

Oxford House of Kansas

Monthly Report

Please complete this form before chapter meeting and turn into FORA

House: _____

Date: _____

Residency Information (# in each category)

Money owed to house by current residents: _____ by number of residents _____

Total # of beds: _____ # of Applications received: _____ # Disruptive Behavior _____
of beds open: _____ # of Applicants accepted: _____ Result of an arrest? __yes __no
voluntary departures: _____ # Relapse _____ # of residents employed _____

NEW RESIDENTS ONLY (# in each category)

County of residency (originally) Barton ___ Crawford ___ Douglas ___ Ellis ___ Ford ___ Harvey ___
Johnson ___ Reno ___ Riley ___ Saline ___ Sedgewick ___ Shawnee ___ Wyandotte ___ Other _____

Community Participation (# in each category)

_____ AA/NA _____ Community Organizations (Scouts, Shriners)
_____ Church/Synagogue/Temple _____ Volunteer Activities (Presentations)
_____ Neighborhood Organizations _____ Support Group (other than AA/NA)
_____ or Activities _____ Other Specify: _____

Demographic Information (# in each category)

Age

Under 21 _____
21-30 _____
31-40 _____
41-50 _____
Over 50 _____

Ethnicity

African American _____
Asian American _____
Caucasian _____
Hispanic _____
Native American _____
Other _____

of Residents with a Dual Diagnosis _____
of Residents with prior homelessness _____
Members w/ former Military Service _____
of Members w/ family members in US Military _____

Length of Residency

Less than 1 month _____
2 - 6 months _____
7 - 12 months _____
More than 1 year _____

Education

Less than High School _____
High School/GED _____
Some College _____
Associate Degree/Trade School _____
Bachelor Degree _____
Graduate Degree _____

Checking Account: _____

Savings Account: _____