

# BRIDGE FUND GRANT APPLICATION 2018

**Bridge Fund Grants** provide funding to “bridge” the initial transition from inpatient treatment to recovery housing as part of a plan for long term community based support in a recovery oriented system of care. This is one time transitional funding only.

**Bridge to Housing/Intake Grants:** Provide transitional funding up to \$350 for housing immediately upon release from inpatient treatment.

**Program Grants:** Provide financial assistance to applicants living in recovery housing for Programs suggested as part of a Recovery Plan overseen by a licensed mental health practitioner or Certified Recovery Specialist.

**Academic Grants:** Provide financial assistance to applicants living in recovery housing for up to one semester of classes at community college or other work training program.

ALL BRIDGE GRANT APPLICATIONS MUST INCLUDE **A LETTER FROM A LICENSED MENTAL HEALTH PROFESSIONAL** RECOMMENDING RECOVERY HOUSING PLACEMENT AS THE NEXT STEP FOR THE RECOVERY PLAN AND **SPECIFYING REASONS FOR REFERRAL TO SPECIFIED RECOVERY HOUSE** AS IT RELATES TO FURTHERING APPLICANT’S RECOVERY PLAN. APPLICANTS MUST ALSO INCLUDE A **LETTER FROM THE RECOVERY HOUSE MANAGEMENT** STATING THE COST OF HOUSING TO BE COVERED, ADDRESS, AND AGREEMENT TO APPLY FUNDS DIRECTLY TO THE APPLICANT’S HOUSING COSTS.

While not required, we also highly recommend that you provide a ***statement from a Certified Recovery Specialist*** stating that a Recovery Plan is or will be in place during the term of the grant.

*Please allow two weeks for processing. If the applicant’s needs are urgent please let us know and we will try to accommodate an expedited application review.*

Nancy Marcus Newman, Esq., CRS

## The Bridge Foundation

*a 501(c)(3) nonprofit corporation  
dedicated to Freedom and Positive Choices for our Children*

WWW.BRIDGE-FOUNDATION.ORG

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cell 610-213-6303  
THEBRIDGEFOUND@GMAIL.COM  
(844) 4-THEBRIDGE (Toll Free Information and Resource Line)  
There is A Solution

## BRIDGE RECOVERY HOUSING GRANT APPLICATION 2018

### APPLICANT INFORMATION (REQUIRED)

Name:		
Date of birth:	E-mail:	
Address:		City:
State:	Zip Code:	Phone:
Sobriety date:		Current treatment/recovery program:
Percentage of insurance copay or program fee paid by you? _____%		Response deadline (when you need a response):
I am applying for (choose one):		
<input type="checkbox"/> Intake Grant at Specified Recovery House*:		
<input type="checkbox"/> Program Grant at Specified Recovery House*:		
<input type="checkbox"/> Academic Grant		
How will this grant support your recovery?		

### EMPLOYMENT & FINANCIAL INFORMATION (REQUIRED)

Current employer (use "n/a" if none):		
Employer address:		How long?
City:	State:	ZIP Code:
Phone:	E-mail:	Position:
Hourly Salary <i>(Please circle)</i>	Est. monthly income: \$	Est. Total savings: \$
Describe your financial need and other sources of funding?		

*Instructions: Please be sure to complete all required sections fully (including references), indicate any required timeframes, and submit to: [TheBridgeFound@gmail.com](mailto:TheBridgeFound@gmail.com)*

<b>ACADEMIC INFORMATION (ACADEMIC GRANTS ONLY)</b>		
Current/proposed academic institution:		
Program/Degree Goal:		
City:	State:	Start Date:
Major/Area of Interest:		
Proposed completion date:		
How Long have you been at Specified Recovery House? _____/mo. At _____ House		
Why are you a good candidate for a Bridge Fund academic grant?		
<b>BRIDGE RECOVERY PROGRAM GRANT (PROGRAM GRANTS ONLY)</b>		
INTAKE (FIRST MONTH ONLY)	YES	NO
INDIVIDUAL COUNSELING (5 VISITS)	YES	NO
Referring Institution:		
Referring Professional:	Phone:	Email:
Why are you a good candidate for a Bridge Recovery Program Grant?		
<b>REFERENCES (REQUIRED FOR ALL APPLICANTS)</b>		
Personal Reference Name, City, State (All Applicants):		Phone:
Recovery Reference Name, City, State (must be licensed counselor for Intake Grant)		Phone:
Academic Reference Name, City, State (Academic Grants Only):		Phone:
<b>SIGNATURES</b>		
I authorize the verification of the information provided on this form as to my credit and employment. I have received a copy of this application.		
Printed name of applicant		Date:
Signature of applicant:		Date:

*Instructions: Please be sure to complete all required sections fully (including references), indicate any required timeframes, and submit to: [TheBridgeFound@gmail.com](mailto:TheBridgeFound@gmail.com)*