

**TRANSFORMING - RESTORING - ESTABLISHING - KINGDOM LIFE**  
**The HopeQuest Ministry Group, Inc.**



# *Application Package*

*"And do not be conformed to this world, but be transformed by the renewing of your mind, that you may prove what is that good and acceptable and perfect will of god."*

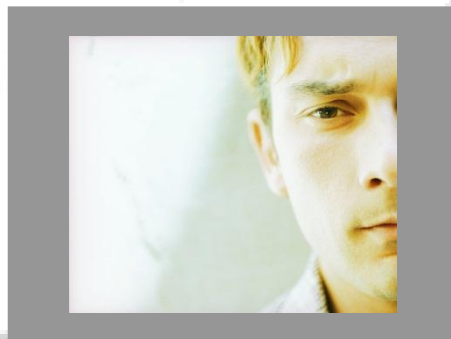
*Romans 12:2*

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## Residential Discipleship & Pastoral Counseling Program

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The TREK Program  
The HopeQuest Ministry Group, Inc. © 2011  
P.O. Box 2699  
Woodstock, GA 30188  
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# TREK Program Application Package

*"For I know the plans I have for you, declares the Lord, plans to prosper you and not to harm you, plans to give you a hope and a future." Jeremiah 29:11*

## About The Program:

The TREK Program is a Christ-centered Christian Residential Discipleship Program for people who have life dominating issues related to substance abuse and/or sexual brokenness. This is a 36-week program. The first 12 weeks are In-House (Residential) and the last 24 weeks are Continuing Care (outside the program). Those applying must be willing to stay up to 12 weeks, uninterrupted, and are not eligible to work outside of the program. All clients must participate in the Continuing Care Program to get a letter of completion.

This application must be completed in its entirety, and mailed or faxed to the found in the front of this packet. (See "The Selection Process" in the Application for detailed information about this process)

A personal or telephone interview must also take place before an individual is considered for the program.

Should your application be accepted you will be brought into the TREK Program for a two-week probationary period while the staff team more thoroughly evaluates your potential to succeed and be helped by our ministry program.

Should that evaluation result in positive findings, you will then be given status in Phase 1-Active of the TREK Program. Otherwise, you will be asked to leave after that two-week period. Our Admissions Staff will be happy to discuss this aspect of our program with you. Our intent is to make sure that everyone who diligently and purposefully works through the requirements of the TREK Program will, in fact, find Transformation, Restoration, and the true Establishing of Kingdom Life.



## Requirements For Admission

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- Must be at least 18 years of age.
- Applicants between 18-25 years of age will be considered on an "Exception" basis.
- Recognition of ones life dominating issue(s) and willingness to seek help in a Christ-centered environment.
- There is a one time, non-refundable Application Processing Fee of \$25.00.
- Tuition for the TREK Residential
- Program covers room and board, transportation, books, tests, and must be paid in full upon arrival.
- A \$500 non-refundable deposit will 'hold a bed' for you.
- Abstinence from the use of all tobacco, drugs, alcohol is required.
- Detoxification from all drugs and alcohol for a minimum of 72 hours is required.
- If a client wishes to use a nicotine patch, this will only be permitted for a period no longer than 14 days from intake and will be distributed by the house mentor. Patches must be 14mg or less, nicotine gum is not permitted.
- A willingness to remain in the TREK Program for 12-weeks (uninterrupted).
- Physically able to perform duties such as household chores, lawn maintenance and community outreach and to do such with a good attitude.
- Mentally stable and capable of functioning in a classroom environment, as well as a group counseling environment.
- Applicants must agree to abide by all the program guidelines and directions of the staff and leadership, and to cooperate totally in the program and its activities. Violation of the program guidelines may result in disciplinary measures including dismissal.
- \*Any donations made to the ministry program are not considered fees, and therefore will not be refunded in the event a participant either leaves or is dismissed from the program.

**Program cost, Fees, & Donations paid are Non-refundable**

## The HopeQuest Ministry Group, Inc.

DIRECTOR OF APPLICATIONS & ADMISSIONS  
SONNY BETROS

P.O. BOX 2699 - WOODSTOCK, GA 30188  
OFFICE PHONE (678) 391-5950 - FAX (678)391-5969  
EMAIL: [sonny.betros@hopequestgroup.org](mailto:sonny.betros@hopequestgroup.org)

[www.hqmg.org](http://www.hqmg.org)

## What Clients May Bring:

The following are defined limits, and you do not have to bring all the listed items. But, you may not bring more than the specified list suggests.

