



RESULTS
NANNIES-AU-PAIRS
INTERNATIONAL

PO Box 3266
SUCCESS 6964 Western Australia

Phone (61 8) 9499 4685
Fax (61 8) 9499 4157
Mobile 0414 755 722
Email info@therestultsgroup.com.au

Greetings from Perth, Western Australia.

Thank you for considering us to be of service.

Just a brief outline of our services:

You are required to complete the attached Registration Form and after registering and paying the required deposit you will receive a full detailed confidential report on the candidate with all supporting documents.

All our candidates are personally interviewed and are required to submit a detailed application form and supporting documents such as a resume, relevant references, Police and Medical clearance and copies of certificates of studies as applicable.

They also require you to supply two referees and these are contacted to discuss the abilities and character of the candidate.

If the candidate is acceptable, you can then carry out a direct phone interview with the candidate and if all is agreed, you are required to supply us with a letter of Acceptance detailing the offer of employment and any special conditions agreed to by both parties during the telephone interview.

It is at this stage that you are required to make the final payment to us as per the agreement.

We will arrange for the candidate to sign the said letter and send you a copy as confirmation and we will ensure that the candidate meets all the necessary visa requirements, if required, prior to their departure from Perth or other Australian locations.

Hoping this information will assist you whilst considering your options, however should have any queries or should you require additional information please do not hesitate to contact me at any time on **+61 8 9499 4685** or Mobile 0414 755 722.

Looking forward to your early reply.

Kind regards,

Robert

Robert Gesmundo AFCIA AIMM CD
Managing Director



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Date: ____/____/____

OVERSEAS PLACEMENT APPLICATION – NANNIES AU PAIRS

Family Name: _____ First Name: _____

Address: _____

_____ P/C _____

Phone: +61/ ____ / _____ Mob: _____

Fax: +61/ ____ / _____ Email: _____

Nationality: _____ Date of Birth: ____/____/____

Male Female

Destination: (Please circle) Italy | UK | France | Switzerland | Germany | Spain |
Netherlands | Other

If other, please specify: _____

Father's occupation: _____

Mother's occupation: _____

Brothers/Sisters (Ages): _____

Next-of-kin (Name/Address/Tel): _____

Self Description:

<input type="checkbox"/>	Talkative
<input type="checkbox"/>	Quiet
<input type="checkbox"/>	Cheerful
<input type="checkbox"/>	Outgoing
<input type="checkbox"/>	Sporty
<input type="checkbox"/>	Artistic
<input type="checkbox"/>	Reliable
<input type="checkbox"/>	Flexible

Interests/Activities:

Please circle if applicable:

Driver | Swimmer | Smoker (No per day _____)

Do you have any dietary requirements? _____

Languages other than English (basic/conversational/fluent) _____

Have you lived away from home? _____ If so, on what occasion? _____

Have you done volunteer work? _____

Position sought:

<input type="checkbox"/>	Nanny
<input type="checkbox"/>	Au Pair
<input type="checkbox"/>	Mother's Help

Starting date: _____ Duration: _____ Salary: _____

Preferred location:

<input type="checkbox"/>	Major city
<input type="checkbox"/>	Smaller city
<input type="checkbox"/>	Town
<input type="checkbox"/>	Countryside

Could you work with:

<input type="checkbox"/>	More than 2 children
<input type="checkbox"/>	Pets
<input type="checkbox"/>	Single parent

Do you prefer:

Sole charge: Yes No

Share with mother: Yes No

Are you interested in attending a language course? Yes No

Tick where appropriate or leave unmarked if you are unable to perform any of the following:

	Willing	Experienced		Willing	Experienced
1. Take care of infants			7. Daily maintenance of childrens' rooms		
2. Assist with care of infants			8. Launder childrens' clothing		
3. Take care of ages 1-5 years			9. Iron childrens' clothes		
4. Assist with ages 1-5 years			10. Cook for children		
5. Assist with ages 5 to 10 years			11. Assist with general housework		
6. Supervise ages over 10 years					

If you are unable to perform one or more of the above are you willing to learn? _____

What duties are you accustomed to helping with? _____

EDUCATION

Name of School/College/University: _____

Courses attended: _____

Childcare education: _____

First Aid: _____

EMPLOYMENT HISTORY

We are primarily interested in any childcare positions you have held. However, it is necessary to have details of your general employment history, so please add other positions you have had. Please start with your present/most recent job.

POSITION 1

Name of employer: _____ Tel: _____

Address: _____

Dates employed: _____ Ages of children: _____

Duties: _____

Salary: _____

Reason for leaving: _____

POSITION 2

Name of employer: _____ Tel: _____

Address: _____

Dates employed: _____ Ages of children: _____

Duties: _____

Salary: _____

Reason for leaving: _____

POSITION 3

Name of employer: _____ Tel: _____

Address: _____

Dates employed: _____ Ages of children: _____

Duties: _____

Salary: _____

Reason for leaving: _____

I declare that the information on this form is correct and can be used for the purpose of finding me an Au-Pair/Nanny position. I have read, understood and agreed to be irrevocably bound by the General Terms and Conditions of the Working Holiday Program:

Signature: _____ Date: _____

MEDICAL QUESTIONNAIRE

Name: _____

Date of Birth: ____/____/____

Blood Type: _____

Please complete the following questionnaire. It is very important that these questions be answered correctly.

Have you or do you suffer any of the following?

