



nanny solutions



application form

STAFF REQUIRED:

PLEASE CHOOSE FROM A OR B:

A) MATERNITY NURSE/SLEEP TRAINER

24 hrs

Days

Nights

Training

Single Baby

Multiple Birth

Sleep Training

Weaning

Start Date: _____

No. of Days/Nights per week: _____

Times reqd. from: _____ to: _____

Duration of contract: _____

Salary offered: _____

B) NANNY

Permanent

Full time

Part time

Temporary (only for temp. contracts)

Duration from: _____ to: _____

Live in

Live out

Live in/out

Sole charge: yes no

Both parents working: yes no

Start Date: _____

Daily Hours: _____

Salary offered: _____

Holiday Entitlements: _____

Mon - Fri yes no

Babysitting: yes no

If yes, how many per week? _____

Weekends: yes no

If yes, how many per month? _____

ALL FAMILIES MUST COMPLETE THIS SECTION:

Will you require the Maternity Nurse/Nanny to travel Overseas? yes no

If yes, please detail:

Live in position: yes no

If yes, please describe accommodation:

Non Smoker: Essential Not essential

Car driver: Essential Not essential

Car owner: Essential Not essential

Any extra duties: Light Housework Cooking None

Do you have any pets? yes no

If yes, please detail

Describe the area where you live giving relevant details of amenities and recreational facilities:

Distance from house to nearest public transport: _____ Bus Number: _____

ADDITIONAL INFORMATION:

Please give a general description of the family and state any further information you would consider applicable (accommodation, car, travel, second residence):

PAYMENT METHOD:

Please enclose a registration fee of 85 Euro (VAT Inclusive).

Please state payment method: Cheque Credit Card

CREDIT CARD DETAILS:

Billing name: _____

Billing Address: _____

Expiry Date: / / Visa Mastercard Laser

AGREEMENT FORM:

When you have read and accepted our terms and fee structure, please sign, date and return this form so we may start our search for a suitable candidate.

I/We have read and understand the Terms and Conditions of Business of Nanny Solutions Limited and accept them in full. In the event of any engagement, I/We also agree to settle your account in full.

I/We also accept responsibility for the employee and her well being while in my/our employment (including details regarding wages, time off, tax and PRSI etc...)

SIGNED: _____ DATE: _____

How did you hear of Nanny Solutions?



nannysolutions

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