

AU PAIR, MOTHER'S HELP APPLICATION

The applicant's contact information and preferences regarding Au Pair stay are not included in this application form but are submitted on a separate form.

The application consists of the following sections:

- 1. Personal Details
- 2. Hobbies, Interests and Skills
- 3. Health
- 4. Education and Qualifications
- 5. Experience with Children
- 6. Work Experience
- 7. Driving
- 8. Au Pair Placement
- 9. Dear Family Letter
- 10. Signature

1. Personal Details

Last name	First name
Sex	Age
Date of Birth	Place of Birth (town/city and country)
Nationality	Native language(s)
Hometown and country	Current city and country (if living away from hometown)
Marital status	Occupation
Religion	Are you currently employed or studying?
Passport date and place of issue	Passport expiration date

Contact person in case of emergency (name, address, phone number and relationship to you)			
2. Hobbies. Int	erests and Skills		
LANGUAGE SKILLS		Please rate your (spoken) language skills on the following scale: none – basic – average – good –fluent – mother tongue	Number of years studied
English			
Finnish			
Swedish			
Spanish			
French			
German			
Other, type name of language here:			
Would you like to attend a language course in the host country?			
HOBBIES AND INTERESTS			
What are your hobbies and	d interests? What do you like	e to do in your spare time?	
HOUSEHOLD SKILLS			
What type of food can you cook and would cook for children?			
What kind of experience do you have in cleaning and would you be happy to clean for your host family?			

What kind of experience do you have with pets and would you be happy to help feed and care for the family pets? Would you walk the dog? (pet care is not a requirement for all; only if you are happy to help)
OTHER USEFUL SKILLS
Please list individual skills below if you are willing to use them in your job as an Au Pair (explain if necessary)
Which sports can you play?
Do you swim and would you be willing to supervise children in the pool or at the beach?
Do you have skills in music or dance?
Can you ride a bicycle and would you be happy to cycle with the children?
Any other skills you have that may be useful when working with children
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3. Health

Do you smoke?	If you smoke, would you refrain from smoking in the host family's house and in the presence of the children?	
Do you have any allergies? (animals, anything else?)		
Do you have a special diet or prefer not to eat certain foods?		
Do you have any medical conditions? Explain.		
Are you able to lift and carry small children and to walk, run and cycle with children without any problems?		

4. Education and Qualifications

Name of college/university	Level	Qualification or degree	Year of graduation
Name of college/university	Level	Qualification or degree	Year of graduation
Name of college/university	Level	Qualification or degree	Year of graduation
Please describe any studies or courses relevant to Au Pair work (childcare, cleaning, cooking, etc). Do you have any certificates?			
Do you have knowledge of first aid and CPR? Do you have a valid certificate?			

5. Experience with Children

EXPERIENCE WITH DIFFERENT AGE GROUPS Please note that basic Au Pair does not take sole charge of children under the age of 2	Please rate your experience on the following scale: none (no experience) some (needs guidance from host family before looking after children independently) good (knows age appropriate foods & activities and can look after children independently) excellent (knows developmental stages and can support children's development in a professional manner)
0-5 months	
6-12 months	
1-2 years	
3-6 years	
7-10 years	
Older than 10 years	
Do you have experience with special needs children?	

Please include in this section all experience you have with children! Type of experience = paid work, volunteer position, babysitting, etc. Position 1 (start with the most recent)

(start with the most recent)		
Type of experience		
Job title (if any)		
Name of family, employer or organisation		
Start date		
End date		
Reason for leaving		
Working hours (how many hours per day or week, how many days per week or month, etc.)		
Sex and age of each child (or group of children)		
Duties		
Posit	tion 2	
Type of experience		
Job title (if any)		
Name of family, employer or organisation		
Start date		
End date		
Reason for leaving		
Working hours (how many hours per day or week, how many days per week or month, etc.)		
Sex and age of each child (or group of children)		
Duties		
Position 3		
Type of experience		
Job title (if any)		
Name of family, employer or organisation		
Start date		
End date		
Reason for leaving		

Working hours (how many hours per day or week, how many days per week or month, etc.)	
Sex and age of each child (or group of children)	
Duties	
Posit	tion 4
Type of experience	
Job title (if any)	
Name of family, employer or organisation	
Start date	
End date	
Reason for leaving	
Working hours (how many hours per day or week, how many days per week or month, etc.)	
Sex and age of each child (or group of children)	
Duties	
Posit	tion 5
Type of experience	
Job title (if any)	
Name of family, employer or organisation	
Start date	
End date	
Reason for leaving	
Working hours (how many hours per day or week, how many days per week or month, etc.)	
Sex and age of each child (or group of children)	
Duties	
Any additional information about your childcare experience you may wish to give	

