



7036 Eastbrook Ave. Ste. 200 • Baltimore, MD 21224 • 410-284-8355 • www.lovincaredoula.com

Nanny/Baby Nurse/Housekeeper Application

DATE _____

First Name _____ **Last Name** _____ **MI** _____

Address: _____ City: _____ State: _____ ZIP: _____

Home Phone: _____ Other Phone: _____ FAX: _____

Have you used any other names? If so, please state: _____

Emergency contact:

Name: _____ Phone: _____

Check Yes or No:

Are you legally eligible to work in the U.S.? YES NO

Position Applied For _____

Are you looking for: Full-time Part-time Temporary Permanent On-Call Summer Live-Out Live-In
 Share Nanny Overnight Vacation Evenings Other

What days are you available for work? Monday Tuesday Wednesday Thursday Friday Saturday Sunday

What hours do you prefer? Mornings Afternoons Days Evenings Nights Overnights Anytime

Note: It is not necessary to indicate the need for absences due to religious practices or obligations.

Date Available to Start: _____ **Desired Compensation:** _____

Do you speak any foreign language? YES NO If yes what language(s): _____

Geographic area you are willing to work _____

Education	Name and address of school	Did you graduate?	Course	Degree
High School	_____	_____	_____	_____
College	_____	_____	_____	_____
Graduate	_____	_____	_____	_____
Vocational/Adult School	_____	_____	_____	_____

Types of Certification and or License held	Granting Authority	Effective dates	Expiration dates
_____	_____	_____	_____

Additional course work, seminars or training: _____

Professional Licenses or registrations: _____

Clubs, organization, professional memberships: _____

Any special awards or achievements: _____

Any special talents you would like to share with children: _____

Why are you interested in doing this kind of work? _____

How well are you suited to this type of work, i.e. what are your *selling points*? _____

What can children you are caring for hope to benefit from your care? _____

What form of discipline do you believe is most effective? _____

Do you have long-term career or job goals? _____

Why do you want to be a Nanny? _____

Previous 4 employers/volunteer organizations – Most Recent First. May we contact all of these entities? Yes / No, Do Not Call _____

Name: _____

Address: _____ City: _____ State: _____ ZIP: _____

Phone No (H): _____ Phone No (W): _____

Position Held: _____ Dates of Employment/Volunteering: _____

Full-time: _____ Part-time: _____ Last Compensation (if any): \$ _____ per Hour: _____ Week: _____

Ages of children at start of employment:

Newborn/Infant: _____ Toddler: _____ Preschool: _____ School: _____

Reason for leaving: _____

Duties and Responsibilities: _____

Name: _____

Address: _____ City: _____ State: _____ ZIP: _____

Phone No (H): _____ Phone No (W): _____

Position Held: _____ Dates of Employment/Volunteering: _____

Full-time: _____ Part-time: _____ Last Compensation (if any): \$ _____ per Hour: _____ Week: _____

Ages of children at start of employment:

Newborn/Infant: _____ Toddler: _____ Preschool: _____ School: _____

Reason for leaving: _____

Duties and Responsibilities: _____

Name: _____

Address: _____ City: _____ State: _____ ZIP: _____

Phone No (H): _____ Phone No (W): _____

Position Held: _____ Dates of Employment/Volunteering: _____

Full-time: _____ Part-time: _____ Last Compensation (if any): \$ _____ per Hour: _____ Week: _____

Ages of children at start of employment:

Newborn/Infant: _____ Toddler: _____ Preschool: _____ School: _____

Reason for leaving: _____

Duties and Reponsibilities _____

Name: _____

Address: _____ City: _____ State: _____ ZIP: _____

Phone No (H): _____ Phone No (W): _____

Position Held: _____ Dates of Employment/Volunteering: _____

Full-time: _____ Part-time: _____ Last Compensation (if any): \$ _____ per Hour: _____ Week: _____

Ages of children at start of employment:
Newborn/Infant: _____ Toddler: _____ Preschool: _____ School: _____

Reason for leaving: _____

Duties and responsibilities: _____

CHARACTER REFERENCES – Do not include work references or relatives:

Name: _____ Address: _____ Phone: _____

Name: _____ Address: _____ Phone: _____

Name: _____ Address: _____ Phone: _____

Other information that would assist us in determining your qualifications for employment: _____

Have you ever been convicted of a felony? Yes / No If yes, please explain _____

Please do not include any information about any arrest or detention that did not result in a conviction; any conviction where your record has been expunged, sealed or eradicated; any misdemeanor conviction where you have completed probation and the case has been dismissed; or any arrest where you have successfully completed a pretrial diversion program.

The existence of a criminal record is not an absolute bar to referrals, placements or employment.

Do you drive?: YES NO Do you own or have access to a car? YES NO

Do you have a current and valid driver's license? Yes No What is your means of transportation to work? _____

Driver's license number _____ State _____ ExpirationDate _____

License Plate No: _____ State: _____ Make: _____ Model: _____ Year _____

Have you had any accidents or moving violations during the past three years? Yes No Explain: _____

Are you currently CPR certified? YES NO If yes, complete the following:

Infant: _____ Child: _____ Adult: _____ Expiration Date: _____ Name of certifying agency: _____

Do you have any time commitments or obligations that would affect your availability to work for family?

