# C.A.F.E. Practices Verification Organization Application Form

Please fill out this form completely and email to: [cafepractices@scsglobalservices.com](mailto:cafepractices@scsglobalservices.com)

|  |  |
| --- | --- |
| **Responsible Sourcing Strategies,**  **Food & Agriculture SCS Global Services** 2000 Powell St. Suite 600 Emeryville, CA  94608 | **Questions?**  Email: [cafepractices@scsglobalservices.com](mailto:cafepractices@scsglobalservices.com)  Web: <https://www.scsglobalservices.com/services/starbucks-cafe-practices>  Main: 1.510.452.8000 |

|  |  |
| --- | --- |
| **CONTACT INFORMATION** | |
| **Verification Organization Name:** |  |
| **Contact Person:** |  |
| **Address:** |  |
| **Phone:** |  |
| **Fax:** |  |
| **Email:** |  |
| **Website:** |  |

|  |
| --- |
| **ORGANIZATIONAL CAPACITY** |

|  |
| --- |
| **Financial and Legal Structure:** Please write a brief description of the legal status of the verification organization (e.g., a private enterprise, a not-for-profit entity, etc.), including the names of its owners and, if different, names of the persons who directly oversee day-to-day operations. |
|  |
| **Management Structure:** Describe the management structure of your organization (e.g., head office, responsible party for quality control, number of participating satellite offices, employees, sub-contractors). |
|  |
| **Accreditations of Applicant:** List any accreditations the verification organization has obtained or is presently seeking. |
|  |
| **Experience:** How many years of experience does the verification organization have conducting audits, assessments, and/or inspections? |
|  |
| **Services Offered:** List the full range of services, including any pre-assessment services, offered by the organization. |
|  |
| **Geographic Operation:** List all countries in which the organization carries out work. |
|  |
| **Language:** What languages do organization staff members speak and write? Please include name of each employee and their level of proficiency in each spoken and written language. (1-Poor, 5- Excellent) |
|  |
| **Technical Capacity:** Describe the organization’s access to technical and logistical tools that facilitate field verification work and reporting activities (i.e. telecommunications, computer and internet capabilities, reliable transportation, GPS units, digital cameras, etc.). |
|  |
| **Responsible Parties:** List the names, titles, and responsibilities of personnel who will be directly involved in C.A.F.E. Practices verification work. Attach organizational chart and CV’s. |
|  |
| **Past Verification Work:** Describe any prior verification work for Starbucks C.A.F.E. Practices, the Starbucks Preferred Supplier Program (PSP) or other Starbucks programs. Please write N/A if not applicable. |
|  |
| **Additional information:** |
|  |

|  |
| --- |
| **QUALITY MANAGEMENT SYSTEM** |

|  |
| --- |
| **Quality Management System:** Please provide an overview of your organization’s Quality Management System, including individuals responsible for carrying out the QMS, record keeping, and document control. |
|  |
| **Internal Review:** Describe the procedures your organizations would follow for internal review of C.A.F.E. Practices reports including the responsible parties for final review, peer review practices, etc. |
|  |
| **Appeals and Disputes:** Describe the policies and procedures (including identified personnel) your organization would follow for the resolution of complaints, appeals, and disputes between C.A.F.E. Practices participants/applicants or other parties and the verification organization. |
|  |
| **Internal Training:** Describe the training procedures and topics in place for new and existing employees, as well as for subcontract auditors. |
|  |

|  |
| --- |
| **VERIFIER INDEPENDENCE AND CONFIDENTIALITY** |

|  |
| --- |
| **Independency Policy:** Describe policies used by your organization that ensure verification organization, verifiers, and inspectors remain free from any commercial, financial and other pressures that might influence the results of a verification process. |
|  |
| **Confidentiality Policy:** Describe verification organization’s policies and procedures that ensure the confidentiality of the information obtained in the course of verification is safeguarded. |
|  |
| **Conflict of Interest Declaration:** Verification organizations, verifiers, and their inspectors must not be presently associated with, or have worked directly for, the entities they are verifying without disclosing and describing the nature of such affiliations to SCS to avoid any potential for a conflict of interest.   1. Describe the procedures related to conflict of interest; 2. List all entities within the coffee growing and processing sector with which the applicant has now or had in the past 2 years, a financial and/or contractual relationship. In addition, list any other circumstances that could compromise the independence of the applicant. |
|  |
| **Corruption and Bribery:** Please describe your organization’s approach to managing corruption and bribery risks.  Attach your Anti-Bribery / Anti-Corruption policy. |
|  |
| **Subcontractor procedures**: If subcontractors are or will be used, describe the procedures in place for ensuring confidentiality, conflict of interest, and adherence to the anti-corruption and anti-bribery policies of the organization. |
|  |
| **Additional information:** |
|  |

|  |  |
| --- | --- |
| **SCS APPLICATION REVIEW- DO NOT COMPLETE. FOR OFFICE USE ONLY.** | |
| **Date Received:** |  |
| **Date Reviewed:** |  |
| **Reviewer Name(s):** |  |
| **Reviewer Notes:** |  |
| **Next steps:** |  |