- Two weeks appropriate clothing with consideration to climate and season. Casual will be appropriate for most days activities. Work clothes will be needed for some scheduled mission projects. Dress clothes will be needed for Sunday Service.
- Sleeping apparel, which must be worn while sleeping. Only wearing undergarments is not permitted during sleeping.
- Hygiene items (cannot contain alcohol),
- Book Bag, Pencils/Pens & a 3 inch 3 ring binder,
- 1 Booklet of stamps for personal mailing,
- Alarm clock,
- Small bag or Tupperware container to hold hygiene items,
- Musical instruments are not permitted until approved, in writing, by the Clinical Programs Officer.

## What Clients May Not Bring:

- Cell phones and/or Pagers are not permitted.
- Computers, PDA's, or any other form of electronic device is not permitted.
- Any medications or over-the-counter products without the expressed written approval of the Clinical Programs Officer are not permitted.
- No more than \$100 in their possession and should make arrangements for off-premise safe storage of cash and valuables before arrival.
- Books or magazines that contain pornography and/or sexual content, foul language or anything contrary to Biblical teachings (HopeQuest Staff judgment is final).
- Clothing that is crude, immodest, or promotes lifestyles that are contrary to Biblical teaching. Clients participating in the TREK Program may not bring the following: Shirts without sleeves, or that are revealing in any way; pants that do not fit on the waist, cannot be worn at the hips without a belt, or that have holes in any questionable location; any body jewelry; underwear that is incomplete (thongs, g-strings, or similar is not permitted at any time) (HopeQuest Staff judgment is final).
- Secular music, alcohol, or tobacco products.
- Any item(s) deemed harmful or non-conducive to recovery or Christian growth (The HopeQuest Ministry Group, Inc. reserves the right to give approval or non-approval of all items.) If you are unsure about whether or not an item would be 'OK' to bring, either leave it at home or contact the Admissions Staff for clarification.
- Cologne, body spray, perfume, and lotion.

## **Bring The Following Information With You:**

- Names, addresses and phone numbers of:  
    Your Probation/Parole officer (if applicable)  
    Lawyers & Copies of any current or pertinent Court Orders (if applicable)
- All members of your immediate family who might wish to communicate you while you are in the program.
- Person to notify in case of emergency.
- **All probation and court issues should be settled prior to admission or postponed until after program completion.**
- Any prescribed medication you are currently required to take as ordered by your physician. Please acquire, and bring with you, enough medication to last the duration of the 12 week residential process. (Must be in an official package prescribed by a doctor and dispensed by a pharmacist).
- Driver's License, State Identification, Passport, or VISA information.
- Social Security Card for identification
- Health Insurance Card (if applicable)

## Financial Policy Concerning Reimbursements:

1. There is a one time, non-refundable Application Processing Fee of \$25.00. The Application will not be considered until the Application Processing Fee is paid.
2. Tuition for the TREK Residential Program (12 weeks) is acquired by calling the office.
3. Unless monies are designated, by a donor, to be used toward payment of a client's program fees, the monies will be considered a donation, which is tax deductible. However if a donation is made towards payment of a client's program fee it is then in fact a program fee and cannot be considered a donation and therefore is not tax deductible. This designation must be made at the time of the gift and cannot be changed once the gift is made.
4. In the event a program participant leaves the ministry program, for any reason, including dismissal all program fees and/or donations paid by or on behalf of the client are non-refundable.
5. Donations made to The HopeQuest Ministry Group, Inc. are non-refundable.
6. To hold a place in the program, a client must pay a \$500 deposit which is non-refundable.
7. The client application fee and program fee must be paid in full on or before the time of intake.
8. Admission will not continue on date of intake if there is an outstanding balance on the account.

### Acknowledgement and Understanding of The HopeQuest Ministry Group, Inc. Financial Reimbursement Policy.

I have read and understand The HopeQuest Ministry Group, Inc. Financial Reimbursement Policy and I agree to respect and abide by them during my involvement in the TREK Program.

Dated this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature



# Ministry Doctrinal Statement

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The following represents the HopeQuest Ministry Group, Inc. position on our essential beliefs:

**About God** – God is the Creator and Ruler of the universe. He has eternally existed in three persons: the Father, the Son, and Holy Spirit. These three are co-equal and are one God.

**About the Father** – He is all powerful, all knowing, all loving, and all wise. He reigns with providential care over the universe and the flow of human history goes according to His purposes and plan.

**About Jesus** – Jesus Christ is the Son of God. He is co-equal with the Father. Jesus has eternally existed and became man at His incarnation. He lived a sinless human life and offered himself as the perfect sacrifice for the sins of all people by dying on a cross. He bodily arose from the dead after three days to demonstrate His power over sin and death. He ascended to Heaven's glory and will return again someday to earth to reign as King of Kings and Lord of Lords.

**About the Holy Spirit** – He is the third person of the Trinity. He guides men into all truth, exalts Christ, convicts of sin, righteousness and judgment, cultivates Christian character, comforts believers, bestows spiritual gifts by which believers serve God and seals the believer unto the day of final redemption. His presence in the lives of believers is the assurance of God to bring us into the fullness of the stature of Christ.

**About Scriptures** – The Bible is God's Word to us. Human authors, under the supernatural guidance of the Holy Spirit, wrote it. It is the supreme source of truth for Christian beliefs and living. Because it is inspired by God, it has salvation for its end and is truth without any mixture of error.

**About Human Beings** – People are made in the image of God and are the supreme object of God's creation. All of us are marred by an attitude of disobedience toward God called sin. Sin separates people from God and causes many problems in life.

**About Salvation** – Salvation is God's free gift to us, but we must accept it. We can never make up for our sin by self-improvement or good works. Only by trusting Jesus Christ as God's offer of forgiveness can anyone be saved from sin's penalty. When we turn from our self-ruled life and turn to Jesus in faith we are saved. Eternal life begins the moment one received Jesus Christ into his life by faith.

**About Eternal Security** – Because God gives us eternal life through Jesus Christ; the true believer is secure in that salvation for eternity. If you have been genuinely saved, you cannot "lose" your salvation. Salvation is maintained by the grace and power of God, not by the self-effort of the Christian. It is the grace and keeping power of God that gives us this security.

**About Eternity** – People were created to exist forever. We will either exist eternally separated from God by sin or eternally with God through forgiveness and salvation. To be eternally separate from God is Hell. To be eternally in union with Him is eternal life. Heaven and Hell are real places of eternal existence.

**About Baptism by Immersion** – We believe that scriptural baptism must be: (1) by being completely immersed under the water and (2) after salvation. Jesus was immersed and all baptisms in the New Testament were by immersion. These two facts set the standard for baptism today. Baptism has no saving power but is the first act of obedience symbolizing (1) the believer’s faith in the death, burial, and resurrection of Jesus, (2) the believer’s death to sin and resurrection to walk anew in Christ, and (3) the Christian’s belief that he will die, be buried, and that Jesus will resurrect him from the dead.

**About the Lord’s Supper** – The Lord’s Supper is a symbolic act of obedience whereby believers remember the death of the Lord Jesus and anticipate His second coming. The bread is symbolic of His body and the juice represents His blood.

**About Tithing** – We believe in giving the tithe – ten percent of our gross income (not net income) – as the biblical standard of giving. The tithe is to be given as an undesignated offering to the “storehouse” ministry of a local church. According to the Scriptures, we are to give cheerfully, regularly, systematically, proportionately, and liberally for the advancement of the Redeemer’s cause on earth.

**About Evangelism** – It is the duty of every born again follower of Jesus Christ and of every church to endeavor to make disciples of all men everywhere. It is the command of Christ for every believer to seek constantly to win the lost to Christ by personal effort and by all other methods in harmony with the gospel of Christ.

**About the Church** – A New Testament church of the Lord Jesus Christ is a local body of baptized believers who are associated by their common faith and fellowship with Jesus. A local church is to observe the two ordinances: (1) baptism and (2) the Lord’s Supper. The church should exercise their God-given gifts and extend the gospel to the ends of the earth. The church is an autonomous body serving under the Lordship of Christ. All members are equally responsible as they serve under the spiritual authority of the pastor.

**About Christian Unity** – To live in harmony with other believers is clearly the teaching of the New Testament. It is the responsibility of each believer to endeavor to live in fellowship with each member of the congregation. It is further the responsibility of each member to bring all gossiping and backbiting to an end.

**Acknowledgement and Understanding of The HopeQuest Ministry Group, Inc. Doctrinal Statement.**

I have read and understand The HopeQuest Ministry Group, Inc. Doctrinal Statement, and I agree to respect and abide by them during my involvement in the TREK Program.

Dated this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name



## Loved Ones Information Sheet

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This part of the application package contains significant information gathered to elaborate on specific elements of the TREK Residential Program. It is our intent that this information be used to clarify our policies on behalf of the support network, family, and loved ones of our newly accepted applicants.

### **Safekeeping: No Contact**

In the Client Handbook there exists a set of guidelines that completely limit the new clients' communication with all his/her personal relationships outside the therapeutic environment. This is a protective element of our rule structure that is temporarily implemented for a season of evaluation and special protection. Consistent with our commitment to protect your loved one, we are taking no chances with their decision to be here. We have developed the "No Contact" parameters to assist them in making good choices.

