



R³ ACADEMY APPLICATION

R³ Academy is an opportunity for guests of the Eugene Mission to move beyond temporary Rescue Shelter and address barriers and areas of impoverishment in their lives that hinder positive, forward movement.

R³ Academy will focus on 8 Areas of Wellness:

- Health
- Resilience
- Learning
- Finance
- Spiritual
- Social
- Community & Environment
- Vocation & Service

Though there are general requirements, every participant's path and plan will be unique and specific to the Areas of Wellness YOU identify and to which YOU commit to working on with our Navigator Team's support.

Program Criteria:

- Able to participate in assigned and chosen courses and Life Skills without significant disturbance.
- Ability and willingness to engage with a Navigator to establish an Individual Action Plan (IAP), set goals, and actively work toward meeting those goals.
- Maintain sobriety and submit to randomized drug testing.
- Must not interfere with other participants' success in the program. R³ Academy and the Eugene Mission are committed to providing a safe environment. Participants must refrain from words or actions that reasonably create a harassing, disrespectful, or unwelcoming atmosphere or that are otherwise reasonably counterproductive to another participant's ability to achieve their IAP goals.
- If experiencing significant mental or physical health concerns, participants must be willing and able to follow a treatment plan administered by an appropriate health care provider.

If you apply to enroll in the R³ Academy, you agree to actively work to meet your established goals and action plan. You must agree to sign a release of information that pertains to various agencies in the Lane County area that will allow us to communicate and access community resources such as housing on your behalf. In return for your participation, you will earn credits towards your graduation requirements. Participants who successfully complete the program will be part of a graduation ceremony!

Media of you and your successes in program will be taken and used to promote you and the Eugene Mission's R³ Program.

APPLICATION STATEMENT & RELEASE

I wish to be admitted to the R³ Academy at the Eugene Mission. I understand that participation is voluntary and may be terminated at any point by the Eugene Mission or me. If the Eugene Mission determines that any of the information submitted in this application or any other documentation that I have provided is false, that I may be immediately disqualified from consideration for attending and/or may be discharged from the Academy. I hereby grant permission to the Eugene Mission to investigate information contained in this application and release the Eugene Mission and any agents or other persons acting on behalf of the Eugene Mission from any and all liability relating to any investigation of the information contained in this application.

I hereby release the Eugene Mission and its agents from all actions, claims, or demands that I or my representatives now have or may hereafter have for injury, death, or damage to myself and/or my property resulting from my participation in Eugene Mission Academy activities. This includes actions, claims, or demands resulting in whole or in part from the action or inaction of the Eugene Mission or its directors, officers, agents, employees, or volunteers. I attest that my attendance and involvement in these activities is voluntary, that I am participating at my own risk, and that I have read the terms and conditions of this release.

Academy members who engage in services at the Eugene Mission are occasionally included in Eugene Mission publicity, publications, and public relations activities. I grant the Eugene Mission the irrevocable right to use forever any photographic images and video or audio recordings that will be made during my activities with the Eugene Mission, and I agree to appear without pay.

As an Academy member, I understand that I may work with donor information, staff information, and resident or guest information that may be confidential in nature. I will not discuss this information with anyone who is not directly involved in these areas. I understand that failure to maintain confidentiality may result in immediate release from the Academy. My obligation to comply with this policy continues after my involvement with the Eugene Mission ends.

Further, please be aware that “The Eugene Mission staff is bound by Mandatory Reporting Requirements. Evidence or suspicion of not previously reported child abuse, elder abuse, or disabled person’s abuse shall be reported to protective services agencies as appropriate.” (Note: This applies even when an adult is reporting abuse that happened to them as a child.)

I have read the aforementioned Application Statement, academy criteria, and information referenced above and, if selected, I agree to participate in the Eugene Mission’s R³ Academy.

Guest Signature

Date

Staff Signature

Date

eugene mission

Rescue + Revitalize + Restore

Are you a registered sex offender? Yes No
 If so- what risk level were you put at? Level _____
 Are you currently on parole or probation? Yes No
 If so- Can you provide us with paperwork? Yes No
 Have you ever been convicted of arson? Yes No
 Do you have a diagnosed mental health disorder? Yes No
 Have you ever attempted self-harm/ suicide? Yes No
 If the answer is yes- when was your last attempt? Date _____

PERSONAL INFORMATION

Service Point # _____

Your Name:

 Last Name First Middle

Gender _____

Have you used any other alias? Yes No Alias: _____

Social Security #: _____ - _____ - _____ Date of Birth: _____ - _____ - _____

Age: _____ Birthplace: _____ US Citizen: Yes No

Last Place of Residence:

 Street City State Zip

Current Phone Number: () _____ Are you a Veteran? Yes No

Informed Consent

I have read and fully understand the information referenced in this application and I have decided to apply for the R³ program. I commit to follow academy policies and will submit to academy expectations. I certify that the information contained in this application is true and correct to the best of my recollection.

 Print name Date

 Signature