	Yes	No
Diabetes		
Fits, Blackout, Epilepsy		
Tuberculosis		
Backache or Sciatica (requiring time off work)		
Eye Disorders		
Skin Disorders		
Heart disease or high blood pressure		
Nervous or psychiatric disorder		
Do you suffer from any allergies?		
Do you suffer from any medical disorder (Disability not included). If so, please state:		
Have you had any major accidents or operations. If so, please specify:		
Are you on any medication? If so, please state:		
Are your vaccinations up to date?		

Would you be willing to undergo a complete medical and blood test (Anti-Hepatitis B and Anti-HIV tests included) if required to do so?

Name and telephone of your personal doctor: _____

I declare that the above information is true and correct and can be used for the purpose of finding me an Au-Pair/Nanny position.

Signature: _____ **Date:** _____

QUESTIONS & ANSWERS

Below are some questions we would like you to answer in order to be able to clearly identify your profile even better and match you with the right family:

How old are you? _____

Health condition? _____

Have you ever lived away from home? How long? Where?

Where have you traveled? _____

What type of family do you come from? Siblings?

Sports, talents? _____

Why are you interested in this job? _____

What attracts you to _____ ? (Specify country)

Why do you work with children? _____

If the children do not do as asked, what is your strategy? _____

Where are you used to driving? Country? City? _____

How long would you like this job for? _____

Most enjoyable and most difficult aspects about working as a nanny?

What plans do you have for your future?

What are your passions in life?

Name something in your life you are very proud of:

What is your favourite pastime?



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GENERAL TERMS & CONDITIONS

The Results International Recruitment and Results Nannies – Au-Pair International (hereafter known as Results) Working Holiday Program (WHP) is subject to and based upon the following terms and conditions.

1. PROGRAM FEE

The non-refundable deposit of \$185, - towards the working Holiday Program Fee is payable on submission of the application. The balance of \$385, - is payable a) once employment has been offered to you through Results either verbally or in writing or b) prior to your departure from Australia, whichever occurs first.

2. APPLICATIONS

Your application will only be accepted and processed if the correct deposit or full program fee is enclosed. It is your responsibility to provide Results with all required documents as outlined to you during the interview and/or as per checklist provided to you by Results.

3. CANCELLATION, UNUSED SERVICES AND REFUNDS

If you cancel our service before a job offer has been made, either verbally or in writing, the program fee will be refunded minus your non-refundable initial deposit of \$185,-. If you cancel our service or postpone your departure after a job offer has been made, either verbally or in writing a cancellation fee of \$660,-minus your initial deposit will be due and payable immediately. If you cancel our service after you have commenced your travel or if you chose not to use, fully or partly, any other service paid for there will be no refund of any monies paid.

4. TRAVEL ARRANGEMENTS

Results can arrange your travel requirements. However, you can arrange your own, in which case you will be totally responsible for all matters relating to travel.

5. TRAVEL INSURANCE

As a participant in the Results Working Holiday Program, you are required to purchase a minimum of 6 months comprehensive travel insurance through Results' preferred travel agent or your own travel agent.

6. RIGHT OF REFUSAL

Results reserves the right to refuse any applicant who does not meet the program eligibility requirements, or any application not deemed to be appropriate and in the general interests of the program.

7. VISA APPLICATION SERVICE

Results does not accept any liability for any loss or damage to documents, including passports, in connection with any visa or passport applications.

8. HEALTH AND IMMIGRATION

You are responsible for your travel arrangements including all exit, entry and health clearances as well as other documents required by law or regulation of the various countries you visit or transit. Results and/or its preferred travel agent are not responsible for any advice given on passport, visa or health issues. If you fail to comply with any such requirements Results will not be liable for any loss or expense suffered by you.

9. RESPONSIBILITIES

Results is responsible for making all necessary reservations with the suppliers or operators offering the services purchased by you. Results itself is not a carrier, tour operator or hotelier and does not own aircrafts, hotels or coaches. Reputable operators supply the services organized by Results on their own terms and conditions. All reservations and bookings with Results are subject to the terms and conditions of the individual service providers. Results does not accept any responsibilities of whatever nature for acts, omissions or defaults whether negligent or otherwise of those operators providing services in connection with your WHP, working or not. Results does not accept

liability in contract or in tort for any damage, injury, loss, additional expenses, delay or inconvenience caused directly or indirectly by acts of God or other events which are beyond its control, or which are preventable by reasonable diligence on part of Results including but not limited to war, civil disturbance, force majeure, fire, floods, unusually severe weather conditions, acts of government or any other authorities, accidents to or failure of equipment or machinery or industrial action. Results will not be liable for any loss or damage sustained due to delays or inconvenience that might be experienced during your WHP, working or not. Results reserves the right to cancel or change any service without notice at any time. In the event of cancellation or change Results will offer you alternative arrangements if any are available or, if alternative arrangements are not available or are reasonably unacceptable to you, Results will refund that part of the monies paid which relates to the part of the service that has been cancelled or changed. Apart from that refund and subject to any statutory provisions to the contrary, Results will not be liable for any loss.

10. CONSUMER CLAIMS

If you experience any difficulties while you are away, you should attempt to rectify these immediately with the applicable supplier. If you can't resolve any issues in this way and you wish to lodge a claim on your return, you must do this in writing with full supporting documentation within 30 days of your return. This claim must be submitted to Results PO Box 3266, Success, Western Australia, 6964. Results will forward your claim to the supplier on your behalf but cannot be held responsible for delays or the outcome in this case. Results expressly reserves the right to change its general terms and conditions without notice at any time. This version, dated June 2005, supersedes all previous versions, however, only the appropriate latest version will form the basis for any past, present or future claims.

With my signature I, _____ confirm that I have read, accepted and agreed to be irrevocably bound by the above and future terms and conditions.