



Parent(s) Profile (please print)

Our household is:

Two parent household Single parent household (mother) Single parent household (father)

Parent 1		Parent 2 (if applicable)	
First name	Last name	First name	Last name
Social Security #	Drivers License #	Social Security #	Drivers License #
Age	Occupation	Age	Occupation
Employer		Employer	
Work hours		Work hours	
Work phone () () ()	Cell phone () () ()	Work phone () () ()	Cell phone () () ()
E-mail		E-mail	
Fax () () ()	Hours at home	Fax () () ()	Hours at home
Home street address		City	State Zip
Home phone () () ()	Home fax number () () ()	Home e-mail address	

Child/Children Profile

First Name	Last Name	DOB	Age	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	
Interests (sports, music, art, etc.)		Special needs (dietary, etc.)			
First Name	Last Name	DOB	Age	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	
Interests (sports, music, art, etc.)		Special needs (dietary, etc.)			
First Name	Last Name	DOB	Age	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	
Interests (sports, music, art, etc.)		Special needs (dietary, etc.)			
First Name	Last Name	DOB	Age	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	
Interests (sports, music, art, etc.)		Special needs (dietary, etc.)			

Child/Children Profile (Continued)					
First Name	Last Name	DOB	Age	Sex	
				<input type="checkbox"/> Male	<input type="checkbox"/> Female
Interests (sports, music, art, etc.)			Special needs (dietary, etc.)		
First Name	Last Name	DOB	Age	Sex	
				<input type="checkbox"/> Male	<input type="checkbox"/> Female
Interests (sports, music, art, etc.)			Special needs (dietary, etc.)		
Family Profile					
Number and Types of pets					
Any other adults living in house?			Any other domestic help?		
<input type="checkbox"/> Yes		<input type="checkbox"/> No	<input type="checkbox"/> Yes		<input type="checkbox"/> No
Does anyone in household smoke?			Religion (optional)		
<input type="checkbox"/> Yes		<input type="checkbox"/> No			
Views on discipline					
Personal References					
First name	Last name	Phone	E-mail		
First name	Last name	Phone	E-mail		
Nanny Position					
Position available			Position type		
<input type="checkbox"/> Live-In	<input type="checkbox"/> Live-Out	<input type="checkbox"/> Either	<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time	<input type="checkbox"/> Summer only
Start date	End Date (if applies)	Gender preference			
		<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Either	
Age preference	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, state age range.		
Religious preference	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, state preference.		
Allow smoking?	If yes, BUT will abstain when with children or in family home.				
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
Working hours					
Monday		Friday			
Tuesday		Saturday			
Wednesday		Sunday			
Thursday					
What type of wage will you pay the nanny?				Specify salary/rate	
<input type="checkbox"/> Weekly salary		<input type="checkbox"/> Hourly rate			
Minimum education requirement?			If yes, state minimum requirement.		
<input type="checkbox"/> Yes		<input type="checkbox"/> No			

Require valid driver's license?		Driving required?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, is vehicle provided?		Vehicle type	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Automatic	<input type="checkbox"/> Standard
Valid passport required?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Duties in addition to general child care (check all that apply)			
<input type="checkbox"/> Transporting children		<input type="checkbox"/> Light housekeeping	
<input type="checkbox"/> Grocery shopping		<input type="checkbox"/> Errands	
<input type="checkbox"/> Care of pets		<input type="checkbox"/> Travel with family	
<input type="checkbox"/> Children's meal preparation		<input type="checkbox"/> Family meal preparation	
<input type="checkbox"/> Children's laundry		<input type="checkbox"/> Family laundry	
<input type="checkbox"/> Other:			
Choose THREE personality traits most important in candidate.			
<input type="checkbox"/> Outgoing		<input type="checkbox"/> Enjoy outdoor activities	
<input type="checkbox"/> Reserved		<input type="checkbox"/> Self-motivated	
<input type="checkbox"/> Laid back		<input type="checkbox"/> Fun-loving	
<input type="checkbox"/> Take charge		<input type="checkbox"/> Communicate well with adults	
<input type="checkbox"/> Authoritative		<input type="checkbox"/> Empathetic	
<input type="checkbox"/> Patient		<input type="checkbox"/> Flexible	
<input type="checkbox"/> Orderly		<input type="checkbox"/> Accept direction well	
<input type="checkbox"/> Other:			
General Living Accommodations			
Community type			
<input type="checkbox"/> Suburb	<input type="checkbox"/> Rural setting	<input type="checkbox"/> Large city	<input type="checkbox"/> Small town
Type of residence			
<input type="checkbox"/> Private home	<input type="checkbox"/> Farm	<input type="checkbox"/> Estate	<input type="checkbox"/> Townhouse
<input type="checkbox"/> Condo/Apt.			
Are you near?			
<input type="checkbox"/> Swimming Pool	<input type="checkbox"/> Library	<input type="checkbox"/> Shopping	<input type="checkbox"/> Park
Nanny Accommodations			
Live-In Nanny (check all that apply)			
<input type="checkbox"/> Private bedroom (furnished)		<input type="checkbox"/> Private sitting room	
<input type="checkbox"/> Private bedroom (unfurnished)		<input type="checkbox"/> Private bath	
<input type="checkbox"/> Apartment provided		<input type="checkbox"/> Share bath with children	
<input type="checkbox"/> Linens provided		<input type="checkbox"/> Share bath with family	
<input type="checkbox"/> Private or cell phone provided		<input type="checkbox"/> Paid utilities	
<input type="checkbox"/> Private phone available (nanny expense)		<input type="checkbox"/> Other:	
Meals On-Duty		<input type="checkbox"/> Provided	<input type="checkbox"/> Not provided
Meals Off-Duty			
<input type="checkbox"/> Nanny is welcome, but not required to eat with family.			
<input type="checkbox"/> Nanny to prepare own meals in family kitchen.			
<input type="checkbox"/> Nanny provided separate kitchen facilities and food is at nanny's expense.			

Thank you for completing this Nannies By Jeanette Family Application. Please return application to 2450 Meyering Rd, Marion, MI 49665.

Nannies By Jeanette Notes: