

MIDWEST NANNIES, LTD.  
1358 Draper Road  
McHenry, Illinois 60050  
Phone (630) 248-7777 Fax (815) 344-5868

**Job Order - Temporary Clients**

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

Client Name: \_\_\_\_\_ Home Telephone: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_ Home Fax Number: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Father's Work Phone: \_\_\_\_\_ Work Fax: \_\_\_\_\_

Mother's Work Phone: \_\_\_\_\_ Work Fax: \_\_\_\_\_

Major cross streets: \_\_\_\_\_

Care is for: \_\_\_\_\_ Date of Birth \_\_\_\_\_

\_\_\_\_\_ Date of Birth \_\_\_\_\_

\_\_\_\_\_ Date of Birth \_\_\_\_\_

\_\_\_\_\_ Date of Birth \_\_\_\_\_

Special Needs (i.e. physical disability, behavioral concerns, medication, allergies, etc.) \_\_\_\_\_

Pets in/out of home: \_\_\_\_\_

Job Description: \_\_\_\_\_

**Dates Care Needed**

(1) To Be Determined: \_\_\_\_\_

(2) Specific Dates:

\_\_\_\_\_ from: \_\_\_\_\_ AM/PM until \_\_\_\_\_ AM/PM

\_\_\_\_\_ from: \_\_\_\_\_ AM/PM until \_\_\_\_\_ AM/PM

\_\_\_\_\_ from: \_\_\_\_\_ AM/PM until \_\_\_\_\_ AM/PM

\_\_\_\_\_ from: \_\_\_\_\_ AM/PM until \_\_\_\_\_ AM/PM

(3) Ongoing Temporary: Starting date: \_\_\_\_\_ Ending date: \_\_\_\_\_

Schedule:

Monday from: \_\_\_\_\_ to: \_\_\_\_\_ Tuesday from: \_\_\_\_\_ to: \_\_\_\_\_

Wednesday from: \_\_\_\_\_ to: \_\_\_\_\_ Thursday from: \_\_\_\_\_ to: \_\_\_\_\_

Friday from: \_\_\_\_\_ to: \_\_\_\_\_ Saturday from: \_\_\_\_\_ to: \_\_\_\_\_

Sunday from: \_\_\_\_\_ to: \_\_\_\_\_

Any special instructions: \_\_\_\_\_

**Caregiver Profile** Please indicate by marking the following questions if you have a preference:

Allow nanny to bring own child? Yes \_\_\_ No \_\_\_ Swimmer? Yes \_\_\_ No \_\_\_

Non-Smoking household? Yes \_\_\_ No \_\_\_ Non-smoking caregiver? Yes \_\_\_ No \_\_\_

Need own car on job? Yes \_\_\_ No \_\_\_ Will supply car on job? Yes \_\_\_ No \_\_\_

Additional Caregiver Profile: \_\_\_\_\_

**AGENCY POLICIES:**

1. A \$30.00 First Day Fee is due upon receipt of paperwork for all childcare, new mother/baby care, and all overnight extended care jobs. This First Day Fee is to be renewed annually for service.
2. The Agency charges a \$15.00 per day referral fee for each day a caregiver is referred. A Temporary Placement Agreement will be enclosed and should be signed and returned to the office.
3. Caregivers cannot leave their telephone number, but can be contacted through the Agency.
4. All Placement Fees owed Midwest Nannies, Ltd. are due and payable prior to Nanny's first day of employment or upon receipt of invoice. The Placement Fee referenced in this Agreement will automatically be charged to Client's credit card account. The Client must provide to Midwest Nannies, Ltd. a valid credit card number, including expiration date, as a guarantee of payment and Client hereby authorizes Midwest Nannies, Ltd. to place charges on said Account in accordance with this Agreement.
5. There is a four (4) hour minimum to be paid in cash directly to the nanny. Any owed wage not paid to nanny will be charged to client's credit card.

I have read, understand and agree to the Agency Policies as stated above.

Midwest Nannies, Ltd.

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Dated

\_\_\_\_\_  
Client Printed Name

(For Office Use Only)-----

Name of Caregiver	Phone Number	Yes	No
_____	_____	___	___
_____	_____	___	___
_____	_____	___	___
_____	_____	___	___
_____	_____	___	___
_____	_____	___	___