Do you have experience with newborns? YES NO

Do you have experience with multi-birth children (twins, triplets, etc?) YES NO

Do you have experience with children with special needs? YES NO

Are you willing to do housekeeping?

Child-related (light): YES NO

Family-related OK (heavy) – limits defined YES NO

Are you willing to cook?

Child-related only: YES NO

Family-related OK –limits defined: YES NO

Are you willing to travel with the family? YES NO

Are you willing to work in a home with pets? YES NO

Are you willing to care for pets? YES NO

Can you swim? YES NO

Will you work in a home where there are firearms? YES NO

Have you ever worked in a home where there has been domestic violence? YES NO

Are you able to perform (with or without accommodation) the essential job functions of caring for a child or children ? Yes No

Is there anything else we should know about you? Explain: _____

Are you working with other agencies? YES NO If yes, who? _____

How did you hear about Love ‘N Care, LLC? _____

Applicant Certification and Agreement

I certify that all information that I provided in this application is true, accurate, complete and correct. I authorize the investigation of all the information I provided in this application, unless I have indicated otherwise. I authorize the parties, entities and references I listed in this document to provide all information they may have regarding me and my character. I authorize the disclosure of all information about me, including but not limited to information obtained from the parties, entities and references I listed in this document, as well as information obtained by, through or from any background, employment and or criminal history checks, to Love ‘N Care, LLC (“Love ‘N Care”) and its affiliated entities, representatives, and clients. I understand and agree that any misrepresentation, falsification or material omission of information on this application may be grounds for Love ‘N Care to refuse to refer or place me.

I understand and agree that, in connection with the processing of this employment application, Love ‘N Care may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, driving record, and personal characteristics. Upon written request from me, Love ‘N Care will provide me with information concerning the nature and scope of any such report requested, as required by the Fair Credit Reporting Act.

I release Love ‘N Care and its owners, agents, employees, officers, directors, attorneys, representatives, clients, and affiliated entities and persons from any and all liability as a result of soliciting, providing or receiving information regarding me or my character, or the use or disclosure of such information.

I understand and agree that Love ‘N Care does not unlawfully discriminate in referrals or placements, and that no question on this application is used for the purpose of limiting or excusing any applicant for consideration for referral, placement or employment on any basis prohibited by applicable laws or regulations.

I understand and agree that the information supplied on this application has been given for the purpose of evaluating my qualifications for employment with Love 'N Care's clients. However, I understand and agree that Love 'N Care does not guarantee my referral, placement, employment or terms of employment.

I understand and agree that I may not disclose any contact or other information about any client to whom Love 'N Care refers me; that I will use such information only in conjunction with Love 'N Care's placement and referral services; and that I will keep such information confidential to the maximum extent permitted by law.

I understand and agree that my work schedule and my method, manner and means of employment, and any other terms and conditions of my employment, will be determined by me and any Love 'N Care client that hires or otherwise engages my services. I understand and agree that Love 'N Care will not be responsible for my direction, supervision, control or compensation, and that Love 'N Care is not and will not be my employer or co-employer. Rather, I understand and agree that the client will be solely responsible for my direction, supervision, control and compensation, and that **the client will be my employer**. Accordingly, I understand and agree that I will be responsible for all employee related taxes, withholdings, obligations and requirements according to applicable law.

Disclaimer/Waiver/Hold Harmless/Limitation of Liability:

Love 'N Care assumes no liability or responsibility for, and makes no representations or warranties about, any information, material, errors, omissions, or services it provides. **I understand and agree that my use of Love 'N Care's services is at my own risk.** Except as specified herein, Love 'N Care does not provide and specifically disclaims any express or implied guarantees or warranties to me. Additionally, Love 'N Care does not employ or exercise control or discretion over clients and disclaims all responsibilities for clients' conduct or omissions.

By signing this document, I hereby waive and release Love 'N Care and its owners, agents, employees, officers, directors, attorneys, insureds, representatives and affiliated persons and entities from all liability, including but not limited to liability arising from negligence or the actions of any third party (including but not limited to clients, potential clients or referrals), arising under law or otherwise.

This document does not govern claims that cannot be released by private agreement or that cannot lawfully be waived. In addition, this document does not limit either party's right, where applicable, to file, cooperate with or participate in an investigative proceeding of any governmental entity, or to file charges that do not seek personal relief for released claims with any governmental entity.

Additionally, I shall indemnify, defend and hold Love 'N Care and its owners, agents, employees, officers, directors, attorneys, insureds, representatives and affiliated persons and entities harmless against any damages or liability whatsoever arising out of or in any way in connection with my referral to or employment or association with Love 'N Care's clients, regardless of how, when, or where any damages or liability was incurred.

