



Nanny Finders, Inc.

Personal Information:

Full name:	Date:
Address:	
Home phone:	Cell phone:
Email:	
Date of Birth:	Social Security Number:

What name appears on your birth certificate?

--

Place of birth and hospital: *(please include the county, city, and state).*

--

Marital Status:

Mother's Maiden Name:

--

Are you interested in a position for child care or adult care? CHILD/ADULT

Do you have at least two years of experience working with children or adults? YES / NO

Are you a licensed driver with valid automobile insurance? YES / NO

Do you own a dependable car? YES / NO

If you answered no, please provide an explanation of your transportation:

--



General Information:

Car:	Make:	Model:	Year:
Insurance Carrier:		Policy #:	
License # & State:		Name as it appears on license:	

Other General Information:

Which would you prefer?

Full-Time	Part-Time	Live-In	Live-Out
------------------	------------------	----------------	-----------------

When are you available to work?

Mornings	Afternoons	Evenings	Overnights	Weekends	Holidays
-----------------	-------------------	-----------------	-------------------	-----------------	-----------------

Please Note: Part-Time positions are less than 30 hours per week and full-time is over 30 hours and typically is between 40-50 hours per week.

Expected pay range:

Are you negotiable?

	YES / NO
--	-----------------

What areas of town do you prefer to work and/or live?

--

Which responsibilities are you willing to do as a caregiver?

Light Housekeeping: YES / NO	Cooking: YES / NO	Run Errands: YES / NO
Total Housekeeping: YES / NO	Children's Laundry: YES / NO	Travel with Family: YES / NO
Light Cooking: YES / NO	Family's Laundry: YES / NO	Care for Pets: YES / NO

Are you allergic to or afraid of any animals? YES / NO

If, yes please describe:

--

Do you smoke? YES / NO Please note: Child-care is a non-smoking industry!

Are you comfortable working for a family who smokes? YES / NO

Are you able to swim? YES / NO

Are you willing to take swimming lessons? YES / NO

Do you feel comfortable teaching the children in your care to swim? YES / NO



Education

Name & Location:	Years attended:	Graduation Date:
Grammar School		
High School		
College (Please verify college transcript)		
Trade, Business, or Correspondence School		

Subjects of special training
Additional special skills or training

What school related activities were you involved in as a student?

Did you receive any awards or recognition for something you did while you were in school?

Are you presently a student? YES / NO

If you answered yes, please provide us with your current school schedule: (Are you attending classes based on a quarter or semester schedule?) Will this schedule change from time to time?

--



Weekly School Schedule:

Monday:	Thursday:
Tuesday:	Friday:
Wednesday:	Sat./Sun.:

Are you currently CPR or First Aid certified? YES / NO (If you circled yes, please provide us with a copy)

Please note: You must be certified in CPR and First Aid as a requirement for employment with Nanny Finders. If you are not certified, you will be scheduled to take the next available class at the current rate.

Have you obtained any other certifications in any of the following areas: Life guarding, swimming, teaching, tutoring, music, dance, sports, or other? Please share your experiences.

Do you speak a foreign language? YES / NO If yes, please describe your abilities and would you be willing to teach the language to the children in your care?

Former Employment:

(Please list below your last three employers, starting with the most recent)

Name of Employer:

--

Address: City: State: Zip:

--

Start Date: End Date: Job Title:

--

Starting Salary: Final Salary: May we contact employer?

--

Name of Supervisor: Title: Telephone:

--

Description of Work:

Reason for Leaving:

--



Former Employment: (Continued)

Name of Employer:

--	--	--	--

Address: City: State: Zip:

--	--	--	--

Start Date: End Date: Job Title:

--	--	--

Starting Salary: Final Salary: May we contact employer?

--	--	--

Name of Supervisor: Title: Telephone:

--	--	--

Description of Work:

Reason for Leaving:

--

Name of Employer

--	--	--	--

Address: City: State: Zip:

--	--	--	--

Start Date: End Date: Job Title:

--	--	--

Starting Salary: Final Salary: May we contact employer?

--	--	--

Name of Supervisor: Title: Telephone:

--	--	--

Description of Work:

Reason for Leaving:

--



Personal References

Please provide the names of three people who are of no relation to you that you have known for at least two years.

Name:	Length of acquaintance:
Address:	City:
State:	Zip:
Home Telephone:	Work Telephone:

Name:	Length of acquaintance:
Address:	City:
State:	Zip:
Home Telephone:	Work Telephone:

Name:	Length of acquaintance:
Address:	City:
State:	Zip:
Home Telephone:	Work Telephone:

May we contact previous your employers? YES / NO

May we contact your personal references? YES / NO

I state that all of the provided information of in the Personal Information, General, Education, Former Employment, and Personal Reference sections is all true and accurate. I understand providing false information on employment documents will lead to termination from registration or employment, if it is determined that I knowingly withheld or provided any dishonest information. I authorize Nanny Finders, Inc. to contact my previous employers, personal references, and to verify all information concerning my education. I also agree to allow Nanny Finders, Inc. to check any of the other information I provided on this document should the need arise.

Signature:	Date:

