

## **VOLUNTEER APPLICATION FORM**

## Thank you for your enquiry and interest in volunteering at The Oak Tree Coffee House.

There are a variety of tasks to be undertaken and we are looking for many different people to fill these roles. There is no such thing as a 'typical' volunteer and we will be delighted to respond to your enthusiasm and experience and provide training, support and the opportunity to make a difference in our community through serving in the Coffee House.

## The Oak Tree Coffee House VISION:



Why should a church be planning to open a coffee house? The answer lies in this purpose statement:

"St Luke's Church exists to be a welcoming, worshipping, healing community, which is rooted in the Father's love, growing in the power of the Spirit, and reaching out with the love of Jesus."

Since the mid-nineties, St Luke's Church has wondered about the possibility of opening a coffee house – just across the square from the Community Centre, with a view to it becoming some kind of permanent presence for the church in the community.

The vision for the Oak Tree is for it to be primarily a good quality 'Community Coffee House' – a pleasant place for people to meet one another, to enjoy good coffee or soft drinks, hot and cold snacks, cakes and so on. It will also be an outlet to promote and sell Fair Trade goods, and to display and sell local crafts, and arts and crafts from developing countries.



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Although the Coffee House will need to be run on a business basis, its purpose is to serve the local community. Any profits will not be used to fund or subsidise other St Luke's work. It will exist in its own right fulfilling the purpose statement as described above.

K Ward/Vol App Frm v 2.0 / July 2023

	P	ersonal Deta	ails					
Mr / Mrs / Mis	ss / (Other) .							
	Postcode:							
number								
number								
umber								
	16-24	25-34	35-44	45-64	65+			
of birth:								
you like to a	chieve thro	ugh volunte	ering at The	Oak Tree Co	ffee House?			
What previous experience (paid or unpaid) do you have that might help with a volunteering role?								
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have a Food F	Hygiene Ce	rtificate? If	Yes', what da	ate was it ob	tained?			
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DOCTORS CONTACT DETAILS			
Name			
Address			
Tel No			
MEDICAL DETAILS			
Do you have any medical conditions?	Yes	<b>□</b> N	o <b></b>
Please detail			
Do you have any allergies, including food and medication?	Yes	□ N	о 🗖
Please detail			
Do you have hearing loss?	Yes	□ N	o <b></b>
Please detail			
Are you visually impaired?	Yes	□ N	o <b>□</b>
Please detail			
Please declare any criminal convictions – information to assist the selection process and will be taken in considered relevant to	to accour	nt only whe	

## When might you be available to help? Please tick all that apply and we can then discuss with you the best times to suit you and the Coffee House.

	0830-1030	1030-1300	1200-1430	1430-1630	
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
We would like you to pro Name: Address: Email: Tel: In what capacity do you kn Name: Address:			rofessional a	ind one personal:	
Email: Tel: In what capacity do you kn	ow the referee	:			
Date:					
Emergency Contact D Next of Kin	Details				
Name: Address:					
Phone Number: Relationship to you:					

Signature: Name: Date: Please return this form to: The Oak Tree Coffee House **GDPR** If you are joining us as a volunteer, then at the end of this section please sign to give us consent to use your data for obtaining references in order to assess your suitability to work with us. If you are under 18, we need a parent or other legal guardian to give their consent too. Name: Signature: Parental Consent (if applicable) Name:

Signature:

I declare that all the above information is true and accurate. I declare that I have no conflicts that prevent me from working with young persons/vulnerable adults.