Significant and close relationships most often have developed a significant, intimate and vulnerable connection. It is this vulnerability that we want to be very careful with. The "no communication" season will give you, your loved one and his/her staff worker a chance to evaluate his/her significant relationships. It will give all parties involved an opportunity to ascertain in what ways the relationship will be beneficial to their recovery process. When the time is right, structured communication will be reestablished.

\*If you are a family that lives in the local area: All program parameters apply. No communication will be permitted until the client has earned the freedom to do so, as consistent with policy and procedure.

Please take this opportunity to process and pray through this aspect of your loved one's program. If you have any questions, a Admissions Staff member's name and contact information is provided in this packet.

### **Successful Living Seminar: Friends & Family**

A *Successful Living Seminar: Friends & Family* will occur while the client is participating in the TREK Program. The TREK Program clients will invite significant persons to Woodstock, GA in order to participate in this seminar. If you are invited and choose to attend; you will be taught the same tools and communication skills your loved one is taught. You will be challenged and encouraged to share your true honest feelings in a safe, productive, structured environment. Very often things that have needed to be said for years finally get said. Although we value a season on no-communication, we are committed to the restoration of the entire family and support network. The hope is that the season of no communication will enhance the potential for greater healing and health in the entire family dynamic. We have seen this come to fruition many times and hold our hope that it will happen for you and your entire family.

### **Extended Phase Weekends Away:**

If the client chooses, and is invited to stay for an Extended Term, they may be allowed the privilege of temporarily leaving the program and visiting family for one weekend. However please note that He/She will only be allowed to visit with family members who have come to and attended the Successful Living Seminar: Friends & Family. We want to make sure that their

first substantial time away from the protected environment of the program is with the supportive of the decisions they have made.



# Program Application

Please answer each question as honestly as possible. Please print legibly – do not type.

## Part One: Personal Information

Full Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Sex:  Male  Female Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Daytime Phone :({\_\_\_\_}) \_\_\_\_\_ Evening Phone :({\_\_\_\_}) \_\_\_\_\_

Marital Status:  Single  Engaged  Married  Divorced  Widowed  Separated

Name of Spouse: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Years Married: \_\_\_\_\_ Spouse's Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

This is your \_\_\_\_\_ marriage. This is your spouse's \_\_\_\_\_ marriage.

If you are divorced or separated: for how long? \_\_\_\_\_

Have you discussed your desire to participate in the TREK Program with your spouse?  Yes  No

If yes, is she supportive of your desires?  Yes  No

If no: why not?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of Children: \_\_\_\_\_ Age: \_\_\_\_\_ Grade – School/Home School: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Part Two: Education

Did you graduate from high school?  Yes  No If yes what year? \_\_\_\_\_

Did you attend college or continuing education?  Yes  No

If yes, what school?

City: \_\_\_\_\_ State: \_\_\_\_\_ Major: \_\_\_\_\_

Did you graduate?  Yes; Date: \_\_\_\_\_ GPA: \_\_\_\_\_

No How many year(s) did you complete? \_\_\_\_\_ GPA: \_\_\_\_\_

Did you attend any type of religious school or training (Bible School, etc.)?  Yes  No

Name of School: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Denomination: \_\_\_\_\_ Dates attended: \_\_\_\_\_

## Part Three: Spiritual Information

Has there been a time in your life when you received forgiveness of sin and received Jesus Christ as you Lord and Savior?  Yes  No  Unsure

Spiritual birth date: \_\_\_\_\_ Have you been baptized?  Yes  No  Unsure

Tell briefly how you came to have a personal relationship with Jesus Christ:

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Have there been any changes in your spiritual life?  Yes  No If no, please explain:

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**TREK APPLICATION PACKAGE**

Please list all your past denominational/religious affiliations and amount of time with each starting with the most recent (i.e., Mormon, Baptist, Church of God, Jewish, Catholic, etc.)

Church Name/Affiliation:	Amount of time:
_____	_____
_____	_____
_____	_____

Do you attend a local church now?  Yes  No If no, please explain:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If yes, give name of church:

\_\_\_\_\_

Your denomination:

\_\_\_\_\_

How long have you been attending this church?

\_\_\_\_\_

Mark appropriate boxes to describe your church involvement:

Sunday attendance       Mid-week service       Weekly Bible study group

Other activities – please list: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name of Pastor you are closest to:

\_\_\_\_\_

Have you told your pastor about your interest in being a part of the TREK Program?

Yes  No If no, please explain why not:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**TREK APPLICATION PACKAGE**

Give three reasons why you want to go through the TREK Program.

1. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
3. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you willing to do whatever it takes to be healed, delivered, and transformed? \_\_\_\_\_

Explain your answer: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What 'exactly' would you like God to do for you right now?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Part Four: Relational/Life Dominating Issues

Describe your relationships with male authority figures:

- Appreciative    Comfortable    Distant    Fearful    Anxious    Other

Describe your relationships with female authority figures:

- Appreciative    Comfortable    Distant    Fearful    Anxious    Other

Are you, or have you been in an emotionally dependent/exaggerated relationship?

