



Family Application Form

Family Surname: _____

Date: _____

Residential Address: _____

Parent 1:

Name: _____

Surname: _____

Contact No: _____

Work No: _____

Email Address: _____

Occupation: _____

Marital Status: _____

ID no: _____

Parent 2 / Guardian:

Name: _____

Surname: _____

Contact No: _____

Work No: _____

Email Address: _____

Occupation: _____

Marital Status: _____

ID no: _____

Do any family members smoke? Yes / No

My family's religion: _____

Does the family have specific eating choices? Exp: Vegeterian

Children:

Names & Age:

1.	_____	M/F
2.	_____	M/F
3.	_____	M/F
4.	_____	M/F
5.	_____	M/F
6.	_____	M/F

School Name:

1.	_____
KM Radius:	_____
2.	_____
KM Radius:	_____
3.	_____
KM Radius:	_____

Extra Murals:

1.	_____
2.	_____
3.	_____
4.	_____
5.	_____
6.	_____

Routine in the morning from youngest to oldest:

Routine in the afternoon from youngest to oldest:

Routine for sleeping from youngest to oldest:

Allergies:

Child: _____

Allergy: _____

Special meal choices:

Specifications for the Au Pair:

Gender:

- Male
- Female
- Both

Live in / Live out/ either?

Age Range:

- 17- 25
- 26-30
- 31-39
- 40+
- Any
- Specific age: _____

Language:

- English
- Afrikaans
- Zulu

- 🏠 Sotho
- 🏠 Xhosa
- 🏠 French
- 🏠 German
- 🏠 Mandarin
- 🏠 Any
- 🏠 Other: _____

Religion:

- 🏠 Christian
- 🏠 Catholic
- 🏠 Jewish
- 🏠 Muslim
- 🏠 Hindu
- 🏠 Buddhism
- 🏠 Any
- 🏠 Other: _____

Preferred Ethnicities: _____

Characteristics/ Interest/ Traits that the au pair must have?

Vacant Position:

Start date: _____

- | | |
|---|-----------------------|
| <input type="radio"/> Mondays | From: _____ To: _____ |
| <input type="radio"/> Tuesdays | From: _____ To: _____ |
| <input type="radio"/> Wednesdays | From: _____ To: _____ |
| <input type="radio"/> Thursdays | From: _____ To: _____ |
| <input type="radio"/> Fridays | From: _____ To: _____ |
| <input type="radio"/> Saturdays | From: _____ To: _____ |
| <input type="radio"/> Sundays | From: _____ To: _____ |

Duration:

- 1-6 months
- 7- 12 months
- 24 months or longer

Or only:

- Occasional baby sitting
- School /Public Holidays
- National / International travelling – Duration: _____
- Specific: _____

Duties:

- | | |
|--|----------|
| <input type="checkbox"/> Personal Assistance: | Yes / No |
| <input type="checkbox"/> Driving: | Yes / No |
| <input type="checkbox"/> Tutor/ Homework/ Study: | Yes / No |
| <input type="checkbox"/> Occasional Babysitting: | Yes / No |
| <input type="checkbox"/> Plan and do stimulating activities: | Yes / No |
| <input type="checkbox"/> Plan and do day trips: | Yes / No |
| <input type="checkbox"/> Grocery errands: | Yes / No |
| <input type="checkbox"/> Other errands: | Yes / No |
| <input type="checkbox"/> Prepare Meals: | Yes / No |
| <input type="checkbox"/> Bathing: | Yes / No |
| <input type="checkbox"/> Put children to sleep: | Yes / No |
| <input type="checkbox"/> Children’s Laundry: | Yes / No |
| <input type="checkbox"/> Cleaning areas in the house: | Yes / No |
| <input type="checkbox"/> Attending Doctor / Specialist appointments: | Yes / No |
| <input type="checkbox"/> School events (parent evening etc.): | Yes / No |
| <input type="checkbox"/> Caring for pets: | Yes / No |
| <input type="checkbox"/> Caring for other family members: | Yes / No |
| <input type="checkbox"/> Other: _____ | |

Requirements:

Obtain a child care qualification / certificate?	Yes / No
Obtain a first aid qualification?	Yes / No
Obtain a criminal background check?	Yes / No
Obtain a valid driver license?	Yes / No
Obtain a roadworthy vehicle?	Yes / No
Have previous Au Pair experience?	Yes / No
Have previous experience in ages:	
0-2	Yes / No
3-5	Yes / No
6-10	Yes / No
11-15	Yes / No

Other:

Locations where the Au Pair must reside:

I (parent) _____ hereby confirm that I as the attended family member, I answered the questions true and faithfully. This document can be seen as proof of what my requests are regarding the recruitment of an Au Pair by this company, Certified Au Pairs PTY LTD. With signing below I give permission to Certified Au Pairs PTY LTD to proceed in finding a suitable candidate and agree to the terms and conditions of the process.

Date: _____

Date: _____

(Name of parent)

(Name of C.A.P employee)

(Signature)

(Signature)