

MIDWEST NANNIES FLORIDA

238 Flamingo St., Fort Myers Beach, Florida 33931

(239) 463-4774

FAX (239) 463-4774

FAMILY APPLICATION

Date Nanny Needed _____

Mother's Name: _____

Father's Name: _____ Home Telephone: _____

Address: _____ Home Fax Number: _____

City: _____ State: _____ Zip Code: _____ E-Mail: _____

Marital Status: _____ If divorced or separated, describe situation: _____

Name, address and phone number of parent not living with children: _____

Major Cross Streets: _____

Employment Information:

Father: _____ Mother: _____

Employer: _____ Employer: _____

City/State: _____ City/State: _____

Position: _____ Position: _____

Phone: _____ Phone: _____

Fax Number: _____ Fax Number: _____

Work Hours: _____ Work Hours: _____

Overnight Travel: Yes _____ No _____ Overnight Travel: Yes _____ No _____

On Call Situation: Yes _____ No _____ On Call Situation: Yes _____ No _____

Does either parent work from a home office? Yes _____ No _____ Which parent? Mother _____ Father _____

If yes, please list the days and hours: _____

Please note any "special need requirements," such as week-end work or rotating schedules: _____

Children:

| Name | Date of Birth | Age/Grade | M/F | Special Needs, Gifts or Interests |
|------|---------------|-----------|-----|-----------------------------------|
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Does your child or any of your children have any medical or health problems?

If so, please explain: _____

Briefly describe the goals/values you instill in your child(ren) and value in your nanny: _____

Family Information:

Briefly describe your family life style: _____

Family hobbies, interests, etc.: _____

Briefly describe your approach to child rearing: _____

Briefly describe your discipline philosophy: _____

Do you have a cleaning service? _____ Do you employ any other household staff? _____

Do you have any pets? ___ How many? Dogs ___ Cats ___ Birds ___ Other _____

If you have dogs, what breed: _____

What is your current form of childcare? _____

How long have you had this arrangement? _____

If a nanny, why is she leaving? _____

May we contact her? ___ If so, what is her name and phone number? _____

Nanny/Household Information:

Nanny Position Needed (please check all that apply): Live-In ___ Live-Out ___ Full-Time ___ Part-Time ___

Nanny's work schedule (please indicate days and hours):

Monday from _____ to _____ Wednesday from _____ to _____ Friday from _____ to _____

Tuesday from _____ to _____ Thursday from _____ to _____ Saturday from _____ to _____

If flexible, please explain: _____

What is the salary range you expect to pay? _____ per _____ Will you withhold taxes? _____

Special benefits (ie. Vacation, Health Insurance, Car, Holidays, Overtime): _____

Does Nanny need own car? Yes ___ No ___

How much transportation is required? _____

Will nanny have own bedroom? ___ Bath ___ TV ___ Phone Line ___ (Live-In information only)

Other Live-in information: _____

Any special skills required? CPR ___ Infant CPR ___ 1st Aide ___ Will you pay for courses? ___

Is there a swimming pool or waterway on the property? ___ Where is it located? _____

Will you accept a nanny with a child to bring? _____

What household responsibilities are required of nanny? _____

What qualities are most important to you in selecting your nanny? _____

Please list any physical traits and/or other characteristics you are looking for: _____

