



ABLE NANNIES AND CAREGIVERS LTD.

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SALARY OFFERED: _____

LIVE IN: _____ LIVE OUT: _____

EXPECTED START DATE : _____

Revenue Canada Business#: _____

Primary Name this number is in: _____

When did you obtain this number? _____

Date: _____

FAMILY APPLICATION

FAMILY NAME: _____

FIRST NAME: _____ SPOUSE: _____

ADDRESS: _____

CITY: _____ POSTAL CODE: _____

BEST PHONE # _____ ALTERNATE NUMBER: _____

EMAIL: _____

Place of Employment: _____ Occupation: _____

Telephone: _____ Fax: _____

Email: _____

Spouse:

Place of Employment: _____ Occupation: _____

Telephone: _____ Fax: _____

Email: _____

Please describe the type of caregiver you are looking for

Are there any special needs in your home we should be aware of: _____

Please describe the hours of work you would like the caregiver to

work: _____

PAGE TWO:

Tell us about your children:

(If the position is for Elderly Care, please proceed to the next sections)

NAME: _____ NAME: _____
Date of Birth: _____ Date of Birth: _____
Activities Preferred: _____ Activities Preferred: _____

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***ELDERLY CARE CLIENTS:**

NAME OF PERSON TO BE CARED FOR: _____
Date of Birth: _____
Please give details regarding nature of care required: _____

Do you require assistance with lifting: _____ Bathing: _____
Walking: _____

Please give brief description of previous caregiver arrangements: _____

Is there evening care required: _____ if yes, how often: _____
Are you willing to pay extra or give time off in lieu? _____
Are you willing to give any additional holidays? _____
Will you accept a moderate smoker? _____
Do you have any pets? _____ If yes, please describe any care
required: _____
Do you require a driver? _____ Do you supply a car? _____
Do you require a swimmer? _____ Do you have a pool? _____

HOUSEHOLD DUTIES LIKELY TO BE ASSIGNED TO YOUR CAREGIVER:

Do you require your caregiver to prepare meals: _____
Breakfast: _____ Lunch: _____ Dinner: _____
Approximately how often and for whom: _____

Laundry: How often and for whom: _____
Groceries: _____ Vacuuming: _____ Washing
Floors: _____ Bathrooms: _____

Are there any additional duties or responsibilities you would like your caregiver to
perform: _____

If you travel for business or pleasure, is your nanny required to travel with you? _____

If yes, how often? _____ Will your caregiver be responsible for 24 hour
care? _____ If yes, how often? _____

Please give us a brief description of your lifestyle and expectations for you
caregiver: _____

If there is anything further you would like tell us about your position that would be helpful, please let us
know: _____

ACCOMODATION OF CAREGIVER:

Please give a brief description of your accommodation and include square footage:

How many rooms are in your home? _____

How many bedrooms? _____

WHERE DID YOU HEAR OF ABLE NANNIES: _____

**AGREEMENT
BETWEEN
ABLE NANNIES AND CAREGIVERS LTD.
And
EMPLOYER**

Inasmuch the EMPLOYER has requested that ABLE assist them with the placement of a Caregiver

ABLE'S complete fee for services of a live in/out caregiver is \$950.00 plus GST. The full amount is due and payable upon acceptance of the job offer by the caregiver. A deposit of \$200.00 is due and payable upon completion of this application. This deposit includes advertising fees that would be conducted on your behalf. If you choose a caregiver from Able Nannies and Caregivers, this deposit is deducted from the above fee of \$950.00. If you do not choose a caregiver through Able Nannies, this fee is non refundable.

These fees include your placement of a live in or live out caregiver. This a placement fee only.

HRSDC - Service Canada also charges an additional \$1000.00 payable to the Receiver General as a mandatory fee for all LMIA applications, payable directly to HRSDC – this is not an Able Nanny charge.

Should the chosen caregiver fail to take up employment with the EMPLOYER the EMPLOYER is entitled to re choose another applicant. The EMPLOYER understands that this is a replacement contract and that no cash refund will be available should the EMPLOYER choose to cancel or is refused by HRSDC.

Should the chosen caregiver not complete the one year contract, ABLE agrees to replace the caregiver if the employer chooses, after the first 90 days a prorated fee will be charged based on however many months are left on the initial agreement.

The employer is responsible for any cost incurred for a replacement with respect to the immigration lawyer fees if applicable, not to exceed \$200.00. This fee is to include review of your application for purposes of Service Canada. The employer understands that the Able Nannies representatives are not immigration lawyers or consultants and therefore do not give immigration advice.

ABLE will do its best to ensure your caregiver commences employment as quickly as possible. However, ABLE cannot accept any responsibility for Government delays and therefore the EMPLOYER will have no claim whatsoever against ABLE for a delay in commencement of employment by the caregiver. ABLE will if possible, replace a caregiver free of charge if employment is terminated either by the employer or by the caregiver within the first three months of employment, should employment be terminated after three months the guarantee stands as prorated.

e.g. if a caregiver is employed for six months and the employer chooses to hire a replacement then a prorated fee would be charged. Six months credit would then be deducted from a new fee and a new guarantee would stand.

**The EMPLOYER has read and clearly understands this agreement and hereby
acknowledges receipt of a copy of the same.**

Signed in New Westminster, British Columbia this _____ day of _____ in the year 20_____.

ABLE NANNIES REPRESENTATIVE EMPLOYER/EMPLOYER REP
