

You can return your form via email by clicking on the submit email button or by courier or registered post to:  
**JCR Cultural Exchange Programs;**  
**Postnet Fourways Mall #88,**  
**Private Bag X033,**  
**Rivonia, 2128**



## AUPAIR COVER SHEET

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First name

Last Name

Address

Phone Number

Cell Phone #

Email

Insert passport photo in the space above

First Available <input type="text"/>	<input type="checkbox"/> Female	<input type="checkbox"/> Male	Childcare Age Group		
Last Available <input type="text"/>	Birth Date <input type="text"/>		Experience	Prefer	English Proficiency
Country <input type="text"/>	Age <input type="text"/>		<input type="checkbox"/> under 2	<input type="checkbox"/>	<input type="radio"/> 3 - 4
Passport Num <input type="text"/>	Driver <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> 2 - 5 years	<input type="checkbox"/>	<input type="radio"/> 5 - 6
Exit Airport <input type="text"/>	Driver since <input type="text"/>		<input type="checkbox"/> 5 - 10 years	<input type="checkbox"/>	<input type="radio"/> 7 - 8
Please select <input type="text"/>	International D L <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Over 10 years	<input type="checkbox"/>	<input type="radio"/> 9 - 10
Weekly Stipend <input type="text"/>	Smoker <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Special Needs	<input type="checkbox"/>	<input type="radio"/> Native

Childcare Experience

Hobbies, Talents and Interests

Key Qualities and Characteristics

Childcare Schooling and Professional Experience

### Program Requirements

Application Form <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Psychometric Test <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Aupair Agreement <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Passport photo <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Police Clearance Certificate <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Video Training Certificate <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Au pair Interview <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Verified Childcare Reference 1 <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Copy of Drivers License <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Letter to host family <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Verified Childcare Reference 2 <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Copy of Passport <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Picture Collage <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Character Reference <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Foreign Add On Airfare Paid <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Doctor's report <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	School Leaving Certificate <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Insurance upgrade Offered <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Au Pair Check List <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Completion Security Deposit Paid <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>			

Documentation of Under 2 Childcare Experience

***I recommend this applicant for participation in the goAUPAIR program***

Rep's Signature \_\_\_\_\_

Date

**JCR Cultural Exchange**

