



# The Summit House Discipleship Program

## Guide to Completing The Summit House Discipleship Application

Thank you for applying to be a part of The Summit House! May you know the Lord's grace as you seek His direction. In order for us to process your application, we must receive each of the six items listed below. If a question does not apply to you, write N/A in the space. Husbands and wives enrolling as participants must complete separate applications.

**Entry Application Form**

**Registration Fee** | A non refundable registration fee of \$30 USD for single applicants is to be forwarded with your application. Your application cannot be processed without this fee. All registration and program fees must be paid in USD. A bank draft can be obtained at any foreign bank.

**Personal History** | Please prayerfully and concisely answer the following questions on a separate sheet of paper printed or typed. Attach it to your Entry Application Form:

**A.** Briefly describe your conversion experience and your present relationship with the Lord.

**B.** What areas of your character are you presently seeking God to develop and/or improve?

**C.** How would you describe your relationship with your family?

**D.** Please describe your relationship with your church.

**E.** What is your purpose for applying for this program?

**F.** Please describe your spiritual and/or ministry goals.

**G.** How does your family/close friends feel about your plan to enroll in The Summit?

**H.** Have you ever been involved in the occult? If so, please explain.

**I.** Have you ever used tobacco, alcohol, or drugs? If so, how long did you use them for and how long ago was that?

**J.** Have you ever had (or do you currently have) an eating disorder? If so, please explain.

**K.** Please explain any diagnosis or history of a learning disability or mental illness.

**Confidential Health Form** | Please fill this form out so that we may know how to best serve you in the event of a medical emergency.

**“Discipleship Program Financial Policy”, “Foundational Values”, and “Participant Expectations & Policies”** | Please read and initial each agreement and return to us.

**Release Form** | Please read and sign each portion and return to us.

**Reference Forms** | Give reference forms to two mature Christians, other than your pastor or family members. Please give the Pastor's reference form to your pastor or spiritual leader. Have them mail these forms directly to us. **Please direct all forms to:**

**Envision Mission  
c/o Hope in Christ Church  
710 E. Sunset Bellingham, WA 98225**

## Applicant Information

**Full Name:**

*Last*

*First*

*M.I.*

*Date of Birth (dd/mm/yy)*

**Address:**

*Street*

*Apt/Suite #*

*City*

*State*

*ZIP Code*

**Start Date:**

**Social Security No.:**

**Monthly Income: \$**

Phone No.:

Occupation:

Are you a citizen of the United States?  **Yes**  **No**

Sex:  **Male**  **Female**

Marital Status:  **Single**  **Engaged**  **Married**  **Widowed**  **Divorced**  **Separated**

Do you currently use any prescription drugs?  **Yes**  **No**

If yes, please list the reasons and drugs prescribed:

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Have you ever been convicted of a felony?  **Yes**  **No** If yes, explain:

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**If bringing children, please attach a separate piece of paper with their names and ages.**

Have you been a part of another treatment, rehabilitation, or Christian mentorship program?  **Yes**  **No**  
If yes, did you complete it?  **Yes**  **No** If no, explain why:

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**Date of last drink:**

**Date of last drug use:**

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Please list drugs you have used addictively:

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Registration Fee of \$30 USD is enclosed:  **Yes**  **No**

## Background Information

*How long have you been a Christian?*                      *Denomination*                      *Pastor's Name*

*Church Name & Address*                      *Street or P.O. Box*                      *Apt/Suite #*

*City*                      *State*                      *ZIP Code*                      *Country*                      *Telephone No.*

How long have you attended the above church?

Does your pastor know you are sending this application?  **Yes**  **No**

Are they in agreement with your plan?  **Yes**  **No** If not, please explain:

Occupational Skills:

Other Abilities, i.e. Musical Talents:

Highest Education Level Completed:

Languages, in order of proficiency:

## Financial Information

Do you have a viable income for program fees (\$250-\$500/month)?  **Yes**  **No**

If not, what percentage of your program fees do you have now?

**0%**  **25%**  **50%**  **75%**  **90%**

If not, what source will your program fees come from?

Do you have any outstanding debts?  **Yes**  **No** If yes, please explain:

## Emergency Contact

*Name*                      *Address*                      *Telephone No.*

May we inform this individual that you are taking part in this program?  **Yes**  **No**

**I certify that all information in this application is complete and accurate.**

*Signature*

*Date*

**CONFIDENTIAL HEALTH FORM**

**Full Name:**

\_\_\_\_\_  
*Last First M.I. Date of Birth (dd/mm/yy)*

**Address:**

\_\_\_\_\_  
*Street Apt/Suite #*

\_\_\_\_\_  
*City State ZIP Code*

**Personal History**

Please answer all questions and comment on all positive answers in the space below or on a separate sheet.

**Have you ever had, or do you have, any of the following?**

- |                  |  |                    |  |                          |  |
|------------------|--|--------------------|--|--------------------------|--|
| Allergy:         |  | Surgery:           |  | Jaundice                 | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Penicillin       | <input type="checkbox"/> Yes <input type="checkbox"/> No | Appendectomy       | <input type="checkbox"/> Yes <input type="checkbox"/> No | Hepatitis                | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Sulfonamides     | <input type="checkbox"/> Yes <input type="checkbox"/> No | Tonsillectomy      | <input type="checkbox"/> Yes <input type="checkbox"/> No | Kidney Disease           | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Serum            | <input type="checkbox"/> Yes <input type="checkbox"/> No | Hernia Repair      | <input type="checkbox"/> Yes <input type="checkbox"/> No | Gallbladder Issues       | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Other-Specify    | <input type="checkbox"/> Yes <input type="checkbox"/> No | Other-Specify      | <input type="checkbox"/> Yes <input type="checkbox"/> No | Intestinal Troubles      | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Food-Specify     | <input type="checkbox"/> Yes <input type="checkbox"/> No | Broken Bones       | <input type="checkbox"/> Yes <input type="checkbox"/> No | Recurrent Diarrhea       | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Skin Condition   | <input type="checkbox"/> Yes <input type="checkbox"/> No | Dislocated Joint   | <input type="checkbox"/> Yes <input type="checkbox"/> No | Shortness of Breath      | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Eye Trouble      | <input type="checkbox"/> Yes <input type="checkbox"/> No | Rheumatism         | <input type="checkbox"/> Yes <input type="checkbox"/> No | Stomach / Duodenal Ulcer | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Ear Trouble      | <input type="checkbox"/> Yes <input type="checkbox"/> No | Arthritis          | <input type="checkbox"/> Yes <input type="checkbox"/> No | Mental/Nervous Disorder  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Headaches        | <input type="checkbox"/> Yes <input type="checkbox"/> No | Paralysis          | <input type="checkbox"/> Yes <input type="checkbox"/> No |                          |  |
| Fainting Spells  | <input type="checkbox"/> Yes <input type="checkbox"/> No | Head Injury        | <input type="checkbox"/> Yes <input type="checkbox"/> No | <b>Females Only</b>      |  |
| Insomnia         | <input type="checkbox"/> Yes <input type="checkbox"/> No | Epilepsy           | <input type="checkbox"/> Yes <input type="checkbox"/> No | Irregular Periods        | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Hay Fever/Asthma | <input type="checkbox"/> Yes <input type="checkbox"/> No | Anemia             | <input type="checkbox"/> Yes <input type="checkbox"/> No | Severe Cramps            | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Heart Trouble    | <input type="checkbox"/> Yes <input type="checkbox"/> No | Diabetes           | <input type="checkbox"/> Yes <input type="checkbox"/> No | Hysterectomy             | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Blood Pressure:  |  | Tumor: Cancer      | <input type="checkbox"/> Yes <input type="checkbox"/> No | Are you pregnant?        | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| High             | <input type="checkbox"/> Yes <input type="checkbox"/> No | Venereal Disease   | <input type="checkbox"/> Yes <input type="checkbox"/> No |                          |  |
| Weakness         | <input type="checkbox"/> Yes <input type="checkbox"/> No | Contagious Disease | <input type="checkbox"/> Yes <input type="checkbox"/> No |                          |  |

Other:

Special Dietary Needs:

Are you now under doctor's care for any condition?  Yes  No If yes, specify:

Are you taking any prescriptions currently?  Yes  No If yes, specify:

Do you have any physical disabilities?  Yes  No If yes, specify:

If you have ever been diagnosed or have a history of a learning disability or mental illness (i.e. depression, anxiety, self-harm, etc.) please explain in your personal history.

## Discipleship Program Financial Policy

Summit Houses are faith ventures. Program fees cover only a percentage of the costs involved. Our staff rely on relationship-based support through churches and friends for their living expenses. This allows us to keep program costs to a minimum. Program fees cover costs of transportation, speaker honorariums, and housing. Program does not include personal expense (i.e., food, toothpaste, laundry, personal effects, etc.). Furthermore, to maintain reasonable participant costs for our programs, discipleship participants will be involved in work duties for ten hours each week. This involves a variety of general service tasks, ranging from cooking and cleaning to general maintenance of buildings and grounds.

An integral part of The Summit House Discipleship Program is required reading. The cost for books is included in the program fees.

The Summit House Discipleship Program is a one-year program dedicated to the spiritual and emotional equipping of participants to better understand themselves and the Christian faith. Participants will live on-site at the Summit House with program fees due no later than the 5th of each month. Payment arrangements however can be made with the approval of Envision Mission staff.

**Registration Fee:** \$30 USD per Application. This is nonrefundable and to accompany your application.

**Program Fees:** Subject to room availability, current Program Fees are as follows:

**\$250/month** for a bedroom in Lynden, or **\$500/month** for a bedroom in Bellingham  
(This breaks down to \$3,000/year in Lynden, or \$3,600/year in Bellingham)

Your program fee is due upon arrival, payable in cash, check or credit card. Any exceptions to this must be approved by The Summit House management prior to your arrival. Program fees for The Summit House are not tax-deductible.

**Food Expense:** Once a month you are responsible for providing the food for a house Community Meal.

### **Financial Policy Regarding Early Termination or Withdrawal**

In order to achieve the intended success for a participant, it is expected that when participants enroll they will continue through the entire course and live in compliance with all house policies to ensure maximum effectiveness of the discipleship program. However, participants in violation of "Participant Expectations & Policies", the financial policy, or other safety and behavioral policies that lead to their early termination of the program will be exited from the program immediately. Due to the expenses for rent and utilities that Envision Mission is responsible to its landlord for, a strict no-refunds policy for any program/administration/registration fees paid applies to this agreement between the participant and Envision Mission at any time during the current academic month. This policy is to ensure that participants will make every attempt possible to stay in the program and not to forfeit their program fees, living arrangements, and progress with The Summit House during their commitment year. Please give two weeks or more notice of the date you plan to move out and make sure that all financial obligations to the house need to be paid in full before leaving the house. Ensure that your bedroom, closet, bathroom and kitchen areas are clean for the next person. Any personal items left behind will become property of Envision Mission.

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## **The Foundational Values of The Summit Houses**

The Foundational Values of The Summit Houses are the expression of our basic beliefs given by God In Scripture. The combination of these beliefs and values makes up the unique family characteristics of each Summit House – our “DNA.” They are values we hold in high regard which determine who we are, how we live and how we make decisions.

### **1. KNOW GOD**

THE SUMMIT HOUSE is committed to know God, His nature, His character and His ways. We seek to reflect who He is in every aspect of our lives and ministry. The automatic overflow of knowing and enjoying fellowship with God is a desire to share Him with others.

### **2. MAKE GOD KNOWN**

THE SUMMIT HOUSE is called to make God known throughout the whole world, and into every arena of society through evangelism, training and mercy ministries. We believe that salvation of souls should result in transformation of societies, thus obeying Jesus’ command to make disciples of all nations.

### **3. HEAR GOD’S VOICE**

THE SUMMIT HOUSE is committed to creating with God through listening to Him, praying His prayers and obeying His commands in matters great and small. We are dependent upon hearing His voice as individuals, together in team contexts and in larger corporate gatherings. This is an integral part of our process for decision-making.

### **4. PRACTICE WORSHIP IN THE CONTEXT OF THE CHURCH**

THE SUMMIT HOUSE is dedicated to worship Jesus and engage in intercessory prayer as integral aspects of daily life. We also recognize the intent of Satan to destroy the work of God and we call upon God’s power and the Holy Spirit to overcome his strategies in the lives of individuals and in the affairs of nations. We hold our partnership with the churches very dear and believe disciples will thrive best in that context.

### **5. BE VISIONARY**

THE SUMMIT HOUSE is called to be visionary, continually receiving, nurturing and releasing fresh vision from God. We support the pioneering of new ministries and methods, always willing to be radical in order to be relevant to every generation, people group, and sphere of society. We believe that the apostolic call of THE SUMMIT HOUSE requires the integration of spiritual eldership, freedom in the Spirit and relationship, centered on the Word of God.

### **6. CHAMPION BROKEN PEOPLE**

THE SUMMIT HOUSE is called to champion the “least of these” (Luke 9:46-48, Matt 25:40). We seek not to marginalize people of desperate circumstances and think more highly of ourselves in comparison (Romans 12:3), but rather, we embrace humility as we partner with God to “make the last go first” and see the “least become the greatest;” we long to see the great mystery of how the Kingdom operates in heaven also be done here on earth. We believe God has gifted and called people of every age, poverty level, and nation to spearhead vision and ministry all throughout the world. We commit to value them, train them, support them, make space for them and release them. They are not only the Church of the future; they are the Church of today.

### **7. HONORABLE**

THE SUMMIT HOUSE operates in honor. We honor others, regardless of background or history, by restoring to them dignity and value in who they are in Christ, empowering the individuals we serve. We celebrate every triumph and provide support and encouragement in every temptation and trial. Honor requires trust amongst the house group as well as the leadership that governs the household. We value the wisdom and guidance of eldership and the people placed in positions of power above us.

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## **8. HAVE A BIBLICAL WORLDVIEW**

THE SUMMIT HOUSE is called to a biblical worldview. We believe that the Bible makes a clear division between good and evil; right and wrong. The practical dimensions of life are no less spiritual than the ministry expressions. Everything done in obedience to God is spiritual. We seek to honor God with all that we do, equipping and mobilizing men and women of God to take roles of service and influence in every arena of society. We aim to learn and defend the accuracy of the written word of God in the Holy Bible, the doctrines that uphold its credence, and discern the attempts of the enemy at distorting the Gospel of Jesus Christ.

## **9. FUNCTION IN TEAMS**

THE SUMMIT HOUSE is called to function in teams in all aspects of ministry and leadership. We believe that a combination of complementary gifts, callings, perspectives, ministries and generations working together in unity at all levels of our mission provides wisdom and safety. Seeking God's will and making decisions in a team context allows accountability and contributes to greater relationship, motivation, responsibility and ownership of the vision.

## **10. EXHIBIT SERVANT LEADERSHIP AND WISDOM**

THE SUMMIT HOUSE is called to servant leadership as a lifestyle hierarchy. A servant leader is one who honors the gifts and callings of those under his/her care and guards their rights and privileges. Just as Jesus served His disciples, we stress the importance of those with leadership responsibilities serving those whom they lead. We also believe in making decisions based on wisdom and that these decisions will demonstrate biblical accuracy, agreement amongst counselors, and evidence of the fruits of the Spirit (Galatians 5:22-23). We want both every leader and every servant to base their decisions not on fleshly impulse and reaction, but on what is the most wise and loving decision that would honor God and man the most.

## **11. FOCUS ON RELATIONSHIPS**

THE SUMMIT HOUSE is dedicated to being relationship-oriented in our living and working together. We desire to be united through lives of holiness, mutual support, transparency, humility, and open communication, rather than a dependence on structures or rules. We also believe that relationships are best built within the context of the Church for disciples to make disciples.

## **12. PRACTICE DEPENDENCE ON GOD FOR FINANCES**

THE SUMMIT HOUSE is called to practice a life of dependence upon God for financial provision. For individuals and THE SUMMIT HOUSE corporately, this comes primarily through His people. As God and others have been generous towards us, so we desire to be generous. Disciples give themselves, their time, and talents to God through the mission, with no expectations of remuneration.

## **13. PRACTICE HOSPITALITY**

THE SUMMIT HOUSE affirms the ministry of hospitality as an expression of God's character and the value of people. We believe it is important to open our hearts, homes, and campuses within the proper time and contexts to serve and honor one another, our guests, and the poor and needy; not as acts of social protocol, but as expressions of generosity.

## **14. COMMUNICATE WITH INTEGRITY**

THE SUMMIT HOUSE affirms that everything exists because God communicates. Therefore, THE SUMMIT HOUSE is committed to truthful, accurate, timely and relevant communication. We believe good communication is essential for strong relationships, healthy families and communities, and effective ministry.

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## Participant Expectations & Policies

The following is a list of what we as program staff expect of you as participants during your time here at The Summit House Discipleship Program.

### 1. Program Participation

- a. We require that all participants and staff attend a local church weekly.
- b. We require full participation in classes, class work, work duties, worship, intercession times, and outreaches. Emergency leaves of absence need to be approved by staff.
- c. We value our weekly house meetings. If you have an emergency, please contact your Resident Assistant or staff at least one hour before the meeting time and let them know what's going on. The only other reasons to miss a house meeting are work, school responsibilities, vacation, or family event. Please bring up your legitimate reason at the house meeting prior to your absence.
- d. If you choose not to partake in church, classes, or house meetings, the house will defer to Consequences and Fines as defined in the "Consequences and Fines" section.
- e. Part of ongoing progress in this program is the required daily check-in meetings with fellow disciples, such as with a Discipleship Partner, pastor, staff, and/or Resident Assistant. We hope that there is mutual trust between mentors/staff and participants in this area.
- f. What happens in the house meetings stays in the house meetings. Absolutely no gossiping!

### 2. Financial Obligations

- a. We expect you to uphold your financial commitments. A \$40 late fee applies if monthly program fees are not paid in full by the 5th of each month or there is failure to meet payment arrangements.
- b. If your move-in date is on or before the 5th of the month, the full amount will be due. If your move-in date is after the 5th the fees will be prorated. If fees have not been paid in full by the 10th, you must vacate the premises. Arrangements may be made with staff for a possible extension.

### 3. Conduct

- a. The use of drugs and alcohol is prohibited during The Summit Discipleship Program. If you struggle with tobacco use, we will encourage you to try quitting during the program at a time that seems best to us and to you. Smoking is not permitted inside and must be done in the designated areas of each Summit House. Strictly no smoking in the front or back of the house.
- b. Because we want you to view this program as a time set apart for you and the Lord, we require all male/female relationships remain at a friendship level during the program unless you are married. Participants are not permitted to share living arrangements with the opposite sex or engage in sexual activity of any kind. We maintain the scriptural teaching that acts of homosexuality are sin. Please feel free to ask us any questions about these rules, and above all, stay transparent about these things.
- c. Conflict will inevitably arise in close-quarters communal living. We ask that you use the conflict resolution model in Matthew 5:23-25; 18:15-17 to avoid negative feelings built up against one another and that you seek the counsel of your Resident Assistant to avoid further escalation.
- d. Internet and Entertainment can be a healthy escape when done in moderation and a useful tool for productivity and maintaining communication. These tools can however become detrimental. As such, the Resident Assistant and staff reserve the right to enact guidelines and policies to limit and restrict certain media content and time consumption during the participant's stay including but not limited to:
  1. A pornography filter/monitoring app remain installed on smartphones and laptop, desktop, or tablet computers for the entirety of the program.
  2. No use of technology permitted during classes and house meetings.
- e. No weapons, ammunition, explosives, knives (other than kitchen knives) are allowed on property, stored, or concealed on your person.
- f. Money is not to be exchanged between residents unless authorized by staff. This applies to selling personal items to fellow residents, personal loans, etc.
- g. Lost keys are subject to a \$15 fine.
- h. Participants are responsible for securing the house. **DOORS DO NOT LOCK AUTOMATICALLY.**

### 4. Drug and UA Policy

- a. This is a narcotic and benzodiazepine free house.
- b. Talk to your Resident Assistant and staff about any prescription drugs before bringing them into the house.
- c. You may be asked to random UA if staff deem it appropriate. Please don't take this personally. It is for everyone's safety.
- d. You will be asked to submit to a UA if two or more house members suspect alcohol or drug use.

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### 5. Work Policy

- a. Employment is strongly encouraged. Those without a job will be asked to find volunteer opportunities.
- b. Working graveyard shift is not encouraged. It greatly disrupts the flow of the house.



## 6. Curfew and Overnights

- a. Curfew is 10pm Sun–Thur. and 12am Fri–Sat. Please call Resident Assistant or staff for later times.
- b. House members who have completed 6+ months of the program may stay away from the house two nights per week. Special permission is required to stay away longer than three nights consecutively.

## 7. Quiet Hours

- a. Quiet hours are in effect 10pm – 7am Sunday-Thursday and 12am – 8am Friday and Saturday.
- b. Stereos, TV's, & loud talking must be kept at a respectable volume out of respect for others.

## 8. Visitors

- a. Visitors are subject to all the house rules.
- b. Visitors are your responsibility. Whatever they do, you did!
- c. You may not leave your visitors in the house while you leave.
- d. Do not allow your visitors to roam the house.
- e. Members of the opposite sex are not allowed in your room.
- f. Be mindful of your housemates pertaining to visitors.
- g. No visitors past curfew hours.

## 9. Bedroom Use

- a. You must occupy your own bedroom.
- b. Do not enter another member's bedroom without their permission.
- c. Members of the opposite sex are not allowed in your room.
- d. You are encouraged not to eat meals in your room. Snacks and fruit are fine.
- e. All rooms are available on a first-come first-serve basis, however, they can be subject to availability by seniority.
- f. Your room is to be always kept clean and presentable.
- g. Rooms will be inspected without notification.
- h. All fans, stereo systems etc. must be approved before use in a member's room.
- i. Lights and other utilities must be shut off when the participant is absent from their room to save costs.
- j. You must have permission to paint, change, repair, or improve your room. No additional door lock allowed.
- k. No dark items such as Ouija boards, pentagrams etc. allowed on house premises.

## 10. Bathroom Use

- a. Bathrooms and showers are on a first come, first served basis.
- b. Be mindful of others when using the showers. They need hot water too.
- c. Do not flush feminine products, mass amounts of toilet paper, cigarette butts, or any items down the toilet that may clog the toilet.
- d. Keep bathrooms clean.
- e. No use of hair dyes or bleach (unless by permission) in bathrooms.
- f. Cooking is not permitted in resident's rooms. No hot plates, heaters, toaster ovens or any other heating units are allowed in the rooms (coffee makers and water boilers are fine).
- g. You are to provide your own shower supplies (soap, shampoo, etc).

## 11. Kitchen Use

- a. Kitchen and stove use are on a first come, first served basis.
- b. You are expected to clean up and wash your dishes after you are done. Do not pour grease down the drain.
- c. Clean up all liquids that spill on the floor. Liquids left on the floor will damage the flooring.

## 12. Living Room Use

- a. Do not sleep on couches. No dirty feet or socks on furniture.
- b. No inappropriate public display of affection with your significant other.
- c. Keep TV volume to a reasonable level.

## 13. Laundry Area Use

- a. Laundry hours are 8am to 10pm daily and are on a first come first serve basis.
- b. Please be mindful of others and keep your laundry flowing in a timely manner.
- c. Washers and dryers are for house residence only.
- d. Use only fragrance-free laundry detergent and dryer sheets.

## 14. Cleanliness

- a. Do not make a mess and expect the person with that particular chore to clean up after you.
- b. Your mother does not live here, so you must clean up any mess you make.
- c. Common areas to be kept free of all personal items.

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## 15. House Supplies

- a. The Summit House supplies paper towels, toilet paper and light bulbs.

## 16. Food

- a. Cabinet and refrigerator space are provided for each house member.
- b. Participants each month can opt into either contributing to a shared pantry or buying their own food.
- c. Eating someone else's food without permission is considered stealing.

## 17. Chores

- a. You will be asked to respect the particular house chores routine; any changes need to be agreed upon unanimously.
- b. If you cannot complete your chore, please speak with the Resident Assistant or staff.

**18. Automobiles**

- a. One auto per house member allowed.
- b. Auto must be registered, licensed and insured to the responsible member.
- c. If auto is not running, it needs to be fixed within two weeks or removed from property.

**19. Animals**

- a. No dogs or cats are allowed. All pets are subject to Envision Mission staff approval.

**20. Consequences and Fines**

- a. The first warning is verbal given by your R.A., Staff, or Discipleship Partner with six hours to comply.
- b. The second warning is written and given by your R.A., Staff, or Discipleship Partner with six hours to comply.
- c. The third warning is a \$30 fine or four hours of community service work designated by your R.A. with 12 hours to comply and three days to pay the fine.
- d. If the third warning is not observed, you will be expelled from the house.
- e. All fines are collected by the R.A. or Staff and given to the Treasurer or Envision Mission staff.
- f. All fines and community service are to be put toward house needs.
- g. Theft, sexual relations in rooms, 48 hour no-call/no-show, violence, possession of weapons, and use or possession of drugs on your person or on the property is a ONE STRIKE POLICY.

**21. Expulsion**

- a. You will be exited from the program and Discipleship house immediately for a positive UA, violent behavior, destruction of property, possession of a weapon, stealing, compulsive gambling, selling of drugs, having sex in the house, collusion, and disruptive behavior.
- b. If you are kicked out of the house, you have exactly 30 minutes to get some of your things and leave.
- c. You have 72 hours to call and collect the rest of your things.
- d. All program fees, including fees paid in advance, and deposit paid are forfeited if expelled from the house.
- e. The R.A. and roommate will clean and move all personal items of expelled member from bedroom, kitchen and bathroom.
- f. If money is owed to the house, you agree that any and all of your possessions that are at The Summit House can be held as collateral.
- g. If possessions are not retrieved within 3 days from expulsion they can be disposed of in any Envision Mission sees fit.
- h. If you are kicked out of the house you can apply again in 30 days. Re-entry must be approved by house member vote.

**22. Moving Out**

- a. Please give two weeks or more notice of the date you plan to move out.
- b. All financial obligations to the house need to be paid in full before leaving the house.
- c. Please clean your bedroom, closet, bathroom and kitchen areas for the next person. The Participant Expectations & Policies of the Discipleship House Rules are subject to change depending on conditions at the house to provide a peaceful, sober environment. You will always be notified of any changes.

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**RELEASE FORM**

**Release of Liability:**

I/We do hereby release Envision Mission, its agents, and volunteer assistants from any liability whatsoever arising out of any injury, damage or loss which may be sustained by said person during the course of involvement with Envision Mission. Living in The Summit Discipleship Program house is by membership only. The Summit Discipleship Program does not fall under the Landlord/tenant act. This means that a resident can be voted out of the house for violation of the house rules, including but not limited to: not doing required chores, non-payment of program fees, leaving windows and doors unlocked etc. The time given to move out will be determined by the current members of the house or the owners. Violations such as using or the selling of drugs or alcohol, disruptive behavior, or possessing a weapon will result in the resident member being given 30 minutes to gather their belongings and vacate the house and premises. I have read the items in this agreement and understand that if I am accepted into The Summit Discipleship Program, I agree to the terms listed and I waive any landlord/tenant rights that I may be entitled to. I also understand that I fully and freely subject myself to the rules of The Summit Discipleship Program. I also agree to make an effort to live a faith-based lifestyle while residing at the Summit House. Also, I understand that Envision Mission is not responsible for any personal property not picked up within three days of the expelled house member vacating their room.

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Applicant's Signature:  
*Applicants must be 18 years of age or older.*

Date (mm/dd/yy)

**Acknowledgement of Financial Responsibility:**

I have read the financial policy. I understand that payment of the required fees must be made in U.S. currency prior to, or upon my arrival, or according to schedule, unless otherwise approved by Envision Mission management before the program's commencement. Furthermore, I agree to meet in a timely manner, prior to the completion of the program, all personal expenses incurred during my involvement with Envision Mission, including financial responsibility for negligent loss or damage of property. I also understand the penalties for early termination or early withdrawal and expectation of program fees due by the beginning of each month.

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Applicant's Signature:

Date (mm/dd/yy)

**Consent For Treatment:**

In case of emergency, I/we hereby agree to the performance of such treatment, including anesthesia and surgery, as the attending doctor or physician may deem necessary. I/we also accept full responsibility for expenses related to medical care.

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Applicant's Signature:

Date (mm/dd/yy)

I have completed all portions of this application accurately for admission to the program for which I am applying. I have also read the policies, and if I am accepted by Envision Mission, I will abide by the spirit, rules and schedules of The Summit Discipleship Program.

**This form is valid for the duration of my involvement with Envision Mission.**

---

Applicant's Signature:

Date (mm/dd/yy)

**Background Check Authorization:**

All applicants over the age of 18 must consent to a criminal background check before they can apply. In addition, all applicants are screened through the NSOPW (National Sex Offender Public Website).

An applicant’s criminal background history will not automatically disqualify the applicant from entering The Summit; however, the nature of, number, and recency of the conviction(s) will be taken into account during the approval process. In the interest of fulfilling our mission, as well as the safety and well-being of those whom we are called to serve, Envision Mission reserves the right to deny any individual from enrolling as a participant of The Summit Discipleship Program.

Note: if you do not authorize, you will not be accepted into the program.

**Confidentiality Agreement:**

Confidentiality can be a life or death issue for people who are homeless or attempting to escape an unhealthy living situation. As a participant of The Summit House, I agree to hold information regarding people I encounter while enrolled in The Summit House and their condition in confidence. Conversations about individuals being served and their situations, without their consent, are violations of the trust, respect and privacy to which they are entitled.

- Do not share The Summit House’s contact information (The Summit House address, phone number, and email)
- Do not inform your involvement or the identity of enrolled participants in this program to those outside of the program that may be a risk to you or another participant’s well-being.

Connecting and building healthy, wholesome relationships between participants is encouraged. It is important that these relationships be developed carefully and respectfully, recognizing that many individuals being served are emotionally, socially, spiritually, and physically vulnerable.

**Background Check Authorization and Confidentiality:**

I authorize Envision Mission to run a criminal background check and I agree to abide by The Summit House’s confidentiality agreement (as seen above).

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Applicant’s Signature: Date (mm/dd/yy)

**Photo Consent and Release:**

I authorize Envision Mission to use my name, description, photographs, quotes, and voice or video recordings for public relations and fundraising purposes to support the Mission’s ministries.

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Applicant’s Signature: Date (mm/dd/yy)

## Reference Forms for The Summit House Discipleship Program

You will find three reference forms attached that provide us with necessary information to process your application.

Please give two forms to individuals you know well (a friend, employer, teacher, etc.).

The Pastor's Reference Form must be completed by your pastor or spiritual leader.

Please provide an addressed, stamped envelope and have the individuals mail these directly to our office:

**Envision Mission  
c/o Hope in Christ Church  
710 E. Sunset Bellingham, WA 98225**

## Reference Form

**To the Applicant:** Please complete the information below and provide a stamped envelope addressed to Envision Mission for the person filing the reference.

Name of the Applicant

Program Applying For

Dates: (mm/dd/yy) to (mm/dd/yy)

I, the above-named applicant, WAIVE any right I have to read or obtain copies of this recommendation knowing that this waiver is NOT required as a condition for admission.

Applicant's Signature

Date (mm/dd/yy)

The above applicant has applied for participation in Envision Ministries "The Summit House"; an interdenominational Christian intensive recovery program based in a discipleship house. Founded in 2003, Envision Mission built its first official Summit House location in 2018. Its purposes include training, challenging and channeling Christians to fulfill Christ's command: "*Go, therefore, and make disciples of all nations*" by learning what it means to become a disciple of Christ first.

Serious consideration will be given to your comments. Therefore, we ask that you complete this form carefully. Thank you for your assistance. Please check the following and comment where necessary:

1. What is your relationship to the applicant?  **Employer**  **Teacher**  **Friend**  **Other**
2. How well do you know the applicant?  **Very Well**  **Well**  **Casually**
3. In what situations have you observed the applicant?  **Home**  **Work**  **School**  **Social**  **Church**  
 **Other**

Personal Profile -- Please check the appropriate box.

	Mature	Developing	Weak	Not Observed
Ability to Follow	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to Receive Criticism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Christian Character	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communication Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Concern for Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Decision Making	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional Stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

Check the word that best completes the sentence. **The applicant displays:**

	Always	Often	Sometimes	Seldom	Never
Academic Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooperativeness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flexibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Industry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Perseverance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Punctuality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reliability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Respect of Others' Convictions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self Discipline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sound Judgment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

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## Reference Form (cont.)

4. To what extent is the applicant involved in church work?

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5. Does he/she display high moral standards? Please explain:

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6. Is he/she prejudiced against any groups, races or nationalities? Please explain:

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7. Overall, what do you consider to be the applicant's strong points? (include special abilities):

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8. Please comment on the applicant's family background (if known):

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9. In your opinion, what are the applicant's motives for applying to The Summit House?

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10. What could Envision Mission do to aid in the applicant's personal development?

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11. Is the applicant financially responsible?

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12. Please add any other remarks concerning medical, psychological, drug/alcohol use or other areas of their life we should know more about to be of service to them:

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13. Would you recommend the applicant for acceptance by The Summit House?

**Yes**  **With some Reservation**  **No (please explain)**

---

---

14. Has the applicant proven on any occasion to be unreliable, dishonest or of questionable character?

**Yes**  **No (please explain)**

---

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I have known \_\_\_\_\_ for \_\_\_ years and believe that he/she possesses the qualities indicated above.

Applicant Name

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Signed

Date (mm/dd/yy)

---

Name

Position

Phone

Address:

Would you like further information about Envision Mission?  Yes  No Phone:

Note: Your prompt handling of this form will speed the application process. Please fill out and return it to Envision Mission within one week of receipt. Thank you for your input!

Please direct all forms to:

**Envision Mission c/o Hope in Christ Church  
710 E. Sunset Bellingham, WA 98225**



## Reference Form

**To the Applicant:** Please complete the information below and provide a stamped envelope addressed to Envision Mission for the person filing the reference.

Name of the Applicant

Program Applying For

Dates: (mm/dd/yy) to (mm/dd/yy)

I, the above-named applicant, WAIVE any right I have to read or obtain copies of this recommendation knowing that this waiver is NOT required as a condition for admission.

Applicant's Signature

Date (mm/dd/yy)

The above applicant has applied for participation in Envision Ministries "The Summit House"; an interdenominational Christian intensive recovery program based in a discipleship house. Founded in 2003, Envision Mission built its first official Summit House location in 2018. Its purposes include training, challenging and channeling Christians to fulfill Christ's command: "*Go, therefore, and make disciples of all nations*" by learning what it means to become a disciple of Christ first.

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1. What is your relationship to the applicant?  **Employer**  **Teacher**  **Friend**  **Other**
2. How well do you know the applicant?  **Very Well**  **Well**  **Casually**
3. In what situations have you observed the applicant?  **Home**  **Work**  **School**  **Social**  **Church**  **Other**

Personal Profile -- Please check the appropriate box.

	Mature	Developing	Weak	Not Observed
Ability to Follow	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to Receive Criticism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Christian Character	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communication Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Concern for Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Decision Making	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional Stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

Check the word that best completes the sentence. **The applicant displays:**

	Always	Often	Sometimes	Seldom	Never
Academic Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooperativeness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flexibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Industry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Perseverance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Punctuality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reliability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Respect of Others' Convictions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self Discipline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sound Judgment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

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## Reference Form (cont.)

4. To what extent is the applicant involved in church work?

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5. Does he/she display high moral standards? Please explain:

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6. Is he/she prejudiced against any groups, races or nationalities? Please explain:

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7. Overall, what do you consider to be the applicant's strong points? (include special abilities):

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8. Please comment on the applicant's family background (if known):

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9. In your opinion, what are the applicant's motives for applying to The Summit House?

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10. What could Envision Mission do to aid in the applicant's personal development?

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11. Is the applicant financially responsible?

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12. Please add any other remarks concerning medical, psychological, drug/alcohol use or other areas of their life we should know more about to be of service to them:

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13. Would you recommend the applicant for acceptance by The Summit House?

**Yes**  **With some Reservation**  **No (please explain)**

---

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14. Has the applicant proven on any occasion to be unreliable, dishonest or of questionable character?

**Yes**  **No (please explain)**

---

---

I have known \_\_\_\_\_ for \_\_\_ years and believe that he/she possesses the qualities indicated above.

Applicant Name

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Signed

Date (mm/dd/yy)

---

Name

Position

Phone

Address:

Would you like further information about Envision Mission?  Yes  No Phone:

Note: Your prompt handling of this form will speed the application process. Please fill out and return it to Envision Mission within one week of receipt. Thank you for your input!

Please direct all forms to:

**Envision Mission c/o Hope in Christ Church  
710 E. Sunset Bellingham, WA 98225**

**Pastor's Reference Form**  
or Youth Pastor, Spiritual Mentor, etc.

**To the Applicant:** Please complete the information below and provide a stamped envelope addressed to Envision Mission for the person filing the reference.

Name of the Applicant

Program Applying For

Dates: (mm/dd/yy) to (mm/dd/yy)

I, the above-named applicant, WAIVE any right I have to read or obtain copies of this recommendation knowing that this waiver is NOT required as a condition for admission.

Applicant's Signature

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Personal Profile -- Please check the appropriate box.

	Mature	Developing	Weak	Not Observed
Ability to Follow	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to Receive Criticism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Christian Character	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communication Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Concern for Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Decision Making	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional Stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				

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Industry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Perseverance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Punctuality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reliability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Respect of Others' Convictions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self Discipline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sound Judgment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:					

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**Reference Form (cont.)**

4. To what extent is the applicant involved in church work?

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5. Does he/she display high moral standards? Please explain:

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6. Is he/she prejudiced against any groups, races or nationalities? Please explain:

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7. Overall, what do you consider to be the applicant's strong points? (include special abilities):

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8. Please comment on the applicant's family background (if known):

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9. In your opinion, what are the applicant's motives for applying to The Summit House?

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10. What could Envision Mission do to aid in the applicant's personal development?

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11. Is the applicant financially responsible?

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12. Please add any other remarks concerning medical, psychological, drug/alcohol use or other areas of their life we should know more about to be of service to them:

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13. Would you recommend the applicant for acceptance by The Summit House?

**Yes**  **With some Reservation**  **No (please explain)**

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14. Has the applicant proven on any occasion to be unreliable, dishonest or of questionable character?

**Yes**  **No (please explain)**

---

---

I have known \_\_\_\_\_ for \_\_\_ years and believe that he/she possesses the qualities indicated above.

Applicant Name

---

Signed

Date (mm/dd/yy)

---

Name

Position

Phone

Address:

---

Would you like further information about Envision Mission?  **Yes**  **No**

Note: Your prompt handling of this form will speed the application process. Please fill out and return it to Envision Mission within one week of receipt. Thank you for your timely response!

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