- Yes    No   If yes, was this with:    Men    Women    Both

I have been involved in the following inappropriate activities: (Mark all applicable boxes)

- Homosexual behavior    Pornography    Sexual promiscuity    Adultery  
 Pedophilia/Pederasty    Compulsive/Frequent masturbation  
 Frequent adult bookstores

I have used the following substances:

- Steroids    Alcohol    Inhalants    Opiates    Marijuana    Hallucinogens  
 Cocaine    Nicotine    Ephedrine    Amphetamines/Meth    Barbiturates  
 Benzodiazepines

If your answer to Controlled Substances is yes, list all substance(s) you have used and when was the last time you used it? Use a separate piece of paper if you need more room.

**Substance:**

**Last Time Used:**

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What benefit did you gain from the use of this substance?

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Do you still use or struggle with wanting to use drugs?  No  Still use  Struggle

Do you consider yourself to be in recovery from an alcohol/drug problem?  Yes  No  
If yes, how long have you been completely sober?

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Describe your spiritual resolution of any of the items checked:

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Were you abused (physically, sexually, emotionally, verbally, etc.) by your parents or others?

Yes  No

If yes, describe: \_\_\_\_\_

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## Part Five: Health and Other Information

Have you ever had, been diagnosed with, or been treated for any of the following?

- Depression     Anxiety attacks     Migraine headaches     Eating Disorder
- Drug Abuse     Alcoholism     Schizophrenia     Bipolar Disorder
- Obsessive/Compulsive Disorder
- Borderline Personality Disorder     Other: \_\_\_\_\_

If you checked yes to any of the above, when and for how long?

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Who gave the diagnoses?

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Are any of these still a problem for you?  Yes  No

If yes, which one(s)?

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Are you currently under a Family or Medical Doctors Care?

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Are you on any medications? \_\_\_\_\_

What are your medications? How much is prescribed?

Name of Medication(s):	How much do you take?
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

**TREK APPLICATION PACKAGE**

Have you ever contemplated or attempted suicide?  Yes  No

If yes, give details:

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Have you ever been arrested for any reason?  Yes  No

List all past charges and Arrest:

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Probation Officer Name: \_\_\_\_\_

Probation Officers' Phone Number: \_\_\_\_\_

Charges Pending:

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Were charges drug related?  Yes  No

Please provide the names, address, and phone numbers of Doctors, Counselors, Psychiatrists, Therapists, & other Specialist that you are currently seeing or have seen in the past.

<u>Name:</u>	<u>Address:</u>	<u>Phone No:</u>	<u>Reason for visit</u>
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**TREK APPLICATION PACKAGE**

Please provide the names, address, and phone numbers of any treatment programs and recovery groups or programs that you are currently involved in or have been involved in the past.

**Name:** \_\_\_\_\_ **Address:** \_\_\_\_\_ **Phone No:** \_\_\_\_\_

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**Part Six: Financial Information**

Do you have a checking account?     Yes    No    Do you have a savings account?    Yes    No  
 Do you tithe or give regularly to your church?    Yes    No  
 Do you struggle with compulsive spending?    Yes    No  
 Have you filed an income tax return for each of the last five years?    Yes    No    If "No," please explain: \_\_\_\_\_

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Please list your current debts:

	<u>Amount Due</u>	<u>Monthly Payment</u>	<u>Pay-off Date</u>
Car Loan			
Student Loan			
House Loan			
Major Credit Card -1			
Major Credit Card 2-			
Other Credit 1			
<i>Other Credit 2</i>			
<i>Alimony / Child Support</i>			
<i>Other</i>			

## Part Seven: Vocation/Work History

Please list your work experience for the past three jobs beginning with your most recent job held. If you were self-employed, give firm name. Attach additional sheets if necessary.

Name of employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
Name of last supervisor: \_\_\_\_\_  
Employment dates: \_\_\_\_\_ Pay: \_\_\_\_\_ or salary: \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_  
Phone number: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_

Your last job title: \_\_\_\_\_  
Reason for leaving (be specific): \_\_\_\_\_

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
Name of last supervisor: \_\_\_\_\_  
Employment dates: \_\_\_\_\_ Pay: \_\_\_\_\_ or salary: \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_  
Phone number: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_

Your last job title: \_\_\_\_\_  
Reason for leaving (be specific): \_\_\_\_\_

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
Name of last supervisor: \_\_\_\_\_  
Employment dates: \_\_\_\_\_ Pay: \_\_\_\_\_ or salary: \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_  
Phone number: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_

