



# Application to Serve

About You	
<b>Applicant Name:</b>	<b>Date of Birth:</b>
<b>Cell Phone:</b>	<b>Alternate Phone:</b>
<b>Email Address:</b>	
<b>Home Address:</b> (Or current residence, if you're a student)	
<b>Are you a Student:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>If yes, where?</b> _____ <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-time _____ (hours/week)	
Coffee Experience	
Storytime Coffee Co. is a coffee shop in Rogersville, Missouri that is affiliated with Story Church. Important skills include: customer service, food/beverage preparation, food safety, and a pleasant personality.	
<b>My experience with coffee includes</b> (chose one): <input type="checkbox"/> I currently work as a barista at _____ <input type="checkbox"/> I have worked as a barista in the past at _____ <input type="checkbox"/> I am addicted to coffee and know what most coffee drinks should taste like. <input type="checkbox"/> I'm not a coffee snob, but I do regularly drink coffee. <input type="checkbox"/> My favorite coffee is whatever is on sale at the grocery store. <input type="checkbox"/> Yuck....coffee.	
<b>My experience with customer service includes</b> (chose one): <input type="checkbox"/> I genuinely love working with people of all types! <input type="checkbox"/> I have previous work experience that required customer service and always got good feedback for how I treated customers. <input type="checkbox"/> My customer service motto is: "Fake it 'til you make it". <input type="checkbox"/> I hope to someday become a hermit who never leaves the house.	

## Hopes

**Why do you want to work at Storytime Coffee Co.?**

**What strengths do you think you can offer Storytime Coffee Co.?**

**What is your availability?**

<input type="checkbox"/> Monday	From	to
<input type="checkbox"/> Tuesday	From	to
<input type="checkbox"/> Wednesday	From	to
<input type="checkbox"/> Thursday	From	to
<input type="checkbox"/> Friday	From	to
<input type="checkbox"/> Saturday	From	to
<input type="checkbox"/> Sunday	From	to

**School activities that will require flexibility in your schedule:**

## My Story

**My experience with faith** (chose all that apply):

- I currently attend church at \_\_\_\_\_
- I attend church three to four times per month.
- I attend church one to two times per month.
- I attend church a few times per year.
- I have attended church in the past, but that is not currently part of my life.
- I don't personally believe in God, but I think faith is fine for other people.
- I am actively opposed to faith in a higher power that some might call God.

**If you describe yourself as someone who has faith in God, describe your faith story:** (If faith is not part of your life, you can use this space to tell us about that choice)

### References

**Reference #1 Name:**

**Address:**

**Phone #:**

**Email:**

**Reference #2 Name:**

**Address:**

**Phone #:**

**Email:**

**Reference #3 Name:**

**Address:**

**Phone #:**

**Email:**

**Signature:**

**Date:**