





PREPARING YOUR AU PAIR APPLICATION

Dear Au Pair candidate,

We have developed this checklist to help you during the application process. Please read through our Au Pair in New Zealand brochure or our website (www.aupairlink.co.nz) to make sure you understand the programme you will be on and learn more about being an Au Pair in New Zealand.

To apply you will need to submit the following documents:

- A copy of your passport (must be valid for 6 months from your departure date)
- A copy of your full driver's license
- A copy of your police record

Before we can begin the matching process we also need you to complete and send:

APPLICATION STEP	NOTES	DONE
Your completed application form	Please complete all required pages. All submitted application forms should be filled in electronically. Make sure that all the information you provide is accurate and honest.	
2. Your "Dear Host Family" letter	This is a letter to 'advertise' yourself to potential Host Families. It should be typed or neatly hand-written and be at least a page in length. Topics to write about include who you are (your family/friends), where you are from, your hobbies/interests, your childcare experience and why you want to be an Au Pair in New Zealand.	
3. 5-10 photos of yourself interacting with children, friends and family	Add some quality photos of yourself that show your personality, the way you interact with children, your hobbies - all about you!	
4. Organise for your chosen referees to complete your Childcare Reference (x2) and Character Reference (x1 required, however you may submit multiple references)	Please ask two people whose children you have cared for to fill in the Childcare Reference section of the application. The Character Reference forms must be completed by someone who knows you well, for example a teacher or employer. Relatives or family members are not valid references and all references must be in English or translated.	
5. Take your medical report to your doctor to be completed and signed	Print off the Medical Form and take it to your doctor to be filled in. Make sure it is stampled and signed before you submit it to us.	

Please note: You will also need to undertake an interview with either a partner agency reprsentative or an Au Pair Link representative. As soon as we have received your full application form, you will enter the matching pool and be available for potential Host Families to contact you.

If you do have any questions regarding the application process, please contact our team on aupair@aupairlink.co.nz.

Kind regards,

The Team at Au Pair Link





GENERAL INFORMATION

Full name		_ E-mail address								
Skype name		Postal address								
City	State	Post Code								
Country			Gender	Mal	е	Female				
Your nationality	What country do you currently live in?									
Date of birth	How di	d you hear about	nsś							
Mobile phone number		Home phone nur	mber							
Work phone number		Best time to call	Afterno	oon	Evening	Morning				
Emergency contact person		R	elationshi	p						
Emergency phone										
Does your emergency contact sp	oeak English? Y	es No								
What country or countries are you	u a legal citizen of?									
Country of birth		Do you have d	a valid pa	ssport?	? Yes	No				
Passport expiry date		Country of issue	e							

OUR PROGRAMMES

1. What is your preferred Au Pair programme?

Tick one

AU PAIR 123

Our core Au Pair programme designed for Au Pairs who care for at least 1 child under 5 years of age. Au Pair 123 candidates must have a minimum of 200 hours documented childcare experience. An Au Pair 123 candidate can work between 30 to 45 hours per week and the Placement Term (length of stay) is between 6 to 12 months.

AU PAIR WHIZ

Our Au Pair programme for Au Pairs who have a childcare degree or diploma and 6 months practical experience OR 1 year of full time experience working with children under the age of 5. An Au Pair Whiz will can work between 30 - 45 hours per week and the Placement Term (length of stay) is between 6 - 12 months.

AU PAIR MATE

Our Au Pair programme designed for Au Pairs who care for children over the age of 5 years. An Au Pair Mate can work between 20 to 45 hours per week and the Placement Term is between 9 to 12 months.

AU PAIR ASSIST (only available to candidates applying from within New Zealand)

Our short term mother's help programme for families with at least 1 child under 5 years. An Au Pair Assist can work between 20 to 45 hours per week and the Placement Term (length of stay) is for a maximum of 3 months.

Please tick the box to confirm that you understand our Early Childhood Education curriculum requirements for children under 5 years of age (only applies to Au Pair 123, Au Pair Whiz and Au Pair Assist programmes).





2.	Approximately how long would you like to be an Au Pair in New Zealar	nd for?		
	3 months (only available to candidates applying from within New	Zealand)		
	6 months			
	9 months			
	12 months			
3.	When can you start working as an Au Pair in New Zealand?			
	Earliest job start date			
	Latest job start date	-		
	Do you have any current holidays or trips planned before your urliest job start date as an Au Pair?		Yes	No
lf y	ves, please provide details of the dates you will be away:			
5.	Why do you want to be an Au Pair in New Zealand?			

6. What are your expectations of being an Au Pair and Au Pair Link's programmes?





■ CHILDCARE EXPERIENCE & SKILLS

/	. Inave	experie	ence co	aring for	children	or the	Tollowing	ages:

0 -	- 6 months	6 - 12 months	1 - 2 years	2 - 5 years	5+ years		
		your childcare experi e only person responsible fo					
Hours for	0 - 6 months		Sole charge?	Yes	No		
Hours for	6 - 12 months		Sole charge?	Yes	No		
Hours for	1 - 2 years		Sole charge?	Yes	No		
Hours for	2 - 5 years		Sole charge?	Yes	No		
Hours for	5+ years		Sole charge?	Yes	No		
Total hou	rs of experience bas	sed on information pro	ovided				
8. Do you	have brothers or sis	sters?		Yes	No		
	?. If you have younger brothers or sisters, have you provided care for or babysat them?						
If you ans	f you answered yes to the above question, how many hours of care did you provide?						

10. Please describe your childcare experience for each relevant age group below.

0 - 6 months

● 6 - 12 months

1 - 2 years

2 - 5 years





5+ years

11. Please tick the boxes for each childcare-related skill you have experience in.

0 - 6 months

Bottle feeding Bottle feeding

Changing a nappy Changing a nappy

Crying/settling Crying/settling

Meal preparation Meal preparation

Bathing Feeding solids

Bathing Burping

Caring for ill/sick children Burping

Behaviour management Sleeping

Following a daily routine Caring for ill/sick children

Sleeping

2 - 5 years

6 - 12 months

Providing educational activities for infants

Following a daily routine

1 - 2 years

Bottle feeding Crying/settling

Changing a nappy Meal preparation

Crying/settling Feeding

Meal preparation Bathing

Feeding solids Behaviour management

Bathing Caring for ill/sick children

Sleeping Burping

Providing art and craft activities for children Behaviour management

Caring for ill/sick children Providing music activities for children

Sleeping Providing physical activities for children

Providing educational activities for infants Supporting children with language

development Supporting children with language

Supporting the development of child development independence skills Supporting the development of child

Supporting the development of social skills independence skills

Following a daily routine Following a daily routine

Toilet training Toilet training





5+ years

C		- la ! la la a la		A. A. I.I.S. A.			
201	porting	children	WITH	gerring	ready	/ TOT	school

Preparing school lunches and other meals

Providing educational activities

Supporting school age children with homework

Behaviour management

Providing art and craft activities for children

Providing music activities for children

Providing physical activities for children

Supporting children with language and reading skills

Supporting the development of child independence skills

Supporting the development of social skills

Caring for sick/ill children

12. Rate your childcare skills in the following areas, on a scale of 1 - 5. Please note 1 = Very Low, 5 = Very High

•	Patience with children		
•	Enthusiasm with working with children		
•	Ability to be professional		
•	Ability to be organised		
•	Ability to follow instructions from others		
•	Ability to be independent and show leadership		
•	Ability to be physically active with children		
•	Ability to listen and respond to feedback from others about your performance		
13	. Do you have experience caring for multiple children at the same time?	Yes	No
lf y	ves, please provide details		
14	. Do you have experience caring for special education needs children?	Yes	No
lf y	res, please describe your experience		





15. Are you willing to care for special education needs children?	Yes	No
16. Do you have any childcare or teaching qualifications?	Yes	No
If yes, please provide details		
17. Have you had first aid or CPR training?	Yes	No
If yes, please provide details		

The next section of the application form requires you to provide more information about your previous childcare experience. You have the opportunity to provide details about **four** childcare positions you have held in the past. If you

have held more than four childcare jobs, please provide details of the jobs you held for longest or required the greatest amount of skill in the care you provided.





● CHILDCARE EXPERIENCE - JOB 1 DETAILS

Childcare experience or job type											
Employer name											
Employer email											
Employer phone number											
Do you approve our use of this emp	Oo you approve our use of this employer as a childcare reference?										
Are you related to this employer?								Yes		No	
Job start date											
Average hours per week Please tick the appropriate box.	5	10	15	20	25	30	35	40	45+		
Number and age of children during	your e	employr	nent								
Sole charge position? Sole charge means that you were the only p	erson re	sponsible	for the cl	hild in this	position.			Yes		No	

Please describe a typical daily routine in this job





● CHILDCARE EXPERIENCE - JOB 2 DETAILS

Childcare experience or job type _										
Employer name										
Employer email										
Employer phone number										
Do you approve our use of this emp	Do you approve our use of this employer as a childcare reference?									
Are you related to this employer?										No
Job start date Job end date										
Average hours per week Please tick the appropriate box.	5	10	15	20	25	30	35	40	45+	
Number and age of children during	your e	employr	nent							
Sole charge position?								Yes		No
Sole charge means that you were the only p	erson re	sponsible	for the ch	nild in this	position.					

Please describe a typical daily routine in this job





● CHILDCARE EXPERIENCE - JOB 3 DETAILS

Childcare experience or job type											
Employer name											
Employer email											
Employer phone number											
Do you approve our use of this emp	Do you approve our use of this employer as a childcare reference?										
Are you related to this employer?	Yes		No								
Job start date Job end date											
Average hours per week Please tick the appropriate box.	5	10	15	20	25	30	35	40	45+		
Number and age of children during	your	employr	ment								
Sole charge position? Sole charge means that you were the only p	erson re	sponsible	for the cl	nild in this	position.			Yes		No	

Please describe a typical daily routine in this job





● CHILDCARE EXPERIENCE - JOB 4 DETAILS

Childcare experience or job type _										
Employer name										
Employer email										
Employer phone number										
Do you approve our use of this emp	Yes		No							
Are you related to this employer?								Yes		No
Job start date										
Average hours per week Please tick the appropriate box.	5	10	15	20	25	30	35	40	45+	
Number and age of children during	youre	employr	ment							
Sole charge position? Sole charge means that you were the only p	erson re	sponsible	for the cl	hild in this	position.			Yes		No

Please describe a typical daily routine in this job





PERSONAL INFORMATION AND PREFERENCES

- Please provide a short self-introduction which can accompany your online profile. Include brief details
 about your background, your interests, and an overview of your previous childcare experience. Your
 profile should be a maximum of 200 words.
- In addition, we will also require a "Dear Host Family" letter to be read by prospective Host Families during the matching process. The letter should tell the family about who you are and why they should choose you as their Au Pair. Topics to write about include your family and friends, where you are from, your interests and hobbies, your childcare experience and why you want to be an Au Pair in New Zealand. Your "Dear Host Family" letter should be a maximum of 1000 words. Your "Dear Host Family" letter should also contain photos of you.

Please attach your profile statement and "Dear Host Family" letter at the end of this application form.

How would your friends or family describe your personality? Please provide approx 200 words on the above topic.

18. What is your native	e language?		_		
19. What other langua	ages do you speak?				
20. How many years h	ave you formally studied E	inglish as a language?			
Never	Less than 1 year	1 - 2 years	2 -	3 years	
3 - 4 years	5 years or more	Native English spe	eaker Ot	her	
Please rate your ability	to speak English				
	Beginner	Intermediate	Advanced	d	
21. What is your religion	on?				
22. Do you practice y	our religion or actively atte	nd religious services?	Ye	eS .	No
If yes, please provide of	details				
	special religious requireme	nts?	Ye	S	No
If yes, please provide of	details				
24. Are you a vegetar	ian?		Ye	·S	No
		re and cook meat for a Hos	t Family and the	eir children	
, , ,			,		
25. Do you have any	other food or dietary restric	ctions	Ye	S	No
If yes, please provide of	details				





26. Have you visited New Zealand before?			
Yes			
No			
I am currently in New Zealand on a Working Holiday vi	sa		
If you have previously visited New Zealand, but <i>not</i> on a Work time in New Zealand	king Holiday visa, please pro	ovide details of	your
27. Have you ever lived overseas before?		Yes	No
If yes, please provide details			
20 Do you currently live with your perents?		Voc	No
28. Do you currently live with your parents? If no, please provide details of your current living situation		Yes	NO
ii no, piease provide details of your corretti living struction			
29. If you answered yes to the previous question, please clarif	Y	V	N.L.
if you have ever lived away from home before		Yes	No
If yes, please provide details			
30. Are you currently in a relationship?		Yes	No
If yes, please provide details		103	110
ii yes, piedse provide derdiis			
31. Do you have any visible tattoos or piercings?		Yes	No
If yes, please provide details			
✓ YOUR HOBBIES AND INTERESTS Please tick the box or boxes which describe your interests or hobbies.			
Outdoors	Animals		

Outdoors Animals

Fitness Skiing/snowboarding

Sports Games

Water sports Collecting

Horse riding Travel





	Writing		Community serv	ices	
	Education		Music		
	Computers		Performing arts		
	Cooking				
32. P	lease describe an	y other interests or hobbies	you have that are not cover	ed in the boxes abov	e.
33. D	o you know how t	o swim?		Yes	No
If yes	, please rate your s	swimming ability below.			
	Beginner	Intermediate	Advanced		
34. D	o you know how t	o cook?		Yes	No
If yes	, please describe y	our cooking experience ar	nd ability.		
Please	tick the appopriate bo	with the following housekee oxes. Note the primary duty of an ies (often relating to the children)	ping duties? Au Pair is to care for the child or chi may also be required by Host Familio	ldren of your Host Family. es outside of your typical c	However childcare
	Vacuuming				
	Washing clothes	S			
	Washing dishes				
	Making children	's beds			
	General tidying	and cleaning			
	Supermarket sho	opping			
	Other				
36 W	Vould vou like to liv	ve in a city or rural location?			
50. V	City	Rural	e Either		
	3117	TOTAL	LITTO		

Arts & crafts





37. Are	e you comfortable liv	ring with the following	g pets or animal	lsś		
	Cats				Yes	No
	Dogs				Yes	No
	Farm animals				Yes	No
	Birds				Yes	No
	Rabbits				Yes	No
38. Are	e there any other co	mmon animals or pet	s that you do no	ot want to live \	with? Yes	No
If yes, p	olease provide detai	ls				
	you smoke? now often do you sm	oke?			Yes	No
, 00, 1	Daily	Every few days	Weekly	Monthly	Hardly ever	

Au Pair Link has a non-smoking policy. You agree to our Terms and Conditions regarding this policy and also agree to never smoke in the presence of children in your care, or on your Host Family's property. Failure to comply with our non-smoking policy may result in your immediate removal from our programme and termination of your agreement with us.

40. After you have been an Au Pair in New Zealand, what do you want to do?

41. What are your career and future life goals?



Comments



■ EDUCATION, QUALIFICATIONS AND WORK HISTORY

42. Have you suc	cessfully gradu	ated from high school?		
Yes	No	I am currently attending high school		
43. Are you curre	ently enrolled in	any form of education, e.g. school or university?	Yes	No
If yes, please prov	vide details			
Please provide details	of any qualfication	ns you have received.		
QUALIFICATION	ON 1			
Qualification type	e			
Name of institutio	n			
Start date		End date		
Are you currently	attending this e	educational institution?	Yes	No
Qualification com	npleted?		Yes	No
Comments				
QUALIFICATION	N 2			
Qualification type	e			
Name of institutio	n			
Start date		End date		
Are you currently	attending this e	educational institution?	Yes	No
Qualification com	npleted?		Yes	No
Comments				
QUALIFICATION	N 3			
Qualification type	e			
Name of institutio	n			
Start date		End date		
Are you currently	attending this e	educational institution?	Yes	No
Qualification com	npleted?		Yes	No





44. Are you	currently	employed?						
No		Yes	If yes, where	are you emp	loyed?			
45. What no	otice perio	od do you ha	ave at work?					
None	9	1 week	2 weeks	3 weeks	4 weeks	2 mont	ns	3 months
→ WORK	HISTORY	,						
JOB 1 DE	TAILS							
Company n	ame			Job typ	e			
Employer no	ıme			Employ	er email			
Employer ph	none num	ber			Is this your curr	ent job?	Yes	No
Start date _			End do	ıte				
Job descript	rion							
● JOB 2 DE	ETAILS							
Company n	ame			Job typ	e			
Employer no	ime			Employ	er email			
Employer ph	none num	ber			Is this your curr	ent job?	Yes	No
Start date _			End do	ıte				
Job descript	ion							
● JOB 3 DE	TAILS							
Employer ph	none num	ber			Is this your curr	ent job?	Yes	No
Start date _			End do	ıte				
Job descript	rion							
DRIVIN	G EXPER	RIENCE						
46. Do you l	nave a cu	urrent and vo	alid full driver's lid	cense?	Yes	No		In progress
If in progress	, please s	specify your	current type of li	cense and the	e date you exp	ect to get	your fu	I license
47. When di	d you red	ceive your fu	Il driver's license	\$				





	None	1 - 3 months	3 - 6 months	6 - 12 m	onths
	1 - 2 years	2 - 3 years	3 years +		
49.	How often do you o	drive a car?			
	Daily	3 - 5 times per week	1 - 2 times per week	Fornight	ly
	Monthly	Never	Other		_
50.	Have you ever had	qualified instructor driving lesso	ns?	Yes	No
lf y	es, please provide de	etails			
51.	What type of car do	you usually drive?	Automatic transmission		
			Manual transmission		
52.	Which side of the ro	ad are you used to driving on?		Left	Right
		riving on the right side of the rooner country on the left side of th		Yes	No
If y	es, please provide de	etails			
54.	Do you have experi	ence driving in the following pla	aces or conditions?		
Cit	У			Yes	No
Mc	otorways			Yes	No
Rui	ral countryside			Yes	No
Sno	DW .			Yes	No
55.	Do you have own c	car for your personal use?		Yes	No
56.	Do you regularly dri	ve with passengers in the car?		Yes	No
57.	Do you have experi	ence driving with children in the	e car?	Yes	No
58.	Have you ever had	a car accident?		Yes	No
	Have you ever bee ence or accident?	n prosecuted or penalised for a	iny driving	Yes	No
60.	Please provide any	additional comments regarding	g your driving experience		
•	MEDICAL AND H	EALTH INFORMATION			
61.	Do you have any a	nimal or pet allergies?		Yes	No
62.	Do you have any fo	ood allergies?		Yes	No
If y	es, please provide de	etails			
63	Do you have any o	ther alleraies?		Yes	No





Typing your name will consitute a valid signature		Date		
Applicant signature		Date		
→ DECLARATION I have read and accepted Au Pair Link's terr supplied as part of my Au Pair Link application. Output Description Description I have read and accepted Au Pair Link's terr supplied as part of my Au Pair Link application. Description Output Description Descripti			e information	Ihave
If yes, please provide details				
CRIMINAL HISTORY 73. Have you ever been convicted of a crim	ne?		Yes	No
If no, please provide details				
71. Are you physically able to care for childr or bending down?	ren, e.g. lifting, carrying,		Yes	No
If yes, please provide details				
70. Do you have any history of physical, emo			Yes	No
nervous disorders, self-harm, depression or al	ny emotional condition?	!	Yes	No
69. Have you ever received treatment or co				
If yes, please provide details			103	140
68. Do you have any diagnosed mental hea	alth problems?		Yes	No
67. Do you take regular medication for any If yes, please provide details	nealin related problems	Ç	Yes	No
	b a githe rale to a large la la gara		Vos	No
66. Have you received any regular medical hospitalised in the last three years?			Yes	No
If yes, please provide details				
65. Do you have any serious conditions, infe reoccuring health problems?	ctious diseases or		Yes	No
Mild	Intermediate	Severe		
64. How severe are your other allergies?				
If yes, please provide details				



