

Appendices

Attached are a range of templates to support the operation of a Social Café. A big thank you to the Steering Committee of Peals Place at Pambula, NSW for developing these templates and allowing us to use them in the Toolbox to assist other communities.

Appendix A.....Volunteer Registration Form

Appendix B.....Volunteer Agreement

Appendix C.....Checklist for Dining Area

AppendixD.....Kitchen Cleaning and Food Safety Checklist

AppendixE.....Code of Conduct for Volunteers

Volunteer Registration Form

(Name of Organisation) is a special place for those who might be homeless, lonely, having a tough time or are just looking for friendship and a welcoming place to enjoy a good meal!

How can you help?

To make (Name of Organisation) a success we need volunteers who can make our guests feel welcome and can also help our chef prepare and serve delicious meals for our guests to enjoy.

Answering the following questions will help us to make sure that your experience as a volunteer is rewarding, productive and enjoyable.

Personal Information

Name: -----
Please Print *First Name* *Last Name*

Date of birth: ----- Gender: Male / Female (please circle)

Address: -----

Town/suburb: ----- Postcode: -----

Home Phone: ----- Work Phone: -----

Mobile: ----- Email address: -----

Who should we contact in an emergency?

Name: -----

Address: -----

Phone: ----- Mobile: -----

Do you have any special needs we should be aware of? Yes/No (please circle)

Details: -----

Do you have any impairment or medical condition that could restrict you in any of the activities we may ask you to do? Yes / No
(please circle)

I will have difficulty carrying out the following tasks:

Volunteer Experience and Specific Needs

Have you had any previous experience as a volunteer? Yes/No (please circle)

If so, with what organisations, and what kind of work did you do? -----

So that we can make the best use of your time volunteering, please list the skills, experience or qualifications you would like to use while volunteering?

Skills can include and are not limited to clerical /administration, cooking, media and public relations; photography; graphic design; grant writing; planning and strategic development; supervisor skills.

Please list: -----

If you have hobbies or interests we would love to know about them: -----

How do you prefer to work? (Please circle all your preferences)

- Directly with people *e.g. meet and greet guests; serving at tables*
- Behind the scenes *e.g. food preparation, cleaning; dishwashing; set up and pack up; collection of food*
- Help with administration *e.g. join the steering committee; record keeping*
- Volunteer Co-ordinator/Supervisor of Pearls Place
- No preference

Attainment

Do you hold a current Safe Food Handling Certificate? Yes / No (please circle)

Do you hold a current First Aid Certificate? Yes / No (please circle)
If yes, what date did you receive it?

Have you completed a Working with Children Check (WCC) Yes / No (please circle)

If yes, please include the WWC check number

If no, do you agree to obtain a WWC Check? Yes / No (please circle)

Do you agree to a police check? Yes / No (please circle)

Do you agree to have the above information entered on (Name of Organisation) volunteer database management system? Yes / No (please circle)

Information you provide will be used only for the purpose of ensuring your safe and enjoyable participation as a volunteer at (Name of Organisation). This information will not be shared with any other organization. All information will be destroyed once you are no longer a volunteer at Pearls Place.

Volunteer availability

Date you can begin volunteering? / /

Are you interested in volunteering for special events/projects? Yes / No (please circle)

Signed: ----- Date: / /

Please return to:
Mailing Address
(Name of Organisation)

Or bring the completed form to (Name of Organisation)

Office Use:
Details entered in volunteer database: Yes / No
Date entered: / / By Whom: