



# NANNIES ON CALL NANNY APPLICATION

NAME \_\_\_\_\_  
DATE \_\_\_\_\_  
LOCATION \_\_\_\_\_  
PHONE \_\_\_\_\_

## BE HONEST, BE SPECIFIC, BE YOURSELF.

### CURRENT CONTACT INFORMATION

Full Name: \_\_\_\_\_  
first middle last

Other Names: \_\_\_\_\_

Birth Date: DAY / MONTH / YEAR Age: \_\_\_\_\_

Address: \_\_\_\_\_  
apartment number street city postal code

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

SKYPE Address: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Text Messaging (Server): \_\_\_\_\_

Fax: \_\_\_\_\_

### 1. EDUCATION & TRAINING

Name and address of Schools and/or Colleges, include dates attended:  
\_\_\_\_\_  
\_\_\_\_\_

Qualifications and dates completed: \_\_\_\_\_

Do you have current Valid CPR / First Aid Certificate? Yes  No  If yes, confirm expiry date: \_\_\_\_\_

Please provide any additional educational experiences below:  
\_\_\_\_\_  
\_\_\_\_\_

**2. PLACEMENT PREFERENCES** Please check all of the nanny positions that apply to you.

- Full Time live-out (40 hours per week)
- Part Time Placements (less than 25 hours per week)
- Two Part Time hours to make Full Time hours
- After School Care (usually 3pm – 6 or 7pm)
- Short Term / Summer (2weeks – 11months)
- On Call Only
- On Call and on a Placement

How many hours per week would you like to work a week? IDEALLY.

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When could you begin work?

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List your availability, be sure to include times;

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List the days and times when you are NOT available;

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Would you be willing to commit to a position for at least one year?

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Are you willing or interested in travelling with your placement?

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Please indicate any required days off in the upcoming year?

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Minimum GROSS Salary expectations per hour:

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Please list all the neighborhoods /areas you are available to work in:

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#### 4. FURTHER PLACEMENT DETAILS

Will you work in a home where one or both parent work from home? Yes  No

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Do you have previous related experience with this? Yes  No

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Do you have any Special Needs experience? Yes  No

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What has been the youngest age you have previously worked with? Please describe that experience.

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What age range of children do you feel comfortable working with? Check which apply:

Newborn – 1 year  1 – 5 years  6 – 9 years  10 – 12 years  12 – 16 years

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Would you do light housekeeping? Yes  No

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Will you cook for the children? Yes  No

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Would you work in a home with pets? Yes  No

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Do you swim? Yes  No

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Do you speak any other languages? Yes  No

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If yes, what languages and at what level have you achieved?

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Do you have children of your own?

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Do you have any special skills you would be willing to share or teach?

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List your hobbies, interests and activities:

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**6. HEALTH INFORMATION**

Do you smoke?

Do you have any allergies?

In a word how would you describe your health / fitness level? fair  good  great  excellent

How many sick days did you take last year? 1 – 3 days  4 – 10 days  10 – 20 days  More than 20

Do you take frequent medication that would affect work with children? Yes  No

If yes, please explain.

Do you have any physical restrictions, impairments or illnesses that would affect work with children? Yes  No

If yes, please explain.

Are you currently under a physicians care on a more than regular basis? Yes  No

If yes, please explain.

Is there any thing else that we should know, or that you would like to share?

How did you hear about Nannies on Call?

*I certify that the information supplied on this form is true and accurate and I grant Nannies on Call permission to use this information at their discretion. I understand that the agency cannot be responsible for any loss, damage, delay, clash of personalities or for any other circumstances that may arise beyond its control and which should be resolved between the employer and employee. I will confirm with the agency if am requested by the employer to return at a later date or am passed on to friends or acquaintances of the employer.*

Signature\*

*\* By sending this file, you are electronically signing that the above are true statements pertaining to you and your application to Nannies on Call.*

Nanny's Name

Date

