



# DELANEY INTERNATIONAL

Employment Agency

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## APPLICATION FOR A FAMILY - AU PAIR ABROAD

(Please complete clearly in block capitals, and if possible, in the language of the country of your destination)  
We have contact agencies in France, Germany, Italy and Spain.

1. NAME OF APPLICANT .....
2. ADDRESS .....
- .....
3. HOME TEL ..... MOBILE TEL .....
4. EMAIL ..... DATE OF BIRTH .....
5. NATIONALITY ..... RELIGION .....
6. FATHER'S OCCUPATION .....
7. MOTHER'S OCCUPATION .....
8. BROTHER(s) NAME(s) ..... AGE .....
9. SISTER(s) NAME(s) ..... AGE .....
10. NAME and ADDRESS OF YOUR PRESENT OR LAST SCHOOL .....
- .....
- EXAMINATIONS PASSED .....
11. FULL DETAILS OF ANY PRESENT OR PAST EMPLOYMENT (give name, address, tel. no. and type of work).....
- .....
12. HOUSEHOLD DUTIES, WILL YOU:
  - DO HOUSEWORK? ..... WHAT EXPERIENCE? .....
  - LOOK AFTER CHILDREN? ..... WHAT EXPERIENCE? .....
  - HELP WITH COOKING? ..... WHAT EXPERIENCE? .....
13. WHICH COUNTRY WOULD YOU LIKE TO BE PLACED IN? .....
14. HOW MUCH OF THAT NATIVE LANGUAGE DO YOU HAVE? ..... Little / Average / Good
15. HAVE YOU BEEN ABROAD BEFORE? .....
16. DO YOU HAVE ANY SPECIAL DIET? (e.g. vegetarian) .....
17. WHAT ARE YOUR HOBBIES / INTERESTS? .....
18. HAVE YOU PASSED YOUR DRIVING TEST? ..... DATE LICENCE OBTAINED .....
- ARE YOU HAPPY TO DRIVE IN EUROPE? .....

19. DO YOU SMOKE? ..... IF YES, WOULD YOU BE WILLING TO NEVER SMOKE IN THE HOME? .....
20. WEIGHT..... Kg HEIGHT ..... m ..... cm
21. WHEN DO YOU WISH TO START AS AN AU PAIR?
22. HOW LONG DO YOU WANT TO STAY THE COUNTRY? .....
23. DO YOU WANT TO LIVE IN A TOWN OR A VILLAGE? .....
24. WOULD YOU ACCEPT A SINGLE PARENT FAMILY? Only a Mother YES / NO Only a Father YES / NO
25. DO YOU HAVE A VALID PASSPORT? .....
26. DO YOU ACCEPT THAT YOU HAVE TO PAY YOUR OWN FARE? .....
27. DO YOU LIKE ANIMALS? .....
28. DO YOU WISH TO ATTEND A LANGUAGE CLASS? .....
29. WILL YOUR PARENTS SEND EXTRA POCKET MONEY IF NECESSARY? YES / NO
30. APPLICANT'S GENERAL STATE OF HEALTH (please list any disability e.g. sight, hearing, epilepsy, allergy)  
.....
31. OTHER DETAILS OR WISHES OF THE APPLICANT .....
- .....
- .....
32. HOW DID YOU HEAR ABOUT OUR AGENCY? .....

Please write on a separate piece of paper, in the native language, if possible, a 'Dear Family' letter about yourself, your family, your hobbies and your interests, schooling, whether you have any experience with children, and any plans or ambitions you have for the future.

PLEASE ENCLOSE WITH THIS FORM:

- a) **A large (A5) Stamped Addressed Envelope**
- b) **4 photographs (smiling if possible, and passport size). Please write your name and address on the back of the photographs.**
- c) **References: One from your teacher or previous employer and one or two from people whose children you have looked after / or helped in the house.**
- d) **A medical certificate confirming the state of your health, physical and mental.**

**Please supply (c) and (d) with relevant translation if possible.**

I have read and understood and agree to the conditions contained in the "Au Pairs" guide and confirm that the information given here is true.

SIGNED ..... DATED .....

Please return by email or post to:  
 Delaney International Limited  
 Bramble Cottage, Thorncombe Street,  
 Bramley, Surrey. GU5 0ND. UK

Email: info@delaney-nannies.com

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