Premier Caregivers Inc.

Family Application Form for a Live-out Caregiver

Family and Household Information

Mother's Name: _____

Profession: _____

Work No: _____ Email: _____

Father's Name: _____

Profession: _____

Work No: _____ Email: _____

Home Address: _____

Phone: _____ Fax: _____

Other family (adults) in the home: _____

Other staff: _____

Language primarily used in the home: _____

Nearest Major Intersection: _____

Location of Home: Rural Suburbs Central

Nearest Subway Station: _____ other public transportation _____

Do both parents reside with the children? (please specify arrangement): _____

_____

Do you have any pets? Yes: ___ No: ___

If yes, what pets: _____

Will the nanny be required to attend to the pets?

Feeding Yes: ___ No: ___

Walking the dog Yes: ___ No: ___

Other: _____

_____

Do you have a cleaning lady? Yes: ___ No: ___

If yes, how often does she come? _____