6. Work Experience (other than childcare - start with the most recent)

Position 1		
Job title		
Name of employer		
Duration (start date – end date)		
Working hours (full time or part time, how many hours per day or week, how frequently, etc.)		
Duties		
Posit	ion 2	
Job title		
Name of employer		
Duration (start date – end date)		
Working hours (full time or part time, how many hours per day or week, how frequently, etc.)		
Duties		
Posit	ion 3	
Job title		
Name of employer		
Duration (start date – end date)		
Working hours (full time or part time, how many hours per day or week, how frequently, etc.)		
Duties		
Any additional information about your work experience (including volunteer work) you may wish to give		
Name of employer Duration (start date – end date) Working hours (full time or part time, how many hours per day or week, how frequently, etc.) Duties		

7. Driving

Do you hold a current driving licence? (if no, you may skip other questions in this section)	If yes, when was your licence issued?
Are you willing to drive in the host country?	Are you willing to drive in the UK (left hand traffic)?
How often and what kind of distances do you drive?	

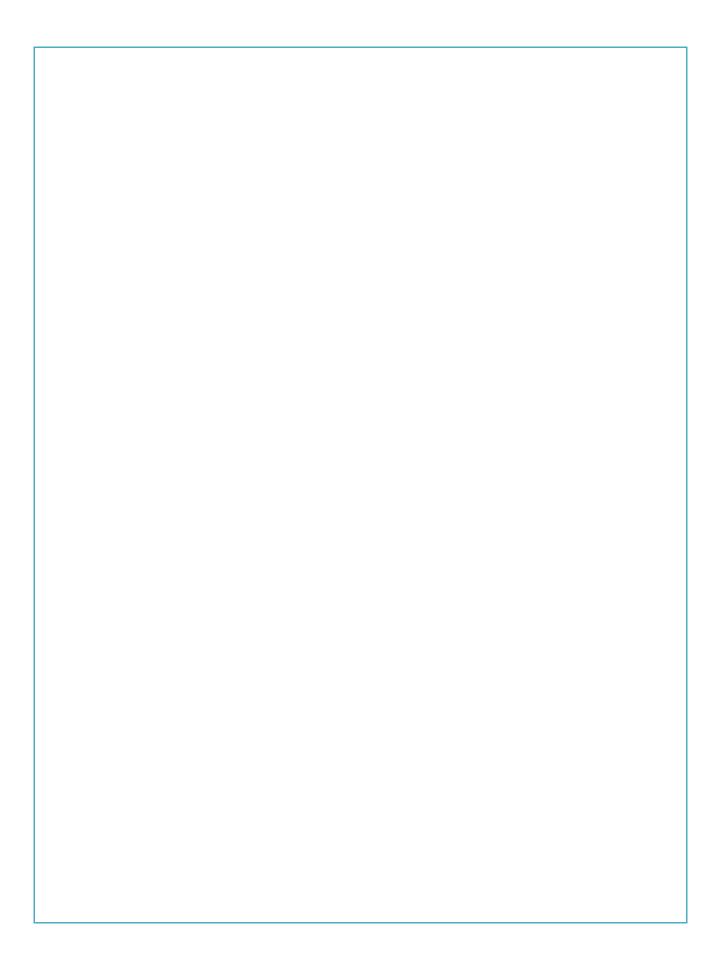
Do you have experience in and are you willing to drive in a big city/town or heavy traffic?	
Have you ever driven in the UK? If yes, where and how often?	

8. Au Pair Placement

First date available to start Au Pair placement	Last date available to start Au Pair placement	
Preferred length of stay (months)	Last date to finish Au Pair placement (if any)	
Length of notice required from your current employment (if any)	How soon after receiving an offer from host family would you be able to fly to the destination country?	
Are you available for an interview with the host family by phone or Skype?	Would you be able to attend a personal interview with the host family in their country and if so, when? (sometimes families wish to meet applicant and pay for travel)	
Would you like to take your holiday entitlement at a certain time during your Au Pair stay and when? (for example Christmas, entrance exam, etc.) Please note that you may only take holiday at a time convenient for host family.		
Have you ever been an Au Pair before? If so, in which country and for how long?		
Have you ever lived away from home or abroad for a minimum of two months? Please give details.		

9. Dear Family Letter

Dear Family,			



10. Signature

I confirm that I have answered all questions honestly and that all information in this application and letter is true. I agree to abide by the rules of Nordic Nannies and the house rules set by the host family. I understand that being an Au Pair requires responsibility and flexibility, and I agree to perform my duties to the best of my ability.				
Date				
Signature				