

**Au Pairs Worldwide**  
Morgenster 13  
9363 LH MARUM  
THE NETHERLANDS  
Tel/fax: +31 (0)594 510 801  
[aupairsworldwide@planet.nl](mailto:aupairsworldwide@planet.nl)

**Application form for Au Pairs**

**Personal details**

Surname: .....  
Christian Name: .....  
Street: .....  
City/Town: .....  
Zipcode: .....  
Telephone Private: .....  
Telephone Work: .....  
Fax no: .....  
E-mail address: .....  
Date of Birth: .....  
Nationality: .....  
Passport No: .....  
Are you single:.....  
Do you've any relatives/friends living in The Netherlands:.....  
Address of relatives/friends:.....  
Telephone of relatives/friends:.....

**Placement Information (please tick)**

Position requested:  Au pair  
Which country do you prefer? .....  
Preferred location:  City  Suburbs  Country  
Earliest possible starting date: .....  
Length of stay: .....

**Information about your family:**

Name of one of your parents: .....  
Address (if other than above): .....  
Telephone Private: .....  
Telephone Work:.....  
Profession: .....  
Do your parents approve of you being an Au Pair? .....  
Do you have any brothers or sisters? Yes/No  
If so, what are their ages? .....

**General information**

What religion are you? .....

Hobbies/interests: .....

Have you ever been away from home for more than two months? Yes/No

If yes, for what reason? .....

Do you have a special diet? .....

Do you have a criminal record ? Yes/No.

Do you have a handicap? .....

Do you smoke? Yes/No. If yes, are you prepared to live with a family where smoking is not allowed? Yes/No.

Do you have a driver's license? Yes/No. If yes, would you be prepared to drive? Yes/No.

If yes, do you drive a manual or an automatic car? .....

**Education:**

Name and address of your last school: .....

What type of school was it? .....

Number of years you have studied English/German/French: .....

What other languages are you master of? .....

**Work experience (if applicable)**

What is your current job title? .....

What is the name of the company/employer? .....

How long do you have to give notice? .....

**Experience with children**

- Babies
- 9-24 months
- 2-5 years
- 5-10 years
- > 10 years
- Physically handicapped children
- Mentally handicapped children
- Age group you prefer to work with?.....
- Would you prefer to be placed in a family with 1,2,3,or 4 children?.....

**Additional Information**

Do you know how to cycle? Yes/No

Do you know how to swim? Yes/No

Do you have a First Aid certificate? Yes/No

Do you have babysitting experience? Yes/No

Do you have experience as a youth leader? Yes/No

**Experience with housework**

- |         |                              |                             |
|---------|------------------------------|-----------------------------|
| Cooking | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| Laundry | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| Ironing | <input type="checkbox"/> yes | <input type="checkbox"/> no |

**Reason to become an Au Pair**

Why do you want to become an Au Pair? .....  
.....

Do you think you know what it entails to be an au pair yes/no if yes please explain .....

.....  
.....  
.....

Please enclose two references, one of somebody you have worked for or have done babysitting for, one reference of somebody who knows you well (nobody out of the family, e.g. a teacher, friend or employer). Please put the name, address and telephone number of the persons who are giving your references on the letters of reference. Also enclose a medical certificate from your doctor, declaring that you are fit and healthy and because of that suitable to be an Au Pair. We also need a general letter to potential families, in which you tell something about your family, hobbies, and experience with children, etc, some photo's and a copy of you passport.

Signing the application form means you have also signed for receipt of the terms and conditions of business of Au Pairs Worldwide The Netherlands, which apply to all parties who signed the application form. I declare that the above given information is correct and truthful.

Signature: .....

Date: .....

## Contract 12 month's stay for a cultural exchange. Au Pair Agreement.

1. I .....confirm that I have read all written materials provided by the au pair agency in my home country and that I fulfil all criteria. I understand that the au pair programme is a cultural exchange and not a contract of work. I am aware that being an au pair requires a high degree of both responsibility and flexibility and that I must take my duties seriously.
2. I confirm that I have answered all questions honestly and that all information in the application is true.
3. After confirmation of placement, I shall stay in touch with my host family and shall inform them of my travel arrangements. I agree not to travel to my host family until I have received an official confirmation of placement from the au pair agency.
4. I shall familiarize myself with all (if any) visa requirements. I shall obtain necessary documents (e.g. a valid passport) prior to departure and shall not enter my host country without a proper visa (if required).
5. I agree to cover all costs for language courses, travel to and from my host country (unless otherwise stated in the programme guidelines) and any debts incurred (e.g. telephone bills, etc). I shall bring emergency funds with me (as recommended by the au pair agency) to pay for unforeseen expenses.
6. I am familiar with and agree to abide by all programme guidelines and conditions, in particular those regarding: the number and distribution of working hours, au pair duties, pocket money, free time, holidays, language courses, transportation costs, insurance and the termination of an au pair agreement.
7. Upon arrival in my host country, I shall discuss in detail with my host family the weekly or daily routine and my and their expectations of the au pair programme.
8. I shall carry out my child care and light housekeeping duties with diligence. In addition to my au pair duties, I agree to keep my room clean and neat and to make a fair contribution to the cleanliness of the "common areas" of my host family's home.
9. I agree to abide by all house rules set by the host family (e.g. use of telephone and facilities within the home, daytime and overnight visitors, curfew, smoking, etc). During my stay I shall behave in a manner which does not reflect badly upon my host family, both our au pair agencies or my home country.
10. I shall seek the advice of the host family before administering any form of discipline on the children. Under no circumstances shall I hit the children or leave them alone.
11. I shall discuss with my host family any arrangements for holidays well in advance.

