

ATLANTA NANNY CONNECTION

FAMILY APPLICATION

Name:						
Address:	Address:		City:		State:	Zip:
Phone:	one: Email					
SEEKING						
Full-time:	Part-time:	Babysitting:	Live	-in:	Live-out:	(check all that apply)
How children do you have? Ages?						
Are you looking for long-term or short-term?						
What days/hours are you on need of care?						
What is your expected pay rate hourly?						
Will you need light or full housekeeping?						
Do you have pets?				Yes:	No:	
Will you provide a vehicle during working hours? Yes: No:						
Please list some duties that you expect from a care giver:						
What date would you like for a caregiver to start?						
What days and times are good for conducting interviews?						
How did you hear about Atlanta Nanny Company?						
Signature			Date			