Your last job title: \_\_\_\_\_  
Reason for leaving (be specific): \_\_\_\_\_

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Part Eight: Signature

- I hereby declare that, to the best of my knowledge and understanding, all of the above statements made by me are correct and represent my true opinions of each question asked.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

- I understand that program costs, fees and donations are non-refundable.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

Did you complete this application yourself  Yes  No

If not, who did? \_\_\_\_\_

## Part Nine: Completing the Application Process

Please examine each section and their instructions carefully. We will not be able to process your application unless all aspects have been successful completed. Please mail us your completed, signed, and dated application, and include the following items:

1. A Personal Biography of at least 3 pages.  
Please include the following in your Personal Biography:
  - Some family history, your current relationship with your father and mother.
  - Your current relationship with your spouse and children.
  - Your past sexual involvement and/or struggles.
  - Your salvation experience.
  - State your denominational experience or involvement?
  - Address specific areas of support and/or instruction you desire to receive in coming to the TREK program.
  - What are your expectations of the TREK program? What changes do you expect to see in yourself as a result of your completion of the program?
2. A recent photo (taken less than six months ago).
3. A photocopy of your Drivers License and/or a Birth Certificate.
4. Application special forms:
  - **Four References forms** (three from non-relatives and one from a parent, if possible)
  - Acknowledgement and Understanding to support The HopeQuest Ministry Group, Inc. Doctrinal Policies.
  - Tuberculosis (TB) Verification. Can be done at any health Clinic. TB tests expire after 6 months.
5. Application **Processing Fee** (non-refundable) of \$25.00 made out to The HopeQuest Ministry Group, Inc.
6. We will need a **Criminal Records Background Check** sent to The HopeQuest Ministry Group, Inc. You can go to your local Sheriff's office and request one. It will need to be in the possession of The HopeQuest Ministry Group, Inc. prior to admission.

## **Part Ten: Reference Forms Instructions**

This packet includes one confidential reference form that may be copied. You must give these to people you have known for AT LEAST SIX MONTHS who are not related to you. Please include your pastor or spiritual authority for at least one of these references. At least two of these three forms must be filled out by someone of your same sex. It is important that these forms remain confidential so that the individuals filling them out can be completely frank and honest in their assessment of you. Therefore, you need to instruct your references to mail back the forms directly to our office. We will not process your application until all three references have been received.

It is expected that if your parents are living and you are presently in communication with them that you ask them to complete a Reference form, in addition to the three non-relative reference forms. **If your parents are deceased or communication is presently blocked please include an additional paragraph explaining the present details as part of your personal biography.**

## **Part Eleven: Doctrinal Statement Instructions**

This packet includes The HopeQuest Ministry Group, Inc. Doctrinal Statement, and the Acknowledgement and Understanding of Doctrinal Statement form. Please read The HopeQuest Ministry Group, Inc. Doctrinal Statement; sign the Acknowledgement and Understanding of Doctrinal Statement form, and send this in with your application.

## **Part Twelve: Follow-up Information**

If we need additional information or if part of your responses is unclear to us, we may arrange for an additional phone interview with you. If we phone you, we will be discrete in how we identify ourselves in case someone else answers the phone or you have an answering machine.

## Part Thirteen: The Selection Process

The HopeQuest Ministry Group, Inc. staff will review your application and respond with a decision within 15 days of receiving your completed application packet. There is a limited amount of space in the TREK Program. Application submission does not mean automatic selection. We believe that God's sovereignty will be evident in this process.

- A. Once your application with **all** the following related materials, **have been received**, the staff will review the material to determine your eligibility for the TREK program.
  - Personal biography: a detailed family history, as well as your current relationship with your father and mother. Also describe any other relationships, both inside and outside the family, that have played an important role in your formation and development. Be sure to give ample space to problematic relationships and traumatic events that you see as connected to your current struggles.
  - Personal History Release form,
  - A recent photo (taken less than six months ago),
  - A Driver Licenses and/or a Birth Certificate,
  - Four Reference forms (three non-relative, and one parent if possible),
  - Application Processing fee [\$25.00:Non-Refundable],
  - Acknowledgment and Understanding of the Doctrinal Statement
- B. If the staff agrees to move forward, a face-to-face interview will take place. In the event that a face-to-face interview is not possible, a telephone interview will take place.
- C. You must have a willing attitude to abide by all of the TREK program polices, guidelines, and submit to the leadership of The HopeQuest Ministry Group, Inc.
- D. Should your application be denied you will receive a 'Letter of Non-Acceptance.'
- E. Should your application be accepted you will receive a 'Letter of Acceptance' into "Phase 1p-1 - Probation" of the TREK program.
- F. If you receive a 'Letter of Acceptance' into "Phase 1p-1 - Probation" you will have the option to be admitted at the next opportunity of availability.
- G. Program Tuition is expected to be paid in full before your intake date. A non-refundable \$500 deposit will 'hold a bed' for you.
- H. You will enter into the TREK program for a two-week probationary period and given the status "Phase 1p-1 - Probation," while the staff team more thoroughly evaluates your potential to succeed and be helped by our ministry program.

- I. Upon admittance, the Phase 1p-1 - "Probation" clients are orientated with the facilities, assigned a room and sign all The HopeQuest Ministry Group, Inc. agreements.
- J. Should the probationary evaluation result in positive findings, you will then be given the status Phase 1A-1 - Active in the TREK program. Otherwise, you will be given a 'Letter of Non-Acceptance' to Phase 1A-1 - "Active," and asked to leave after the two-week probationary period. Our Admissions Staff will be happy to discuss this aspect of our program with you.

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Note

**OUR INTENT IS TO MAKE SURE THAT EVERYONE WHO DILIGENTLY AND PURPOSEFULLY WORKS THROUGH THE REQUIREMENTS OF THE TREK PROGRAM WILL, IN FACT, FIND TRANSFORMATION, RESTORATION, AND TRUE ESTABLISHING IN KINGDOM LIFE.**

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# Personal History Release

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I, \_\_\_\_\_ hereby grant permission to The HopeQuest Ministry Group, Inc. to acquire my credit report, legal history, and driving record. I also understand that I must supply a valid driver's license and/or birth certificate prior to my entry into the program.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date



# TREK Reference Form

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The applicant named below is applying for admission into the TREK program, which is a Christ centered residential discipleship program designed to assist clients in overcoming life-dominating issues. We would like you to complete this form and return it directly to our office. We cannot complete the application process without the information requested below. All your comments will be completely confidential and we will NOT share specific comments with the applicant. We may use your comments in our interview process but will not in anyway reveal your identity or the source of our information. Thank you for supporting this applicant by taking the time to share your thoughts with us.

Please answer each question as honestly as possible. Please print legibly – do not type.

Name of Applicant: \_\_\_\_\_

Today's Date: \_\_\_\_\_

Your Name:  Mr.  Ms.  Mrs.  Rev.  Dr.

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Email: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Best time to call: \_\_\_\_\_

Please give a brief description of the TYPE of relationship (Boss, Friend, neighbor) you have with the applicant:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How long have you known him/her?

\_\_\_\_\_

What is the LEVEL of your relationship with the applicant? Please describe:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**TREK APPLICATION PACKAGE**

Please describe the life-dominating issue this applicant is struggling with:

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How did you become aware of the applicant's life-dominating struggle?

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To the best of your knowledge, what is the level of this struggle?

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Recognizing the TREK program is based on Christian principles, from your standpoint, as a  
 Christian  Non-Christian, is there evidence of salvation or spiritual growth in his life?  Yes  
 No

What makes you feel this way?

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In your opinion what are the applicant's motives in coming to the TREK residential program?

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Does the applicant have problems submitting to corrective guidance from others?

Yes  No

Please explain:

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To your knowledge, does the applicant exhibit responsibility in the area of personal finances?

Yes  No Please explain:

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Knowing the applicant as you do, what is (are) the greatest problem(s) you anticipate the applicant will have while in our program?

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**TREK APPLICATION PACKAGE**

What is the applicant's level of commitment (if any) to the church with which he is involved?

Involved in church activities  Attends Sunday service only  Not involved  Unsure

Our program is spiritually and emotionally stressful. Do you think the applicant is able to walk through this commitment?

- (Select one):  The commitment will be no problem.  
 They may struggle with it but WILL succeed.  
 They may struggle with it and MAY NOT succeed.  
 I cannot say.

Are you aware of other problems in the applicant's life not mentioned above that we should know about?  Yes  No If yes, please explain:

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Consider each of the following areas. Would you say this is an area of strength or weakness in his life? (Mark with eight an "S" for Strength or "W" for Weakness. Mark as many as apply.)

- |  |   |
|--|---|
| _____ Initiative                         | _____ Submission to authority           |
| _____ Self-discipline                    | _____ Following instructions            |
| _____ Sensitivity and concern for others | _____ Openness to receive counsel       |
| _____ Cooperation                        | _____ Physical condition and health     |
| _____ Work habits / Industry             | _____ Personal appearance, and grooming |
| _____ Handles anger                      | _____ Disposition / Enthusiasm          |
| _____ Dependability and responsibility   | _____ Perseverance                      |
| _____ Ability to cope with stress        | _____ Stewardship of finances           |
| _____ Communications skills              | _____ Honesty                           |
| _____ Family Relationships               |   |

Would you recommend this applicant for acceptance into the program?