Finally, in no event shall either party to this document be liable to another party to this document for consequential, incidental, exemplary, punitive, special or indirect damages of any kind. If any waiver, exclusion or limitation of damages is not permitted by law, the parties' liability to each other is limited to the maximum extent permitted by law.

Miscellaneous Provisions:

This agreement shall be governed by and interpreted according to the laws of the State of Maryland. Any action or proceeding commenced regarding this agreement shall be brought in Baltimore, Maryland.

The parties enter into this agreement without reliance upon any statement, representation, promise, inducement, or agreement not expressly contained herein. This agreement constitutes the entire agreement between Love 'N Care and me and supersedes all prior oral and written agreements between Love 'N Care and me with respect to the subjects covered in this agreement. This agreement shall not be amended or modified except in a mutually agreed upon writing signed by me and an authorized representative of Love 'N Care.

I represent that I have carefully read and fully understand the scope and effect of all of the provisions of this agreement; that I have had all such time that I desire to consider the agreement; that I had the opportunity to consult with an attorney of my own

choosing and at my own expense to review this agreement; and that I have availed myself of this opportunity to the extent, if any, that I wished to do so.

The terms of this agreement are severable. The invalidity or unenforceability of any provision within this agreement shall not affect the application of any other provision, provided that the essential terms and conditions of this agreement for each party remain valid, binding and enforceable. Further, consistent with the purposes of this agreement, any otherwise invalid provision of this agreement may be reformed and, as reformed, enforced by any party to this agreement.

This agreement may be executed in counterparts, each of which shall be deemed to be an original. Such counterparts, when taken together, shall constitute but one agreement.

Failure or delay on the part of either party to exercise any right, remedy, power or privilege under this agreement shall not operate as a waiver of any other right, remedy, power or privilege. A waiver, to be effective, must be in writing and must be signed by the party making the waiver. A written waiver of a default shall not operate as a waiver of any other default or of the same type of default on a future occasion.

Neither party shall assign or transfer this agreement or any interest herein without the prior written consent of the other party.

The rights and remedies provided in this agreement shall be the sole and exclusive rights of the parties against one another relating to the subject matter of this agreement.

The section captions contained in this agreement are for convenience only and do not constitute a part of its terms and provisions.

THE PARTIES TO THIS AGREEMENT HEREBY CERTIFY, REPRESENT AND WARRANT THAT THEY HAVE CAREFULLY READ THIS AGREEMENT, THAT THEY FULLY UNDERSTAND ITS FINAL AND BINDING EFFECT AND THAT THEY AGREE TO ALL ITS TERMS AND CONDITIONS.

Candidate

Love 'N Care, LLC

(Sign Name Here)

Lois Ecker, CPD, CLC, Owner (Signature)

(Print Name Here)

Lois Ecker, CPD, CLC, Owner (Print Name)

Date: _____

Date: _____

**Consumer Report and Investigative
Consumer Report Disclosure and Authorization**

I understand and agree that for employment purposes and pursuant to applicable law, Love ‘N Care, LLC (“Love ‘N Care”) may seek a consumer report and or an investigative consumer report regarding information about me, including but not limited to my education, employment, credit worthiness, credit standing, character, general reputation, personal characteristics, mode of living, work habits, work performance, reasons for termination by past employers, and criminal conviction history. The report(s) will be provided by US Information Search. I authorize Love ‘N Care to conduct pre-employment inquiries and also to conduct other employment related inquiries after I receive a conditional offer of employment to the extent allowed by law. I understand and agree that I have the right to request additional disclosure of the nature and scope of the investigation requested, and that I will receive a written summary of my rights as a consumer. I understand and agree that all pre-employment screening activities are conducted in compliance with all applicable laws and regulations.

In light of these disclosures, to the maximum extent allowed by law, I hereby voluntarily and knowingly authorize any past or present employer, or other business, governmental agency, entity or individual contacted by Love ‘N Care to provide all records, documents or information they may have concerning my identity, education, employment history, credit worthiness, credit standing, character, general reputation, personal characteristics, mode of living, work habits, work performance, reasons for termination by past employers, criminal conviction history, or any other information, records or documents requested, and to provide full and complete disclosure to Love ‘N Care. I request that any law enforcement agency, institution, information service bureau, school, employer, personal reference, insurance company or any other entity or person contacted by Love ‘N Care or its representatives cooperate fully and completely in responding to these inquiries.

I further authorize the disclosure of all information, documents and records about me and my character, including but not limited to all information obtained from persons and entities, as well as information obtained by, through or from any background, employment and or criminal conviction history checks, to Love ‘N Care and its affiliated entities, representatives, and clients.

I voluntarily, knowingly and unconditionally release any named or unnamed person, informant, or entity from any right or claim of confidentiality and any liability resulting from the furnishing of information about me. I also release Love ‘N Care and its owners, agents, employees, officers, directors, attorneys, representatives, clients, and affiliated entities and persons from any and all liability as a result of soliciting, providing or receiving information regarding me or my character, or the use or disclosure of such information.

Signature

Date