



KINGDOM 318

GENESIS 14:14

Dear Applicant,

Thank you for your interest in Kingdom 318. We are excited that you are considering the possibility of becoming a part of the 318 experience. Please complete the following pages of this application and return them to us using the information you will find at the end of the questionnaire.

If you come, you will have an opportunity to choose a new way of living. You will learn how to live a passionate and God filled life. Kingdom 318 is not a quick fix, it will be a process, a journey to wisdom, purpose and true life.

This is a major decision for you. Please prayerfully consider all the guidelines and the vision of Kingdom 318. The key is that you want to change and are willing to listen to the counsel of those God places in your life.

We strongly recommend that you download and read the entire information packet that is available and tour our website before completing this application.

The information contained therein will aid you in understanding what Kingdom 318 is, how we approach the ministry and what will be expected of you as a participating student.

If you have any questions about the ministry, the application process or this packet, please feel free to call, Michael Brown Jr. at 601-795-1528.

We are looking forward to the possibility of sharing the next few months with you.

Sincerely,

Michael Brown



Applicants receive Informational Packet & Application (via web or mail)

Applicant completes Application (including commitments, expectations, medical info, and all release forms, etc.) *Please complete all the application by yourself. It's important that you fully participate in this entire process.

The application can be emailed to Michael.kingdom318@gmail.com or personal delivery.

After we receive the application, a Staff member will call the applicant to arrange a series of personal interviews (via phone or in person as appropriate). It is important to note that the applicant will be given a series of times to call our facility to conduct interviews. It is imperative that these appointments be kept at their scheduled times.

One or more written responses may be required during the application process. These responses may be collected via email or mail the result of those responses may be discussed in the following phone call interview.

Each applicant will be notified regarding the final decision made at the close of the interview process. This notification will be made via phone, email or in person.

Our limited space is filled on a first come – first served basis.

APPLICANT GENERAL INFORMATION

Full Name: _____
Nickname: _____ Date of Birth: _____ Age: _____
Height: _____ Weight: _____ Social Security Number: _____
Highest Level of Education: _____ Where? _____
Graduation Date?: _____



APPLICANT & FAMILY CONTACT INFORMATION

Parent 1 Name: _____ (relation) _____

Parent 1 Mailing Address: _____

Parent 1 email: _____

Parent 1 phone: _____ (cell, home, work) _____

Parent 1 alternate phone: _____ (cell, home, work) _____

Parent 2 Name: _____ (relation) _____

Parent 2 Mailing Address: _____

Parent 2 email: _____

Parent 2 phone: _____ (cell, home, work) _____

Parent 2 alternate phone: _____ (cell, home, work) _____



SKILLS AND HOBBIES

Please list your hobbies or things you enjoy doing?

Please list skills or experiences you have? (experience with wood-working tools, experience with lawn/garden equipment, knowledge of farm implements or taking care of specific animals)
Please be as specific as you can.

What, if any, sports do you enjoy?

Do you have any fears of Heights? Water? Animals? Etc...(please be specific)

Please list any other information that you feel will help us know your likes and interests better.



Please tell us how you learned about Kingdom 318

Please describe what you hope to get out of your stay with us at Kingdom 318.

What circumstances are leading you to seek out the possibility of attending Kingdom 318?

Do you have any outstanding legal or medical issues? If so, please describe



Please explain any church or religious affiliations you currently have or have had in the past.

What organized sports have you played and at what ages?

Hobbies you've invested in:(anything you've put in time, or money, or had to sacrifice something else in order to do)



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MEDICAL HISTORY

(Applicant's Name): _____

General Health(circle one): Excellent Good Average Poor

MEDICATIONS

Medication Date Prescribed Dosage Reason for medication

PHYSICIAN INFORMATION

Physician's Name: _____ Phone: (____) _____

Psychiatrist's Name: _____ Phone: (____) _____

Dentist's Name: _____ Phone (____) _____

I authorize any of the medical professionals listed above to communicate with Kingdom 318 staff and acquire any medications prescribed in applicant's behalf.

Applicant's Signature _____ Date _____

MEDICAL SERVICE HISTORY

History or Surgery of broken bones: (please summarize)

Date of last dental exam: _____

Describe any Dental Concerns:

Does you wear ____glasses or ____contacts? ____For reading? ____Other? Describe any hearing or speech problems.



MEDICAL HISTORY (cont.)

