

*Huntington Nannies
Domestic Placement*

Date of Application _____

CONTACT INFORMATION

Parent Name _____ Office Phone () _____

Employer _____ Office Fax () _____

Occupation _____ Email Address _____

Parent Name _____ Office Phone () _____

Employer _____ Office Fax () _____

Occupation _____ Email Address _____

Home Address _____ City _____ State _____ Zip _____

Home Phone () _____ Cell Phone () _____

Child Information:

Name	Age	Sex	Date of Birth	Interest/Activities
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Are you currently expecting? Yes No Due Date _____

Interests/Activities you would like your children to pursue _____

JOB INFORMATION

Starting Date_____

Check all that apply:

- Live In Permanent Full time (30 hrs or more/wk)
- Live Out Temporary Part Time (12 –29 hrs/wk)
- Limited Part Time (11 hrs or less/wk)

What hours do you want the Nanny to work?

	From	To	Total Hours
Monday	_____	_____	_____
Tuesday	_____	_____	_____
Wednesday	_____	_____	_____
Thursday	_____	_____	_____
Friday	_____	_____	_____
Saturday	_____	_____	_____
Sunday	_____	_____	_____

Will weekends be required? Yes No If yes, how often? _____

Will evenings be required? Yes No If yes, how often? _____

Would you consider a Nanny who wanted to bring her own child to work? Yes No

If yes, what age range? _____

Salary range (based on duties, experience, and education of Nanny) \$_____ to \$ _____

Benefits to be provided (*check all that apply*)

- Medical Insurance Dental Insurance Professional Development Classes
- Paid sick days (days) Paid Holidays (days) Paid Vacation (weeks)

Describe you home situation (size, formal, casual, condo, house, etc.) _____

If Live In, describe Nanny quarters: Detached Cottage Room & Bath w/separate entrance

Room in house w/private bath Room in house w/shared bath

Additional information about living quarters_____

NANNY'S DUTIES

Please check all that apply:

- Run Errands
- Homework/tutor Children
- Cooking Children Family
- Laundry Children Family
- Cleaning Light Heavy
- Drive Children Own Car Family Car Manual Automatic
- Travel Weekend Extended
- Care for Pets Yes No
- Swim with Children

Do you hire other housekeeping help? Yes No If yes, how often? _____

Will driving be an essential duty? Yes No

Will a car be provided? Yes No

Is the car available for the Nanny's personal use? Yes No

(For Live In candidates) Is a car available for the Nanny's use exclusively? Yes No

(For Live In candidates) Would you consider a Nanny with a pet? Yes No

ADDITIONAL INFORMATION

Describe your family (attach additional pages/photographs if desired) _____

Does either parent work in the home? Yes No If yes, how often? _____

Do any family members smoke? Yes No If yes, how often? _____

Do any family members drink alcohol? Yes No If yes, how often? _____

Are there any specific needs (physical, mental, or emotional) that your nanny should know about?

Explain your philosophy about child discipline? _____

Have you had a nanny before? If yes, what has been your experience? _____

Give a description of your ideal nanny _____

Would you like to schedule an appointment to meet with us? Yes No

How did you hear about our agency? _____

Have you registered with us before? Yes No If yes, please share your experience _____

Additional information that would be helpful for us to know _____

