must supply Hope Manor with work schedule as well as name of immediate supervisor, work phone number and address.
 - c. Curfew is not adjusted for work
 - d. Unemployed Residents must submit at least, but not limited to, 2 applications per day, during the week (Mon-Fri).
 - e. Upon approval daily treatment may qualify as "work."
14. At Hope Manor we believe in a lifestyle of service and "giving back," as such we have occasional mandatory volunteer opportunities in the community.
15. At Hope Manor we believe in participating in recovery events, as such there are 4 mandatory conferences per year.
- a. Registration fee, lodging and travel for these conferences are paid for by Hope Manor.
 - b. Hope Manor will provide letters to residents for Probation Officers and employers, if needed, however it is the resident's responsibility to get any necessary paperwork completed for trips.
16. Residents are required to adhere to curfew.
- | | |
|------------------|--------------------|
| Sun – Thursday | 11:00pm |
| Fri and Saturday | 12:00am (midnight) |
- a. **Adherence to curfew means signing in by times listed and remaining in house.**
 - b. Residents must call house manager if an emergency arises and they are going to be late.
 - c. If resident is late a U/A and Breathalyzer will be given and the cost of tests will be charged to the resident and additional consequences may result depending upon the circumstances.
17. Quiet time is at 10:00 p.m. during the week (Sun-Thurs).
- a. Quiet time is defined as respect of others while sleeping. Residents may read or watch television after quiet time, provided that other residents are not disturbed.
 - b. No use of washer and/or dryer after quiet time.
 - c. No cooking or coffee after 10 pm, however microwave may be used.
18. Mandatory Chores and Hygiene: Chores promote personal responsibility so paying or asking someone else to do your chores is NOT permitted. Failure to have chores completed will result in possible reduction of Phases and/or various other consequences.
- a. Residents are required to have bed made, bedroom tidy and assigned chores completed and signed off on before leaving the premises for the day or by 9:30 am at the latest.
 - b. If resident has to be AT work **before** 7:00am, arrangements can be made to do your chores after work – however this **must** be approved by a manager.

- c. Residents are required to tend to personal hygiene on a daily basis, this includes a daily bath or shower.
 - d. Bedding is to be washed every week and signed off on chart.
 - e. Residents may not sleep on top of comforter, on the couch or floor.
 - f. Deep Cleaning will be done monthly, on a Saturday or Sunday determined by managers. This includes a thorough cleaning of the entire house. Couches and chairs, etc. must be pulled out and cleaned behind. Ceiling fans, shelves, trim, appliances, etc. must be cleaned appropriately.
 - g. No eating or drinking (other than water) is permitted in any area other than kitchen and dining room. Food is not to be left on the counter. All food must be stored in refrigerator or cupboard.
 - h. Washer and dryer may only be run from 8:00 am – 10:00 pm. Loads must be medium to full loads. If any laundry is left in the machines for longer than 30 minutes it will be confiscated.
 - i. No resident shall change assigned bed or rearrange furniture without permission from the manager. No one is to bring in any furniture, or hang anything on walls without approval from Judith Roberts.
19. Residents are required to sign out when they leave from the house and sign in immediately upon returning to the house.
20. No resident may borrow money from another resident.
- a. No resident who is on Phase 1 may use another resident's or nonresident's phone. If a resident allows a Phase 1 to use phone or other electronics there will be a reduction in their phase.
21. All residents are responsible for their own medical condition.
- a. Hope Manor is not liable for any resident at any time.
 - b. In case of emergency managers will notify the authorities and be as helpful as possible but will not be responsible for resident's condition or emergency/medical treatment.
 - c. Residents must inform management of all medical appointments in advance.
 - d. All prescription, over the counter medications and all supplements must be approved by manager and inspected before bringing them into house.
22. Any and all items left at Hope Manor 30 days after a resident leaves Hope Manor will be considered a donation. At no time is Hope Manor responsible for resident's belongings.
23. Hope Manor does not provide transportation and residents are responsible for their own transportation.
- a. No personal vehicles are to be driven without providing Hope Manor with proof of a valid license, registration and proof of insurance on the vehicle to be driven.
 - b. Residents are not allowed to lend their vehicle to any other resident.
 - c. One vehicle per person is allowed on the property or street at Hope Manor.
 - d. Vehicle must be in working condition or it will be towed at owner's expense.
 - e. Everyone with a vehicle is expected to be of service and help other residents get to meetings; residents needing rides should ask 24 hours in advance and are expected to be of service in other ways and/or pay for gas.
24. No Resident should disclose any information about another resident or former resident to anyone outside the community (except parole/probation/law enforcement)

