

Rainbow Nannies

Please Complete and Fax to: (866) 558-0290

NANNY EMPLOYMENT APPLICATION Date: _____

Personal Information

First Name: _____ Last Name: _____ Middle Initial: _____

Street Address: _____

City: _____ State: _____ Zip: _____

How long have you lived at your current address? _____

If less than 2 years, please list previous address. (Students, please enter your home address below.)

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Mobile: _____ Email: _____

Date of Birth: _____ Social Security Number: _____

Are you a legal citizen of the United States? Yes No

If not, are you authorized to work in the United States? Yes No

Education

School	City, State	Major/Minor	# of Years	Degree

Summary of childcare experience and training: _____

Are you certified in CPR? Yes No Date of Expiration: _____

Are you certified in First Aid? Yes No Date of Expiration: _____

Employment History (Please list employment chronologically from present.)

Employer Name: _____
Address: _____
Phone: _____ Times to call: _____
Number of Children: _____ Children's Ages: _____
Employed From: _____ To: _____
May we contact this employer? Yes No
(If Yes, list phone number and contact name. If No, state reason.): _____

Positions Held: _____

Job Duties: _____

Reason for Departure: _____

Employer Name: _____
Address: _____
Phone: _____ Times to call: _____
Number of Children: _____ Children's Ages: _____
Employed From: _____ To: _____
May we contact this employer? Yes No
(If Yes, list phone number and contact name. If No, state reason.): _____

Positions Held: _____

Job Duties: _____

Reason for Departure: _____

Employer Name: _____

Address: _____

Phone: _____ Times to call: _____

Number of Children: _____ Children's Ages: _____

Employed From: _____ To: _____

May we contact this employer? Yes No

(If Yes, list phone number and contact name. If No, state reason.): _____

Positions Held: _____

Job Duties: _____

Reason for Departure: _____

What type of position are you looking for? (Mark all that you would accept.)

Full-time (live-out, 30 hrs + per week) _____ Part-time (0-29 hrs per week on regular schedule) _____

Sitter (occasional) _____ Live-in (40 hrs + per week) _____ Summer Nanny/Companion: _____

Please indicate start and end dates for Summer Nanny position: Start _____ End _____

How many hours do you want to work per week? _____

Please indicate below the times you are available to work as well as your class schedule or any other regular events that would prevent you from working:

Week Day	Class Schedule / Ongoing Commitments:	Times Available for Work:
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		

Applicant Signature: _____

Date: _____

Agency Signature: _____

Date: _____

Any omission or misrepresentation of information is grounds for immediate dismissal.