Addictions and Substance Abuse

Substance Approximate length of use Frequency of use

Describe any previous treatment for substance abuse:

ALLERGIES (check if allergic and describe reaction)

_____ penicillin _____ Food allergies
(list) _____ bees or wasp
stings _____ sulfa drugs _____ other drugs (please
list) _____ Other

DESCRIBE ANY OTHER IMPORTANT MEDICAL INFORMATION BELOW:

This completed form represents all known medical history of: _____
(Applicant Name)
Applicant's Signature _____ Date _____

MEDICAL EMERGENCY CONTACT INFORMATION

Applicant's Name _____
Parents' Name(s): _____
Address: _____
City/State/Zip: _____
Email: _____



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Work Phone: (____) _____ Home Phone: (____) _____ Cell Phone:
(____) _____ Cell Phone: (____) _____

EMERGENCY CONTACT INFORMATION (if different than parent)

Name: _____ Home or Cell Number: (____) _____
Relationship to Applicant: _____

MEDICAL INSURANCE

Insurance Company: _____ Phone: (____) _____
Name Policy is Listed under: _____ Date of Birth: _____
Address: _____
City: _____
State: _____ Zip: _____
Policy # _____ Group # _____
Name of Insured: _____

MEDICAL SERVICES CONSENT

I hereby authorize any Kingdom 318 representative to provide authorization of emergency and/or medical treatment for applicant by any qualified medical personnel of any hospital, emergency medical service, or other appropriate medical organization, or clinic should it be deemed necessary.

In addition, I give my consent for treatment of said applicant by any qualified medical personnel of any hospital, emergency medical service, or other appropriate medical organization or clinic should medical treatment be deemed necessary. I agree to be fully responsible for all related medical and dental charges for applicant.

Applicant's Signature _____ Date _____

DENTAL INSURANCE INFORMATION

Insurance Company: _____ Phone: (____) _____
Name Policy is Listed under: _____ Date of Birth: _____
Address: _____
City: _____
State: _____ Zip: _____
Policy # _____ Group # _____
Name of Insured: _____



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****Please include a front and back copy of each of your insurance cards with your application.**

EXPECTATIONS & COMMITMENT

Kingdom 318 believes the formation of our character is more important than the modification of particular behaviors. Therefore its focus is not on modifying external behaviors, but rather on discovering the ultimate truth about who we are in Christ, taught and modeled in the context of an adventurous, loving community. However, we do believe that our choices reflect our character, and that our behaviors need to progressively come into line with the standards of God's Word for a purposeful and joyful life.

Key behaviors and attitudes that are expected of the participant include:

- A sincere desire to learn and grow physically, mentally, and spiritually.
- Participation with a cooperative attitude in all activities and duties unless special permission is granted by staff.
- A regular routine of waking up at approximately 6 AM, and lights out at 10:30 PM.
- Respect for others, for property, and submission to those in authority.
- A commitment to make peace rather than sow strife.
- Participation in the improvement, maintenance, upkeep, and cleaning of shelters and property.
- Practicing good health habits and hygiene as directed by the staff at Kingdom 318
- Participating in wholesome physical activities and training.

While the process of becoming more Christ-like is a journey for all believers, and there is much mercy at Kingdom 318 for those sincerely striving to learn new habits, there are certain behaviors and attitudes that are unacceptable at Kingdom 318.

- No drugs, alcohol, cigarettes, tobacco, or pornography



- No physical violence toward others or destruction of property

- Persistent uncooperative or destructive behaviors or attitudes.

Scripture is clear that discipline and correction are essential for our learning, character formation, and growth. A participant's choice to participate in these and other negative behaviors and attitudes will result in consequences for the participant. These consequences include, but are not limited to, confession, service, acts of restitution, writing assignments, separation from the group, suspension, probation, and ultimately, removal from Kingdom 318. Consequences are administered prayerfully and lovingly, at the sole discretion of Kingdom 318 leadership, after taking into account each participant's progress and the unique circumstances of each situation.

Privileges are gradually increased with each level:

Communications with relationships that tie the student back to the life they lived before arriving are managed on a case-by-case basis.

- Access to spending money and driving a vehicle are restored at the discretion of the Kingdom 318 Director.

- Making continuous contributions of mind, body and spirit to the benefit of the student's own growth as well as the good of others.

PARTICIPANT'S COMMITMENT (please read carefully and sign below)

I understand that Kingdom 318 is unapologetically Christian in its approach and implementation. I agree to fully participate in The Kingdom 318 experience for at least 8 months understanding that is typical stay. I understand that participating in Kingdom 318 is a privilege and not a right. I understand that Kingdom 318 reserves the right to require my withdrawal at any time if I fail to demonstrate a sincere desire for transformation.

I agree to abide by and respect all the above expectations and commitments

Applicants Signature _____

Date _____