25. After 90 days in the house and on Phase 3 with good standing (current on rent, employed, meeting attendance, chores, etc.) a resident may be granted a 48 hour pass once every 30 days, or a 24 hour pass every 14 days
 - a. Resident must provide a written request by 4:30 pm before manager meeting prior to the requested pass
 - b. Resident must provide time and date of departure from house, return date and time, name, address and phone number of planned location.
 - c. Residents will be given a UA test upon return to the house.
26. No smoking or vaping in house at any time
 - a. Smoking and vaping are only permitted in the designated smoking areas.
 - b. No loitering (or sitting in cars) in front of house or in alley.
27. No TVs, space heaters, humidifiers, personal refrigerators, etc. are permitted
 - a. Do not touch thermostat at any time.
28. Hope Manor may implement other rules or regulations on an individual or the Community as it deems necessary, and reserves the right to use our interpretation of these rules.

Probation Period

The probation period lasts for 30 days. It is divided into two phases.

PHASE I (first 14 days)

1. Resident is **not** allowed to leave premises without a senior house member (phase 2 or 3 resident).
2. Resident must list person they are with on the sign-out board.
3. Resident must provide manager with official work schedule.
4. Resident may work no more than 25 hours.
5. Residents will be allowed to report to work without being escorted and have 20 minutes grace period to go directly to work and directly return from work.
 - a. As circumstances warrant, the House Managers may make exceptions as they feel necessary. This is determined based on whether the request is a need or a want.
6. No visitors during Phase 1.
 - a. **Hope Manor makes exceptions for residents with children (all visits must be approved by the manager 24 hours in advance and must take place in the common area of Hope Manor or in the back yard)**
7. Until the day you start work, you are considered unemployed and must remain on job-search. A minimum of 2 job applications per day must be completed until resident is employed.
8. Cell phones must be turned into manager and will be given to resident for one hour per day, to be used in the common areas.
9. Resident must have a job, a Home Group, commitment at Home Group, a sponsor and Hope Manor CDs must be half-way completed before moving on to Phase 2.

PHASE II (14-30 days)

1. Phone will be returned to resident
2. Resident may leave Hope Manor unescorted for 2 hour periods of time **with** approval of manager.
 - a. Full name, phone number of anyone (outside of house) resident is with during 2 hours
 - b. No Hope Manor resident may spend time with anyone in **active addiction/alcoholism**.
3. Residents have 20 minutes grace period to get to work and return from work.

a. As circumstances warrant, the House Managers may make exceptions as they feel necessary.
This is determined based on whether the request is a need or a want.

4. Resident may submit a written request to work up to 32 hours.
5. Resident must be in good standing on Phase II, all of Hope Manor CDs must be completed, fees paid, and meetings weekly with sponsor before moving on to Phase 3

*** Management reserves the right to lengthen or place a residnet back on Phase I or II at any time if deemed necessary for the sobriety and safety of the resident or house members as a whole.**

*** Print, complete, scan and email back to HopeManorAdmissions@gmail.com OR mail to PO Box 1301 Bismarck, ND 58502**

HOPE MANOR RESIDENT AGREEMENT

Please read the following, initial by each section and sign at the bottom.

_____ I understand that this application needs to be completely accurate and honest. I understand that if the application is not accurate I may be asked to leave Hope Manor immediately and without refund.

_____ The above listed rules were explained to me and I understand them.

_____ I understand that I am a guest at Hope Manor.

_____ I agree to follow these rules during my stay at Hope Manor.

_____ I understand that my continued stay at Hope Manor is contingent upon completion of my 30 day probationary period.

_____ I understand that I must be able and capable to care for myself, comply with daily house requirements, and find employment without the need for supervision.

_____ In consideration of the permission granted me to stay temporarily as a guest in Hope Manor, I promise and agree to observe and abide by all of the rules, regulations and requirements stated above and any further rules that the management may need to include for the smooth running of the facilities.

_____ I promise and agree to peacefully leave the premises at any time that I drink any alcoholic beverages, use any mind-altering chemicals, violate any of the above-mentioned rules or whenever requested to do so by management.

_____ I understand that I will be required to remain drug and alcohol free while living at Hope Manor.

_____ I agree to submit to a urine and breath test at any time and that refusal will result in my immediate discharge, and agree to leave Hope Manor if a positive result comes up.

_____ I agree to waive and relinquish any and all claims and demands for damages which may or might arise in any way and from any cause, whether from personal treatment or any patent/latent defect in the premises or other direct or implied negligence, regardless of the nature and the occasion thereof.

_____ I am not under the influence of any non-prescribed mind or mood altering substances at this time and I understand what I am signing.

_____ I understand that Hope Manor is not responsible for me if I relapse and transportation from the house is my responsibility. I understand that Hope Manor will **only** take me to the homeless shelter upon relapse.

_____ I agree to waive my right to any and all eviction procedures and will leave at Hope Manor's request.
_____ (other conditions) _____

Signature: _____

Date: _____

Hope Manor: _____

Date: _____

APPLICATION (please print carefully)

Scan and email back to HopeManorAdmissions@gmail.com

Or mail to PO Box 1301 Bismarck, ND 58502

Name: _____

Phone number: _____

D.O.B: ___/___/___

SSN: ___/___/___

Female: ___ Male: ___

Desired Entry Date: _____

Planned Exit Date (9 months recommended): _____

Race: _____

How Did You Learn About Hope Manor: _____

Address: _____

State: _____

Zip: _____

Emergency Contact/Relative: _____

Phone Number: _____

How long have you been using alcohol and/or drugs? _____

How do you identify yourself?

Alcoholic only: _____

Drug addict only: _____

Alcohol and drug addicted: _____

List ALL the drugs that you have used in the past 3 years:

1. _____

2. _____

3. _____

4. _____

What was the last drug used and when: _____ History of seizures: Y/N

(This information will be used to determine urinalysis in the future, so be 100% honest)

Sobriety Date (the date of first day 100% without drugs or alcohol): _____

Probation Officer: _____

Phone Number: _____

Attorney: _____

Phone Number: _____

Employment: _____

Phone Number: _____

AA/NA Sponsor: _____

Phone Number: _____

Counselor: _____

Phone Number: _____

Doctor: _____

Phone Number: _____

Marital Status: Single _____ Married _____ Separated _____ Divorced _____

Prior Treatment facilities or centers: _____

Criminal Record:

Do you have **any** mental health issues or diagnosis? Y/N If yes, what: _____

Do you have **any** physical health/medical issues or disabilities? Y/N If yes, what: _____

Have you been prescribed any medications within 6 months: Y/N

List **ALL** medications you are currently taking and last date taken

- | | |
|----------|-------------------|
| 1. _____ | Last taken: _____ |
| 2. _____ | Last taken: _____ |
| 3. _____ | Last taken: _____ |

Are you required to register for **any** purpose? Y/N If yes, why: _____

Are there any Restraining Orders against you or by you? Y/N

Who: _____ Relationship: _____

For office use, only:

Date of discharge: ___/___/___

Reason for discharge:

- | | |
|---------------------------------------------|--------------------------------------------------|
| <input type="checkbox"/> Positive for Drugs | <input type="checkbox"/> Positive for alcohol |
| <input type="checkbox"/> Financial | <input type="checkbox"/> Non-compliance of Rules |
| <input type="checkbox"/> Walk Away | <input type="checkbox"/> Financial/non-payment |

Comments:

