

NEW YORK ASIAN WOMEN'S CENTER
AGREEMENT OF RESPONSIBILITY FOR SAFE SHELTER RESIDENTS

1. I agree to take full responsibility for all decisions concerning myself and my dependents while accepting emergency shelter from New York Asian Women's Center (NYAWC).
2. I release NYAWC, its staff, Board members, Safe Home Families, and volunteers from any and all liability.
3. I will not use alcohol or drugs while in the shelter program, nor are such substances permitted on the premises.
4. I will use the telephone only with the permission of the Safe Home family or other NYAWC representative and will make only local calls, unless otherwise arranged and authorized.
5. I will not make any copies of any keys given to me by NYAWC representatives and will return all keys at the end of my stay.
6. I will only stay in the shelter program during the days arranged by NYAWC representatives. I will not contact the Safe Home family or return to the safe dwelling site after leaving. If in the future additional shelter is needed, I will call the NYAWC office to arrange additional services.
7. I will maintain FULL confidentiality. I will not tell my friends, family or ANYONE ELSE of the shelter site's address, general location, telephone number, names of any staff, volunteers, or Safe Home family, nor will I release any other identifying information. I understand that if I break this policy, I will automatically be disqualified from any further service from NYAWC. I understand that this policy is to best ensure the safety of all involved. I further understand that I will be held responsible if any harm comes to any NYAWC representatives including Safe Home family members because I broke this confidence.
8. I will leave the shelter site in the same condition as I found it. I understand that I am responsible for keeping the shelter site clean at all times.
9. I will be responsible for the care and discipline of my children. I will not leave my children unattended or unsupervised at any time while in the shelter site.
10. I will inform NYAWC representatives of any medical problems incurred by myself or my dependents during my shelter stay. I will seek medical attention as needed for myself and my dependents. In the event that I am unable or unavailable during a medical emergency to seek medical attention for my dependents, I authorize NYAWC representatives to seek appropriate and necessary medical treatment as medically indicated.

11. I will maintain direct contact with NYAWC representatives at least every 48 hours and meet with such representatives at least once every week during my entire shelter stay.

12. I have been informed of my rights and responsibilities as a shelter resident with NYAWC. I understand them and agree to abide by them.

13. I understand that any breach of any of the above agreements constitutes grounds for eviction from NYAWC's shelter program and shelter site.

Be back to safe home before 10pm.

Signature of Shelter Resident

Signature of NYAWC representative

Date

Date

Rules
9/89