The Collegiate Recovery House at Case Western Reserve University is a voluntary program offered by University Health & Counseling Services (UH&CS). It is available to those admitted and currently enrolled in undergraduate, graduate or professional schools of CWRU, The Cleveland Clinic Lerner College of Medicine (CCLCM), The Cleveland Institute of Art (CIA), The Cleveland Institute of Music (CIM) and Kent State University College of Podiatric Medicine (KSUCPM).

Acceptance into the Recovery House (RH) is separate from admission to any of the above-mentioned higher education institutions and does not guarantee admission to or continued acceptance of residing in the RH.

We seek to provide and coordinate holistic care for our students. To assist UH&CS in this, questions are asked on this application regarding mental & physical health histories. Responses to these questions will remain confidential in your health record.

The Recovery House (RH) provides students in recovery from substance use disorders and process addictions with:

- Social support and fellowship with other student who are in recovery.
- Referrals to specialized services, such as disability services, tutoring and financial aid.
- Connection to care to address mental and physical healthcare needs, as well as counseling to support sustained recovery.
- Weekly, family-style meal.
- Weekly check-in group participation with all RH residents.
- Ongoing clinical support and case management with the UH&CS Substance Abuse Specialist.
- A safe, supportive environment conducive to recovery.
- Housing within walking distance to CWRU, CIA & CIM. Near public transportation and with resident parking lot on site.

Minimum Requirements for Admission to Recovery Housing:

- Admission and enrollment at CWRU, CCLCM, CIA, CIM, or KSUCPM.
- A period of 6 months abstinence from all mood-altering chemicals.
- Complete Application Process Checklist.

Application Checklist:

- ___ Admission to College/University verified by RH staff.
- ___ Recovery Housing Application - completed in full
- ___ Two letters of support, one being from most recent treatment provider
- ___ Personal Statement
- ___ Interview with UH&CS Substance Abuse Specialist

Completed application should be emailed to: recoveryhouse@case.edu or faxed to: 216-368-1972
Recovery Housing Application

Today’s Date:

Program:

☐ CWRU Undergraduate: Specify year and major:
☐ CWRU Graduate/Professional: Specify program and standing:
☐ CIM: Specify year and major
☐ CIA: Specify year and major
☐ CCLCM Specify academic standing
☐ KSUCPM Specify academic standing

Specify: Year/Academic Standing and Major/Concentration

In what semester would you like to begin residing in the Recovery House?

☐ Fall
☐ Spring
☐ Summer Year:________

How did you learn about the Recovery House?

Personal Information:

Name:
Preferred name if different than legal name given:

Gender: Age: Date of Birth:

Marital Status: # of Children:

Veteran Status:

Street Address:

City, State & Zip Code:

Preferred Email:

Best Phone Number to Contact:
May we leave a voice message?
**Recovery History:**

Recovery Date:

Primary substances used?

What other addictive behaviors (gambling, spending, sex, eating, etc.) do/have you struggled with?

Have you been involved in any university or community criminal, civil or judicial action (hearings, probation, arrests)?

Do you currently attend Twelve Step or other Self-Help/Peer support meetings? If yes, how often do you attend?

Briefly describe how you maintain sobriety and what recovery means to you at this time?

Who are your primary supports in your recovery?

**Medical and Treatment History:**

Have you attended alcohol/drug addiction treatment?

*If applicable (Copy and past for additional sections as needed):*
  
  Name of treatment provider:
  Location:
  Type of treatment (Inpatient, IOP, Outpatient):
  Completed: Dates of participation:

What are your current medical needs or concerns?

Have you ever been admitted to a psychiatric hospital?

*If applicable (Copy and past for additional sections as needed):*

  Name of hospital:
  Location:
  Dates:
  Reason:
Have you ever received treatment for a mental health diagnosis?

*If applicable (Copy and past for additional sections as needed):*
  - Name of treatment provider:
  - Location:
  - Type of treatment (Inpatient, IOP, Outpatient):
  - Completed: Dates of participation:

Are you currently prescribed any medications?:

*If so, list all medications currently prescribed (Copy & paste additional sections as needed):*
  - Medication:
  - Prescribed by:
  - For what:
  - Dosage/Frequency/Time:

**Recovery House Activities and Responsibilities**

As a resident of the Recovery House, you are expected to meet with staff at the University Health & Counseling Services to formulate a recovery treatment plan. You will be expected to attend all house meetings, including a weekly group counseling session and a weekly group dinner (prepared by the residents); you will be expected to regularly participate in various group activities which may include recreation, academic support, discussions and assigned chores.

Are you willing to participate in all of these activities?

- Yes
- No

Comments:

**Statement of Confidentiality & Respect for Residents**

Residents of the Recovery House commit to maintain the confidentiality of others living in the house by not sharing their identity and by not disclosing personal information about the residents with anyone who is not a house resident unless you are given permission by a resident to do so.
Would you be willing to make this commitment?
  □ Yes
  □ No

As a resident of the Recovery House, it would be expected that you are respectful of others in the house with differences in race, religion, age, sex, disability, sexual orientation, gender identity, veteran status and national or ethnic origin.

Would you be willing to make this commitment?
  □ Yes
  □ No

**Person to Contact in Case of Emergency**

Name:                      Relationship:
Address:

Phone Number(s):

**Signature of Applicant:**      **Date:**

See following page for further information on the Personal Statement and Letters of Support.
Personal Statement

In the comprehensive personal statement, please include the following:

● How living in the Recovery House can help you achieve your goals?
● What additional university services and community supports would be beneficial in helping you meet your goals?
● What would be helpful for us to know about you to help support you in your recovery?

Letters of Support

Two letters of recommendation must be included with application to reside in the Recovery House.

● One letter of recommendation should be completed by your most recent treatment provider who can discuss their evaluation of the applicant’s likely success in continued recovery and in higher education.
● The other letter should be written by someone who has knowledge of and been a support in your recovery process.