



LITTLE ANGELS

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NANNY REGISTRATION

The employee must fill in this form in ink and block capitals and attach an up to date C.V. with contact addresses and numbers for referees with written references where applicable. Inc. two passport photographs

Surname	<input type="text"/>	Forename	<input type="text"/>
Address	<input type="text"/> <input type="text"/> <input type="text"/>		
Telephone No.	<input type="text"/>	Best time to telephone	<input type="text"/>
Religion	<input type="text"/>	Nationality	<input type="text"/>
Date of Birth	<input type="text"/>	Age	<input type="text"/>
		Marital status	<input type="text"/>
	Parents Occupation:		
Mother:	<input type="text"/>		
Father:	<input type="text"/>		
Do you drive	<input type="text" value="Y/N"/>	Date of passing test	<input type="text"/>
Have you a clean licence	<input type="text" value="Yes/No"/>		
If not give details	<input type="text"/>		
Do you have health problems? e.g. allergies/ asthma/ anorexia/ epilepsy/ diabetes etc.	<input type="text"/>		
(Use a separate sheet if necessary)	<input type="text"/>		
What hobbies and interests do you have?	<input type="text"/>		
	<input type="text"/>		
Do you have any criminal convictions past or present? Please give details	<input type="text"/>		
(Use separate sheet if necessary)	<input type="text"/>		
Do you smoke?	<input type="checkbox"/>	Yes	<input type="checkbox"/>
	<input type="checkbox"/>	No	<input type="checkbox"/>

REQUIREMENTS

What date can you start?

Do you require Live in

Live out

Full time

Part time

Temporarily

(Part time is 20 hours or less per week. Temporary 6 weeks or less. Specify days/hours)

Salary Required:
previous experience?

Children's sex and ages preferred

Area preferred

Would you accept a family with:
Handicapped child

Single parent family
Male

Female

I confirm that the information is true and correct and agree to you making possible enquiries that you feel appropriate. I confirm that I understand the implications and responsibilities of the positions that I am applying for. I agree to inform you immediately I receive a job offer from another source and not to pass on to a third party at any time information regarding prospective employers or to agree or arrange private job positions whilst registered with your agency. I understand that you cannot take any liability whatsoever for losses injury or negligence in relation to placing me or arranging an interview

Signature _____

Date _____