



*We Care For Those You Love - Since 1984*

**12605 W North Ave., Ste. 126, Brookfield, WI 53005-4629**

**Tel: (847) 277-0320 / Fax: (847) 277-0321**

**E-mail: [susie@dvinecaregivers.com](mailto:susie@dvinecaregivers.com)**

**[www.dvinecaregivers.com](http://www.dvinecaregivers.com)**

Dear Applicant:

Thank you for considering employment with Child Care Services of Wisconsin, Inc. I would like to take this opportunity to give you some background information on our company.

Child Care Services of Wisconsin, Inc. is a privately-owned company and has been in operation since 1984. We have full-time and part-time positions available for live-out work. In addition, we also have vacation care positions, as well as permanent live-in positions. We serve southeastern Wisconsin and northern Illinois the east coast, but often have placement opportunities from other areas. Placement elsewhere can be arranged if that is what you desire. Your schedule can be arranged to work as many hours, or as few hours, as you would like.

We welcome applicants that have had previous child care experience or those who just love children. The communities in which we place our nannies are affluent, upscale neighborhoods and found to be quite safe. Our clients are professional people; some are celebrities and sports figures.

If you join our team you will be treated like a member of our family and not just as an employee. If you truly love children, I am sure you will find this to be a very rewarding experience and a great place to grow your career.

Please fill out the enclosed application and e-mail it back, or fax it back or send it my mail to our address above. If you have any questions, please call. We are looking forward to working with you and hope to hear from you soon.

Sincerely,

A handwritten signature in cursive script that reads "Susie".

Susie Murphy  
President

Encl.



## APPLICATION FOR EMPLOYMENT CHILDCARE SERVICES OF WI., INC.

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<b>BACKGROUND INFORMATION</b>										
Full Legal Name:										
All former maiden, married, nick names or alias':										
<b>A) Current Address</b> (if less than 10 years include previous address, Section B):		Street:								
		Apt/Unit:								
		City								
		State								
		Zip								
How Long Have You Lived at this Address?						Years				
<b>B) Previous Address:</b> (include if you have lived at your current address less than 10 years)		Street:								
		Apt/Unit:								
		City								
		State								
		Zip								
How Long Did You Live at this Address?						Years				
Phone #'s (check your preferred number):		Cell:					Other:			
Email:										
Social Security # (required for background check):				Date of Birth:						
Are you legally able to work in the United States?:		1) I am a US Citizen:		2a) Valid Work Permit ("Green Card")		2b) Permit Expiry Date:				
In What City and State Were You Were Born?		City:					State or Country:			
Name and Contact Information of Emergency Contact:		Name:						How Related?		
		City:				State:		Phone:		

## ADDITIONAL APPLICANT INFORMATION

Placement Availability (check all that apply):		Fulltime (Live In)		Full time (Live Out)		Part-time		Casual / Temporary:		
Hours Available For Live Out / Part Time :	Mornings:	Afternoons:		Evenings:		Are there days you <b>cannot/will not</b> work?				
Salary Requirements:		/\$ per hour		Geographic Preferences for Placements:						
When Can You Start Work?	Immediately :		Or Date Available:			Can You Commit to an Assignment for at least 1 Year?				
Do You Have a Valid Driver's License?		License #					Issuing State:			
Do You Have Any Past Driving Violations or Accidents? (most recent first)			Infraction			Date				
Do You Own A Reliable Vehicle? (if no, leave blank)	Year		Make			Model				
Do You Have Valid Collision and Liability Insurance on Your Vehicle?			Do You Have Medical and Uninsured/Underinsured motorist coverage (liability for passengers)?							
<b>ABOUT YOU</b> <i>(if you prefer to not answer any question please let us know)</i>										
<b>A i)</b> Have You Ever Been Charged With, or Convicted of a Felony or Misdemeanor? (if "NO" go to Part B)		Charge:					Date:			
		Charge:					Date:			
		Charge:					Date:			
<b>A ii)</b> If You Answered "Yes" above, When and Where? Please Explain:										
<b>B)</b> Do you have any limitations that affect your ability to perform the job? Please explain:										
<b>C)</b> Do you smoke?		Can Your Refrain from Smoking if Required by Your Employer?								
<b>D)</b> Have you ever filed, or have filed for you, a Worker's Compensation claim?						Date:				
<b>E)</b> Do You Have Any Allergies?						Would you consider placement in a smoking household?				
<b>F)</b> Are you fully immunized against the flu and pneumonia?			Date of Last Medical Exam:				Name and phone # of Physician:			

## EDUCATION / CERTIFICATIONS

Highest Education Achieved:		Years:		Area of Study/Major:	
Certifications: <i>(include dates for current certifications only. You may be required to provide proof of certification)</i>		Date:			Date:
		Date:			Date:
		Date:			Date:
<i>Include any additional certifications or training relevant to child care:</i>					
Can you swim?		Do you speak any languages fluently other than English?			
List any hobbies and pastimes:					
Do You Have Any Children? If so, what are their ages?					
Why Do You Want to Be a Nanny?					
Tell us about yourself. What Personality Traits Do You Have That Make You A Good Nanny Candidate?					
What Are Your Views on Child Discipline?					
Are There Any Age Groups You Prefer Not to Work With? Explain:					
How Would You Describe A Perfect Nanny Placement? What Would Be Your Ideal Working Conditions?					
How Did You Hear About Childcare Services of Wisconsin?		Have You Applied With Us Previously? If "Yes" Enter Date:			
Would you be willing to notify Child Care Services of Wisconsin, Inc. if there are any irregularities in dealing with the family during the interview process?					

## PREVIOUS EMPLOYMENT

*Start with current or most recent for the last 10 years. If you are currently NOT working, please indicate why and when you left the work force in the space below.*

If you are not currently working, or have any gaps in your work history, please explain:					
<b>CURRENT OR MOST RECENT EMPLOYER</b>					
Employer/Family:		Dates:		to	
Address:					
Job Title:		Responsibilities:			
Ages of Client's Children When You Started:					
What Did You Most Like and Dislike About this Placement?					
<b>PREVIOUS EMPLOYER 2</b>					
Employer/Family:		Dates:		to	
Address:					
Job Title:		Responsibilities:			
Ages of Client's Children When You Started:					
What Did You Most Like and Dislike About this Placement?					
<b>PREVIOUS EMPLOYER 3</b>					
Employer/Family:		Dates:		to	
Address:					
Job Title:		Responsibilities:			
Ages of Client's Children When You Started:					
What Did You Most Like and Dislike About this Placement?					

## CHILDCARE / NANNY EMPLOYMENT REFERENCES

Please list four (4) child care related references whom we may speak to (non-family members) regarding your child care experiences and a short description of the date(s) child care took place, number of children and ages, responsibilities assumed and length of time you cared for the children of each family:

Name:		Day Phone:		Evening Phone:	
Dates Worked For:		to		Hours/Week:	
Description (ages of children and position/duties):					
Name:		Day Phone:		Evening Phone:	
Dates Worked For:		to		Hours/Week:	
Description (ages of children and position/duties):					
Name:		Day Phone:		Evening Phone:	
Dates Worked For:		to		Hours/Week:	
Description (ages of children and position/duties):					
Name:		Day Phone:		Evening Phone:	
Dates Worked For:		to		Hours/Week:	
Description (ages of children and position/duties):					

## NANNY CHARACTER REFERENCES

Please list four (4) character references (non-family members) whom we may speak to that have known you for at least three (3) or more years and their relationship to you:

Name:		How Long Known (years)?		Relationship:	
Address:		Day #:		Evening #:	
Name:		How Long Known (years)?		Relationship:	
Address:		Day #:		Evening #:	
Name:		How Long Known (years)?		Relationship:	
Address:		Day #:		Evening #:	
Name:		How Long Known (years)?		Relationship:	
Address:		Day #:		Evening#:	



CHILD CARE SERVICES OF WISCONSIN, INC.  
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## CONTRACT BETWEEN CHILD CARE SERVICES OF WISCONSIN, INC. AND NANNY APPLICANT

1. I hereby give permission to Child Care Services of Wisconsin, Inc., and its agents, to investigate and verify any and all information given on the applicant information sheets. I hereby release Child Care Services of Wisconsin, Inc., and its agents, as well as persons contacted to verify said information from any and all liability or claims that may arise from the giving, receiving or use of all said information.
2. I certify that all information provided on the Nanny information sheets is true and accurate to the best of my knowledge and belief. I agree to supplement the information on the Nanny information sheets stated above, if or when any event occurs that may impact upon the accuracy or truth of said existing information in any way.
3. I hereby agree to indemnify Child Care Services of Wisconsin, Inc. if or when I, during the performance of my duties as a Nanny, act negligently, recklessly, willfully, or in any other manner which is to the detriment of Child Care Services of Wisconsin, Inc., or any and all third parties who may suffer any damage or injuries as a result of my actions.
4. I agree to remit to Child Care Services of Wisconsin, Inc. the finder's fee that Child Care Services of Wisconsin, Inc. earned due to my placement, if I do any act whatsoever that nullifies Child Care Services of Wisconsin, Inc.'s right to retain said finder's fee.
5. I further agree that if and when placed through Child Care Services of Wisconsin, Inc. with one of their clients, and that said client has failed to timely and fully pay the finder's fee due to Child Care Services of Wisconsin, Inc., that Child Care Services of Wisconsin, Inc. retains the right to rescind my placement with said client, and/or in the alternative, if I refuse to acknowledge such right to rescind the placement, to hold me jointly and severally responsible for the payment of said finder's fee along with said client. Furthermore, I agree to check first with Child Care Services of Wisconsin, Inc. before all travel plans are made to insure the family has all contract obligations fulfilled with Child Care Services of Wisconsin, Inc.
6. I agree not to accept employment of any kind from a client of Child Care Services of Wisconsin, Inc. whom I was referred to as a nanny candidate, within one year of referral, without that client first paying the required finder's fee to Child Care Services of Wisconsin, Inc.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_  
Signature:

*(You May Attach an E-Signature or Print and Sign This Application and Return It by Mail)*