



JCR Cultural Exchange Programs
 Postnet Fourways Mall #88,
 Private bag X033, RIVONIA, 2128
 Tel: 0114642975
 Fax 0880114641269 www.jcr.co.za

AU PAIR APPLICATION COVER SHEET

Au Pair First Name		
Au Pair Last Name		
Au Pair Mailing Address		
Home /Work Phone		
Cell Ph / Best Time		
Email Address		

A V #
 Please stick a smiling passport photo here

First Available		<input type="checkbox"/> Male <input type="checkbox"/> Female	Childcare Age Group		English Proficiency	
Last Available		Birth Date				
Country		Age		Exper	Prefer	3 – 4
Passport Number		Driver	<input type="checkbox"/> Yes <input type="checkbox"/> No	Under 2		5 – 6
Exit Airport		Driver Since		2 – 5		7 – 8
Aupair Program		Int'l D L	<input type="checkbox"/> Yes <input type="checkbox"/> No	5 – 10		9 – 10
Weekly Stipend		Smoker	<input type="checkbox"/> Yes <input type="checkbox"/> No	Over 10		Native

Childcare Experience	
Hobbies, Talents and Interests	
Key Qualities and Characteristics	
Comments	

Program Requirements

Original Application Form	<input type="checkbox"/> Yes <input type="checkbox"/> No	School Diploma/Certificates	<input type="checkbox"/> Yes <input type="checkbox"/> No
Smiling Passport Picture	<input type="checkbox"/> Yes <input type="checkbox"/> No	Verified Childcare Reference 1	<input type="checkbox"/> Yes <input type="checkbox"/> No
Au Pair Interview Form	<input type="checkbox"/> Yes <input type="checkbox"/> No	Verified Childcare Reference 2	<input type="checkbox"/> Yes <input type="checkbox"/> No
Letter to Host Family	<input type="checkbox"/> Yes <input type="checkbox"/> No	Personal Reference 1	<input type="checkbox"/> Yes <input type="checkbox"/> No
Picture Collage	<input type="checkbox"/> Yes <input type="checkbox"/> No	Au Pair Agreement Form	<input type="checkbox"/> Yes <input type="checkbox"/> No
Original Physician's Report	<input type="checkbox"/> Yes <input type="checkbox"/> No	Copy of Drivers License	<input type="checkbox"/> Yes <input type="checkbox"/> No
Original Criminal Report	<input type="checkbox"/> Yes <input type="checkbox"/> No	Copy of Passport	<input type="checkbox"/> Yes <input type="checkbox"/> No

Documentation of Under 2 Childcare Experience		Agency Name
<i>I recommend this applicant for participation in the JCR program.</i>		
Rep's Signature		Date

