



Nanny Application Form

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Application Date:

Name:

Address:

City:

Province:

Postal Code:

Home Number:

Work Number:

Cell Number:

Email:

Date of Birth:

Emergency Contacts

Name:

Number:

Name:

Number:

Education

University or College:

Qualifications Obtained:

Other Schooling/Qualifications:

Immigration Status

Date arrived in Canada:

Immigration Status:

Social Insurance Number:

Work Experience

Current or Most Recent Employer

Name:

Phone Number:

Address:

Position:

Live-In

Live-Out

Duties:

Ages of children at start of Employment:

Start Date:

End Date:

Reason For Leaving:

Employer prior to above

Name:

Phone Number:

Address:

Position:

Live-In

Live-Out

Duties:

Ages of children at start of Employment:

Start Date:

End Date:

Reason For Leaving:

Employer prior to above

Name:

Phone Number:

Address:

Position:

Live-In

Live-Out

Duties:

Ages of children at start of Employment:

Start Date:

End Date

Reason For Leaving:

Employment Details

Which locations would you consider working in?

Are you looking for:

Live-In

Live-Out

Expected Weekly Pay:

Last Salary:

Overtime Rate:

Preferred Age of Children (If Any):

When are you available to start?

Immediately

Are you comfortable with pets?

(If No, Please Specify)

Would you travel with family?

Can you swim?

(If Yes, what level?)

Do you smoke?

Do you have a full Canadian Drivers License?

What date was it obtained?

Have you ever had your license suspended?

(If Yes, Give Details)

Are you an experienced driver?

Can you drive standard shift?

Would you consider nanny sharing?

Do you prefer the parents to work at home?

Would you work for a single mother/father?

Do you have any newborn experience?

Do you have any special needs experience?

(If Yes, Please Explain)

Do you have a current First Aid/CPR Certificate?

Would you be willing to take a First Aid/CPR Course?

Do you have a criminal record?

Would you be willing to have a police check?

Any other related experience?

What languages do you speak?

Do you have children of your own?

If so, what are their ages?

Do you have any allergies?

If Yes, Please specify

What qualities do you offer a family looking for a nanny?

Will you do?

Children's Laundry

Family's Laundry

Children's Bedding

Family's Bedding

Children's Ironing

Family's Ironing

Children's Cooking

Family's Cooking

Keep children's room tidy

Cleaning Bathrooms

Hobbies/Interests

I hereby certify that the above information is true

I hereby authorize Shelly's Nannies Inc. to contact any previous employers, schools, colleges, and/or other training facilities to confirm all of the information listed on my application form is correct.

Date:

Name:

Signature:
