**Au Pair Registration form 2021**

**Availability**

|  |  |
| --- | --- |
| Start date: | Final return date: / |
| Length of stay: | ☐1 placement of 6 months  ☐2 placements of 6 months |
| ☐ On holiday from …..../……/…… till ……./……./…… and unable to conduct family interviews | |

**Personal details**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| First name | | ☐Mr ☐Miss | | | | | | | | |
| Surname | |  | | | | | | | | |
| Address | |  | | | | | | | | |
| Postal code/city | |  | | | | | | | | |
| Country | |  | | | | | | | | |
| Telephone | |  | | | | | | | | |
| Mobile | |  | | | | | | | | |
| E-mail address | |  | | | | | | | | |
| Skype address | |  | | | | | | | | |
| Date of birth | |  | | | Place of birth | | |  | | |
| Nationality | |  | | | Passport number | | |  | | |
|  | |  | | |  | | |  | | |
| What is your religion? |  | | | | | Do you practice? ☐ Yes ☐ No | | | |
| Do you wish to attend services in Australia? | | | | ☐ Yes | | | ☐ No | | |
|  |  | |  | | | | | | |
| *My family* | | | | | | | | | |
| ☐ Father | Occupation: | | | | | | | | Age: |
| ☐ Mother | Occupation: | | | | | | | | Age: |
| ☐ Brothers | How many: | | | | | | | | Age: |
| ☐ Sisters | How many: | | | | | | | | Age: |
|  | | | | | | | | | |

|  |
| --- |
| ☐ I do not authorise you to use extracts of my application for marketing purposes  *\* We only use first name and nationality in marketing material.* |

**Children + Childcare experience***My childcare experience summary:*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Age groups: | | | | |
| ☐0-12 months | ☐1-2 years | ☐3-5 years | ☐6-8 years | ☐9+ years |
| Child with special needs (disabled) ☐ Yes ☐ No | | | | |
| My skills: | | | | |
| ☐Nappy   changing | ☐Light  housework | ☐Playing &  reading | ☐Help with  homework | ☐Caring for sick  child |
| ☐Bath time | ☐Child under 2 | ☐ Bed time | ☐Food shopping | ☐Simple cooking |
| ☐ Potty training | ☐Bottle feed &  preparation | ☐Help getting  dressed | ☐Bed time/spoon   feeding | ☐Outings   & excursions |

*My childcare experience in detail:*

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Number of children and ages: |  | | | | | | | | | | | | | |
| Tasks |  | | | | | | | | | | | | | |
| Duration | ☐50-100 hours | | | | | | | ☐100-200 hours | | | | ☐200 + hours | | |
|  |  | | | | | | | | | | | | | |
| Number of children and ages: |  | | | | | | | | | | | | | |
| Tasks |  | | | | | | | | | | | | | |
| Duration | ☐50-100 hours | | | | | | | ☐100-200 hours | | | | ☐200 + hours | | |
|  |  | | | | | | | | | | | | | |
| Number of children and ages: |  | | | | | | | | | | | | | |
| Tasks |  | | | | | | | | | | | | | |
| Duration | ☐50-100 hours | | | | | | | ☐100-200 hours | | | | ☐200 + hours | | |
|  |  | | | | | | | | | | | | | |
| **My Other Skills** Can you swim? | | | | | ☐ Yes | | ☐ No | | | | | | |
| Do you have first aid certificate | | | | | ☐ Yes | | ☐ No | | | | | | |
|  | | | | | | | | | | | | | |
| **My driving Skills***: All candidates should pass their test prior to registration. All families are expected to arrange a couple of hours driving lessons* | | | | | | | | | | | | | |
| I have had a driver’s license since: | | | | |  | | | | | | | | |
| My experience: | | | | | | | | | | | | | |
| ☐50 – 100 hours | | | | ☐By rain | | | | | | ☐Country | | | |
| ☐100 – 150 hours | | | | ☐By snow | | | | | | ☐City centre | | | |
| ☐150 – 200 hours | | | | ☐By heavy wind | | | | | | ☐Suburb | | | |
| ☐200 or more hours | | | |  | | | | | |  | | | |
| How often do you drive? | | | | | | | | | | | | | |
| ☐Daily | | | | ☐Several times a week | | | | | | | | | |
| ☐Several times a month | | | | ☐Not often | | | | | | | | | |
|  | | | |  | | | | | | | | | |
| **My language skills:** | | | | | | | | | | | | | |
| My native language:\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | |
| **English** | | | ☐Poor | | | ☐Sufficient | | | | | ☐Good | | ☐Excellent |
| Other:\_\_\_\_\_\_\_\_\_\_ \_ | | | ☐Poor | | | ☐Sufficient | | | | | ☐Good | | ☐Excellent |
| Other:\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | ☐Poor | | | ☐Sufficient | | | | | ☐Good | | ☐Excellent |
|  | | | | | | | | |  | |  | | |
|  | | | | | | | | | | | | | |
| **My Independence:** | | | | | | | | | | | | | |
| Have you lived away from home? ☐ Yes ☐ No  Have you ever spent time abroad? (except Holidays) ☐ Yes ☐ No  If yes, please explain \_:\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | |
| **My Household experience/skills:** | | | | | | | | | | | | | |
| ☐Light cleaning | | ☐Vacuum cleaning ☐Baking ☐Cooking | | | | | | | | | | | |
| ☐Laundry | | ☐Ironing ☐Tidying up ☐Folding clothes | | | | | | | | | | | |
|  | |  | | | | | | | | | | | |
| **My Hobbies / Leisure Skills** *(explain your hobbies in more detail in the letter)***:** | | | | | | | | | | | | | |
| **☐Sports** | | **☐Hobbies** **☐Music** | | | | | | | | | | | |
| ☐ Swimming | | ☐ Reading Listening | | | | | | | | | | | |
| ☐ Cycling | | ☐ Art & Craft Singing | | | | | | | | | | | |
| ☐ Tennis | | ☐ Astronomy Playing Recorder / Flute | | | | | | | | | | | |
| ☐ Horseriding | | ☐ History Playing Piano | | | | | | | | | | | |
| ☐ Martial Arts | | ☐ Languages Playing Violin | | | | | | | | | | | |
| ☐ Water Sports | | ☐ Games Playing Guitar | | | | | | | | | | | |
| ☐ Other \_\_\_\_\_\_\_ | | ☐ Other \_\_\_\_\_\_\_\_\_\_ Other \_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | |

**My Preferences**

Although we cannot guarantee placement in line with any of these preferences, we will take them in consideration when placing you with a family.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Age groups:  ☐ Flexible *(If you cross FLEXIBLE, you will be given priority)* | | | | | | | | | | | | | | |
| ☐0-12 months (no sole care) | | | | ☐1-2 years | | | ☐3-5 years | | | ☐6-8 years | | | ☐9+ years | |
| No of children:  ☐Flexible *(If you cross FLEXIBLE, you will be given priority)* | | | | | | | | | | | | | | |
| ☐1-3 | ☐3-4 | | | | ☐4+ (not all at once/often together with mom) | | | | | | | | | |
| Care for child with special needs (disabled) Care for Child under 2? | | | | | | ☐ Yes ☐ Yes | | ☐ Yes, but no sole care ☐ Yes, but no sole care | | | | | | ☐No ☐No |
| Location: | | | | | | | | | | | | | | |
| ☐Flexible *(If you cross FLEXIBLE, you will be given priority; specific City will limit your choice and delay placement process!)*  **or** | | | | | | | | | | | | | | |
| ☐prefer in/near city | | | ☐in/near city only | | | | ☐only in/near city... | | | | (\*\*enter name of city) | | | |
|  | | | | | | | | | | | | | | |
| **Other Preferences/restrictions** | | | | | | | | | | | | | | |
| Do you have dietary preferences? | | | | | | | ☐Yes | | ☐No | | | | | |
| Do you have allergies? | | | | | | | ☐Yes | | ☐No | | | | | |
| If yes please explain \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | |
| Are you vegetarian? (must be willing to cook meat) | | | | | | | ☐Yes | | ☐No | | | | | |
| Accept living in a single parent family? | | | | | | | ☐Yes | | ☐No ☐ Single mother only | | | | | |
| Accept pets in the house? | | | | | | | | | | | | | | |
| ☐Yes, to all | | ☐Yes, to outside pets | | | | | ☐No, to dog | | | ☐No, to cat | | | ☐No, to all | |
| Accept family of different race or religion? | | | | | | | ☐Yes ☐No | | | | |  | | |

|  |  |  |
| --- | --- | --- |
| Do you smoke? | ☐Yes | ☐No |
| *If yes, we expect you to give up for the program and sign the following declaration*. | | |
| **Non Smoking Declaration**  I (name of candidate) ………………………. hereby agree that when accepting a host family, I am no longer a smoker. I gave up smoking on (date) ………………….and agree not to smoke during my entire au pair placement, not even off-duty.  I understand that breaking this promise may result in termination of the au pair program.  Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |