



Family Application

Today's Date: _____ Date Nanny is Needed: _____

Surname: _____

Address: _____

City, State, Zip Code: _____

Home Phone: _____ Alternate Number _____

First Name: _____ Last Name: _____

Occupation: _____

Place of Employment: _____

Business Phone: _____ Email Address: _____

Hours worked per week: _____ Do you work from home? _____

Do you Travel for work: _____ How Often: _____

First Name: _____ Last Name: _____

Occupation: _____

Place of Employment: _____

Business Phone: _____ Email Address: _____

Hours worked per week: _____ Do you work from home? _____

Do you Travel for work: _____ How Often: _____

Type of Nanny you are applying for:

Female	Live Out	Permanent	Full Time	Age (_____) Preferred:
Male	Live In	Temporary	Part Time	Non Smoker

Salary Range (weekly) _____ to _____ Additional Hours paid: \$ _____/hour

Days and Hours Scheduled:

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Special Skills Requested:

CPR	Drive	Lifeguard	Languages	Teacher	# of children
1 st Aid Drive	Cook	Swim	ASL	Passport	Special Needs

Have you had a nanny before? Yes No Would you rehire that person? Yes No

How was the experience? _____

Please describe your idea of what you would like your nanny to do on a typical day: _____

A Little About Your Family

Please describe what kind of parents you are: _____

Describe your lifestyle: _____

What do you do as a family in your free time? _____

Will you need your nanny on vacation? _____

How often do you vacation and where? _____

Will summer change the schedule for your children/nanny?(Describe) _____

Will you require your nanny to care for sick children? _____

What will you do if your nanny calls in sick? _____

The Motherhood Center has a regular pool of babysitters to choose from if a nanny should have unforeseen circumstances. Become acquainted with options before your need arises.

CHILDREN:

1. Name _____ Birth Date _____ Age _____ Sex _____

Briefly describe your child:

2. Name _____ Birth Date _____ Age _____ Sex _____

Briefly describe your child:

3. Name _____ Birth Date _____ Age _____ Sex _____

Briefly describe your child:

(List additional children on the back of this page)

Household Pets (type and size) : _____

Smoking Family Non-smoking Family Housekeeper

Nanny Requirements

Which of the following do you expect to be regular duties? And how much time would you like dedicated to each activity?

Take care of Children		Play with Children		Creative Activities	
Prepare Meals		Groceries		Homework	
Groom Daily		Errands		BathTime	
Transportation		Housekeeping		Pet help	

How much time in each day would you like your children to spend on the following:

Homework		Television		Internet	
Exercise		Video Games		Phone	

Please list five qualities important to you in a nanny:

1. _____
2. _____
3. _____
4. _____
5. _____

Nannies Responsibilities

List additional information particular to your family situation that the nanny should be aware of:

Other Special information: _____