

# NANNY INTAKE FORM

## PERSONAL DATA

Name (first, middle, last): \_\_\_\_\_

Previous names or aliases: \_\_\_\_\_

Drivers License Number: \_\_\_\_\_ State: \_\_\_\_\_ Expir. \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Current Address: \_\_\_\_\_

School Address: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Work #: \_\_\_\_\_ Cell #: \_\_\_\_\_

List of Previous Addresses (list your last 3 prior residences beginning with the most recent):

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### Position Sought

*Check all that apply:*

<input type="checkbox"/> Summer	<input type="checkbox"/> I require paid vacation.	<input type="checkbox"/> I have my own vehicle.
<input type="checkbox"/> Full-Time	<input type="checkbox"/> I require paid holidays.	<input type="checkbox"/> I want to bring child.
<input type="checkbox"/> Part-Time	<input type="checkbox"/> I require medical insurance	<input type="checkbox"/> I can travel with family
<input type="checkbox"/> Live-in	<input type="checkbox"/> I do not smoke	
<input type="checkbox"/> Live-out	<input type="checkbox"/> Willing to do temporary Jobs	<input type="checkbox"/> I will do overnights.

I can provide transportation for the child(ren).

Make, model and year of vehicle \_\_\_\_\_

Insurance company and policy #: \_\_\_\_\_

I am CPR certified. Expiration \_\_\_\_\_

I am First Aid Certified. Expiration \_\_\_\_\_

I have other safety training: \_\_\_\_\_

I prefer working with children of a certain age: \_\_\_\_\_

I am willing and able to work with disabled or special needs children. Explain: \_\_\_\_\_

What days of the week are you available? What times are you available?

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Education      School Name      Location      Dates Attended      Graduation      Major/Subject

H.S. \_\_\_\_\_

Other \_\_\_\_\_

College \_\_\_\_\_

College \_\_\_\_\_

Other education or training related to child care:

Scholastic Honors, Certifications, Achievements, Professional Organizations:

## EMERGENCY CONTACTS

Family (Mother)

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Family (Father, if different from above)

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Other

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

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## PERSONAL INFORMATION

Please answer as fully as possible the following questions.

What are your hobbies and interests outside of work?

Why do you want to work with children?

What do you believe best qualifies you to work with children?

How would you handle a two-year-old who refuses your instruction to pick up a toy?

How would you handle a five-year-old in the same situation?

How would you handle a ten-year-old in the same situation?

Have you ever spanked, hit or otherwise struck a child? Explain.

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How were you disciplined as a child? Were you ever physically, emotionally or sexually abused? (optional)

Describe the home in which you grew up.

### REFERENCES

We are in the business of providing safe child care. Reference checks are conducted on all applicants to make certain we are the best in our business. References may be asked to confirm the information you provided as well as address your character, maturity, work habits and record and abilities with children. You should list at least five references. This list of references, along with the rest of this intake form, will be made available to families seeking nannies.

Please provide the following information for five references:

Name

Phone

Address

Occupation

Relationship

How long has this person known you?

This person can address the following things about me...

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## EMPLOYMENT HISTORY

Include all temporary, seasonal, full and part time employment and volunteer experience. Start with your present employers and work back. Please provide the following information for all previous employers.

Employer

Phone

Address

Supervisor(s)

Employment Dates

Title(s)

Starting and ending salary

Reason for leaving

Major responsibilities, specific accomplishments and contributions

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## Certifications

Have you ever been convicted of, plead guilty or nolo contendere (neither admitting nor denying the charge) to, or received a suspended imposition of sentence, or otherwise found guilty of, any criminal offense, municipal ordinance violation, moving traffic citation, or have you been the subject of a report of child abuse or neglect? Explain details.

I understand that The Nanny Connection, Ltd. (“TNC”) an Arkansas Corporation, acts as a placement service for referring individuals who wish to work as nannies or sitters and to families who wish to retain their services.

I understand that any contract with TNC is not for a definite period and that either my employer or I may end my employment at anytime for any reason, with or without cause.

I authorize TNC or a potential employer to fully investigate my fitness for child care responsibilities as it deems appropriate. You have my permission to contact both my references and my previous employers. I understand that TNC may also conduct personal interviews with my family members, business associates, schools, prior employers, friends, neighbors or other third parties.

I authorize my prior employers, schools, law enforcement officials or any one else contacted by TNC to disclose all their records and information concerning me in this investigation.

I also understand that any omissions or misstatements made by me on this application form may be cause for my application to be declined or my employment terminated.

I understand that all information, including conviction records will be verified and that I may be subject to other pertinent background checks, and hereby consent to all such verification and investigation. I further consent that TNC may terminate my employment based on the results of the pertinent background checks.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The Nanny Connection, LTD

BACKGROUND INVESTIGATION CONSENT

I, \_\_\_\_\_, hereby authorize The Nanny Connection ltd. and/or its agents to make an independent investigation of my background, references, character, past employment, education, credit history, criminal or police records, including those maintained by both public and private organizations and all public records for the purpose of confirming the information contained on my Application and/or obtaining other information which may be material to my qualifications for employment now and, if applicable, during the tenure of my employment as a representative of The Nanny Connection ltd.

I release The Nanny Connection ltd. and/or its agents and any person or entity, which provides information pursuant to this authorization, from any and all liabilities, claims or law suits in regards to the information obtained from any and all of the above referenced sources used.

The following is my true and complete legal name and all information is true and correct to the best of my knowledge:

Full Name (Printed)

Maiden Name or Other Names Used

Present Address

City/State/Zip?

Former Address

City/State/Zip?

\*Date of Birth

Social Security Number

Signature \_\_\_\_\_ Date \_\_\_\_\_

\*NOTE: The above information is required for identification purposes only, and is in no manner used as qualifications for employment. The Nanny Connection ltd. is an Equal Opportunity Employer, and does not discriminate on the basis of Sex, Race, Religion, Age (40 and over), Handicap or National Origin.