OZMUTESAU PAIR AGENCY

Documents required with your application:

- <u>Two reference letters</u>, written by people who have known you well, preferably from employers, teachers or family friends. Letters from relatives and friends of your own age will **NOT** be accepted. The letters must be in English and the full address, telephone number and status of the referee must be given.
- 2. <u>A medical certificate</u>, from a hospital or a private doctor, stating that you are in normal health. The medical certificate does not have to be in English.
- 3. One passport-sized photograph, showing a happy smiling face.
- 4. <u>A short letter</u> to your prospective host family; starting with "Dear Family" introducing yourself and your family briefly, and saying why you want to work in England as an au pair. The letter must be in English and in your own handwriting. Please write in **BLACK INK** and do **NOT** exceed one page.

Please complete the application form below



OZMUTESAU PAIR AGENCY E-mail: info@ome-a.org.uk

Tel 020 8866 6200 07856 130 501 22 Chapel Lane Pinner HA5 1AZ

<u>APPLICATION FORM</u> For a position as an au pair in England

First Name:		Surname:			
		Mobile No:			
				PHOTO	
Religion: Date of birth:		Nationality:			
Height:		Weight:	•••••		
Brothers and sister	rs: (Give ages)				
Education:		Qualifications:			
Level of spoken Er	nglish: Little / Fair /	Good / Fluent			
Other languages s	poken:				
Occupation:	Father`s	occ.:	. Mother`s occ		
Area preferred: 1	st choice	2 nd choice	3 rd ch	oice	
When available: (/	Approximate date of arrival)	For h	ow long: (Length of	stay)	
Outline your exper	ience with children:				
Age group preferre	ed: Babies (0-1) / T	oddlers (1-3) / Childr	en (3+) / No prefe	erence	
Will you accept:	adult family?	single parent fa	amily ?		
Are you able and v	villing to help with light house	work:			
Can you	a) - swim ?	Do you			
	b) - iron ? c) - drive ?				
	d) - do simple cooking?			ecial diet ?	
Hobbies and intere	ests:				
Name, address an	d telephone number of next of	of kin:			
DECLARATION : I declare tha	at the information given in this fo Agency and I understand the d	rm is true and accurate. I h	nave read the information	on sent to me by OMI	
	I confirm that	I do not have any c	riminal record.		
Signature:		Date:			