12. I shall make a concerted effort to experience the culture of my host country and to learn the language. I shall respect cultural differences and display tolerance towards others.
13. I realize that the success of my au pair stay depends largely on my own initiative. I shall try to integrate myself into family life and, should any problems arise, communicate openly with the family and actively seek a solution.
14. If I have any problems or questions, which cannot be discussed and resolved, with the host family, I shall contact the au pair agency in my host country for assistance.
15. I shall make every effort to resolve any differences with my host family. If no solution can be reached and I decide to leave the family, I agree to give advanced notice (in accordance with programme guidelines 14 day's). During this time period, I shall perform my normal duties and receive room, board and pocket money. If I request to be placed with a new family, I realize this might involve moving to a different city.
16. I understand that I shall be expelled from the programme and must return home if:
  - I fail to abide by this agreement and programme guidelines
  - I falsify any information in my application (e.g. regarding smoking, child care experience, health, etc)
  - I begin my au pair stay before receiving an official confirmation of placement from the au pair agency or a proper visa
  - I am responsible for repeated problems with several families
  - I disobey the laws of my host country.
17. I agree to leave my host country before my visa or residency permit expires (if applicable).
18. I shall not undertake any other paid employment and will perform only those tasks related to the au pair programme.
19. Should I decide to cancel my application, I shall inform the au pair agency at once.
20. I shall notify the au pair agency immediately if there are any changes to the information included in my application.

## Contract/Confirmation Au pair placement:

Hostfamily:.....  
Address:.....  
.....  
Telephone number.....  
.....

Name candidate/au pair.....  
Nationality:.....  
Date of Birth:.....  
Passport number:.....  
Starting Date:.....

Conditions au pair stay for 12 month's in family.....  
.....

- Pocket money € 340,- a month.
- Working hours 30 a week
- 2 evenings babysitting a week if required.
- Visa costs will be paid by the host family.
- Medical insurance will be paid by the host family.
- The au pair agrees to pay her own traveling expenses, he or she has to book a return ticket and send us a copy before traveling to the host country.
- The host family will provide you with your own room and pay all expenses like food etc.
- The host family will pay maximum of € 240,- to a language course during a 12 month's stay.
- The au pair agrees to undergo a tuberculosis test (if applicable)
- During a period of 12 month's the au pair has the right to a leave of absence (holiday) of 2 consecutive weeks, during which period

the pocket money will continue to be paid. This holiday can not be taken sooner than after 6 month's upon arrival.

- I hereby confirm that I'm in good physical and mental health that allows me to work with children in a foreign country.
- \*\*\*I'm aware that all official foreign documents an au pair needs to submit must be legalized or have an Apostille stamp attached by the competent authorities in the country of origin. This includes documents such as original birthcertificate, unmarried status declaration must have been issued by the competent authorities within the last 6 month's.

Date:.....

Name au pair:.....

Manager Au pairs Worldwide:.....

**Medical information, Part 1** (part 1 to be completed by the applicant)

Name of applicant: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Tick the appropriate box if you are presently suffering from or have ever had:

- |                                       |  |   |
|---------------------------------------|--|---|
| Tuberculosis <input type="checkbox"/> | Diabetes <input type="checkbox"/>  | Asthma <input type="checkbox"/>             |
| Anaemia <input type="checkbox"/>      | Depression <input type="checkbox"/>  | Bulimia <input type="checkbox"/>            |
| Eye problems <input type="checkbox"/> | Dizziness/fainting <input type="checkbox"/>  | Kidney disease <input type="checkbox"/>     |
| Arthritis <input type="checkbox"/>    | Haert disaese <input type="checkbox"/>   | Migraine/headaches <input type="checkbox"/> |
| Ulcers <input type="checkbox"/>       | Epilepsy/convulsions <input type="checkbox"/>  |   |
| Anorexia <input type="checkbox"/>     | Hepatitis A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> |   |

If you have ticked any of the above, please give details including dates:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever received counselling and/or medication for any nervous or emotional problems, or for an eating disorder? Yes  No   
If yes, please give details including dates

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever undergone surgery or been hospitalised? Yes  No   
If yes, please give details and dates

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you suffer from any allergies? Yes  No   
If yes, please give details

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you have any chronic or recurring illness? Yes  No

Do you carry an infectious disease such as Hepatitis B or the HIV virus? Yes  No

Are you currently taking any medication: Yes  No

If yes to any of the above please give details

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I hereby certify that all information given is correct, and that withholding or falsifying any information may result in me being withdrawn from the programme.

Date \_\_\_\_\_ Signature \_\_\_\_\_

**Medical certificate, Part 2** (Part 2 to be completed by a Medical Doctor)

As an au pair the applicant will be living with and will be responsible for young children in a foreign country. It is therefore important that we are advised of any physical or mental health problems that may have a bearing on the applicant's ability to participate.

Please review the information provided in Part 1 and give your opinion of the applicant's general state

of health:      excellent                       good                       poor

How long have you known the applicant? \_\_\_\_\_

Is the applicant currently taking any medication? Please specify:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Does the applicant have any infectious disease or suffer from any chronic illness?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Has the applicant ever received treatment for nervous or emotional problems?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I hereby confirm that (please add the applicants name) \_\_\_\_\_

is in good physical and mental health that allows him/her to work with children in a foreign country.

\_\_\_\_\_

Date, Location

\_\_\_\_\_

Doctors signature and stamp