

Potential Program Participant Intake Assessment

Thank you for your interest in becoming a part of Arise & Build Re-Entry Program, Inc. The Intake Assessment is the first step in the process. If you qualify, we will send you an Application Packet to complete, and then schedule a time for an interview

Send this form back via email to andy@ariseandbuildreentry.org or mail to: Arise & Build Re-Entry Program, Inc.

2448 E. 81st Street, Box 55 Tulsa, Oklahoma 74137

The information you provide is confidential and will not be disclosed to anyone outside the

Date:	Arise & Build Re				l avoid unneces		
Name:							
First	Middle		Last			Suffix	
Age: Birth date:	SSN	l :		Gende	r: □ Male	□ Female	Э
Mailing address:							
Street		City		State		ZIF	•
Physical address: Street		City		State		ZIF	<u> </u>
Contact phone numbers: Hom	e:	(Cell:		Worl	« :	
Race/Ethnicity:		_					_
Are you an Indian? □ Yes	□ No Tribe:				CDIB Card	l? □ Yes	□ No
	ORRECTIONA	L FACILI	TY INFOR	MATION			
DOC #:							
Offense:							
	Sentence length:						
Release date:	Type of release expected:						
Parole date:	Case Manger name:						
	Sentence length	า:					
Chaplain name:							
Prior convictions:							
Height: Weigh	nt:	Hair: Court co	ost:	Eyes: _			
Stipulations upon release:							
Are you required to register a Are you required to register a Valid Oklahoma driver's licen	s a violent offer		□ Yes □ Yes □ Yes	□ No			

Basic Needs Upon Release	
Do you have a Social Security Card on file?	es □ No
Do you have a birth certificate in your jacket? ☐ Ye	es □ No
Valid Oklahoma driver's license? ☐ Ye	es □ No
Will you need clothing? ☐ Ye	es 🗆 No
Shirt size: Pant Size: Shoe size	:
Do you have a profession, skill, or trade? ☐ Ye	es 🗆 No
If so, what is it?	
Do you have any tools specific to your trade? ☐ Ye	s □ No
What tools would be required?	<u></u>
Do you have a driver's license? ☐ Ye	s 🗆 No
Do you have to attend DUI school upon release? ☐ Ye	es □No
	es 🗆 No
Make: Model: Year:	Insured? ☐ Yes ☐ No
	es □ No How often?
, ,	es 🗆 No
Are you willing to accept counseling, employment, mutual help	·
offered by Arise & Build Re-Entry Program, Inc.? ☐ Ye	es 🗆 No
Are you incorporated for a violent crime?	o □ No
	es □ No
If yes, please explain:	
Medical Needs	
Do you have any physical disability that would prevent you fro	m performing any type of physical
work?	
If so, what are they?	
	es 🗆 No
,	:: How often:
What are you taking them for?	
Triat are year taking them for:	
Will you need medical attention upon release? ☐ Ye	es □ No
Will you need help obtaining these medications? ☐ Ye	
Will you need mental health services upon release?	
Will you need mental health services upon release!	S LINU
Are you incarcerated for substance abuse? ☐ Ye	es □No
•	5
If so, list substances here:	
Are you willing to take program-related random UAs? ☐ Ye	es □No
, , ,	
Smoke? ☐ Yes ☐ No How long? How	much?

Educational Needs Do you have a high school diploma, GED, of the first of the firs	□ Yes □ Yes □ Yes □ Yes	□ No □ No				
	□Yes	□ No				
Are any of them delinquent?	☐ Yes	□ No				
Family Information Marital status: □ Married □ Divorced Children? □ Yes □ No Child 1: □ Child 2: □ Child 3: Child 3: □ Child 4: □ Child 5: Do you owe back child support? If so, how much? □ Is it court ordered? Employment History List any experience, skills, and/or qualification employment: □ Type of employer/career you wish to pursue	Number: Gender: □ Male □ Yes □ Yes ons which you feel w	☐ Female Age ☐ Female Age ☐ Female Age ☐ Female Age ☐ No ☐ No ☐ No				
Type of employer/career you wish to pursue: Do you have skills in that area? If not, do you want to go to school/vocational training for the skills? □ Yes □ Note that area in the skills? □ Yes □ Note that any jobs you had during incarceration:						
Did you have any misconduct or other violations during incarceration? ☐ Yes ☐ No Explain:						
Longest time at a job: Shortest time at a job: Explain:						
Where do you see yourself in 3 years:						