Yes  No  Not Sure.

Please elaborate?

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How involved would you want to be in the program of the applicant if he is accepted? (Check as many as apply)

Prayer  Financial Support  Attending a Friends and Family Seminar

Please sign below to signify that you have read and filled out the preceding reference to the best of your knowledge.

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Signature

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Date

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Print Name

Please mail this form directly to our offices:

**Director of Applications & Admissions  
The HopeQuest Ministry Group, Inc.  
P.O. Box 2699  
Woodstock, GA 30188**



# Successful Living Seminar: Friends & Family

During the participation your program, you will have the opportunity to be involved in one or more "Successful Living Seminar: Friends & Family" These weekends are designed to promote honesty and understanding between clients and their family and friends. Historically, there is generally a great deal of relational growth which takes place during these events, not only with clients, but with their guests, as well. Inviting family and participation in the Successful Living Seminar: Friends & Family is required of all clients.

1. If you are completing an application, **keep this invitation list separate** from other enclosed material.
2. Complete this invitation list thoroughly **(PRINT)**. Consider any individuals you might want to invite to the "Successful Living Seminar: Friends & Family"
3. Upon approval, submit **this invitation list ASAP** to the Director of Admissions & Applications.
4. **Invitations will be mailed or emailed within the first two weeks of participation in the TREK Program.**

Your Name: \_\_\_\_\_

Weekend Date: \_\_\_\_\_

Guest: \_\_\_\_\_ Relationship: \_\_\_\_\_  
 Street: \_\_\_\_\_  
 City: \_\_\_\_\_ State & Zip: \_\_\_\_\_  
 Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_ Fax: \_\_\_\_\_

Guest: \_\_\_\_\_ Relationship: \_\_\_\_\_  
 Street: \_\_\_\_\_  
 City: \_\_\_\_\_ State & Zip: \_\_\_\_\_  
 Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_ Fax: \_\_\_\_\_

Guest: \_\_\_\_\_ Relationship: \_\_\_\_\_  
 Street: \_\_\_\_\_  
 City: \_\_\_\_\_ State & Zip: \_\_\_\_\_  
 Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_ Fax: \_\_\_\_\_

Guest: \_\_\_\_\_ Relationship: \_\_\_\_\_  
 Street: \_\_\_\_\_  
 City: \_\_\_\_\_ State & Zip: \_\_\_\_\_  
 Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_ Fax: \_\_\_\_\_

Guest: \_\_\_\_\_ Relationship: \_\_\_\_\_  
 Street: \_\_\_\_\_  
 City: \_\_\_\_\_ State & Zip: \_\_\_\_\_  
 Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_ Fax: \_\_\_\_\_

Guest: \_\_\_\_\_ Relationship: \_\_\_\_\_  
 Street: \_\_\_\_\_  
 City: \_\_\_\_\_ State & Zip: \_\_\_\_\_  
 Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_ Fax: \_\_\_\_\_

Guest: \_\_\_\_\_ Relationship: \_\_\_\_\_  
 Street: \_\_\_\_\_  
 City: \_\_\_\_\_ State & Zip: \_\_\_\_\_  
 Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_ Fax: \_\_\_\_\_

**TREK CLIENT HANDBOOK**

Guest: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Street: \_\_\_\_\_  
City: \_\_\_\_\_ State & Zip: \_\_\_\_\_  
Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_  
Email: \_\_\_\_\_ Fax: \_\_\_\_\_

Guest: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Street: \_\_\_\_\_  
City: \_\_\_\_\_ State & Zip: \_\_\_\_\_  
Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_  
Email: \_\_\_\_\_ Fax: \_\_\_\_\_

Guest: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Street: \_\_\_\_\_  
City: \_\_\_\_\_ State & Zip: \_\_\_\_\_  
Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_  
Email: \_\_\_\_\_ Fax: \_\_\_\_\_

Guest: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Street: \_\_\_\_\_  
City: \_\_\_\_\_ State & Zip: \_\_\_\_\_  
Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_  
Email: \_\_\_\_\_ Fax: \_\_\_\_\_

Guest: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Street: \_\_\_\_\_  
City: \_\_\_\_\_ State & Zip: \_\_\_\_\_  
Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_  
Email: \_\_\_\_\_ Fax: \_\_\_\_\_

Guest: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Street: \_\_\_\_\_  
City: \_\_\_\_\_ State & Zip: \_\_\_\_\_  
Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_  
Email: \_\_\_\_\_ Fax: \_\_\_\_\_



The TREK Program  
A ministry of  
The HopeQuest Ministry Group, Inc.  
[www.hqmg.org](http://www.hqmg.org)

