

Job Description Form/Application Details

Immanuel Agency Inc. Fax: 212-594-4296

Father's Name _____ Mother's Name _____
 Address _____ Cross Streets _____
 Nearest Train No. & or Station _____ or Bus No; _____
 Phone: _____ Fax No. _____ Cellphone _____

Child's Name	Age/DOB	Comments or Specific Needs

Job Description What is the TARGET date you need the employee? _____

1. Duties and Responsibilities

We are employers seeking to hire someone who is a (Please check that applies or what is appropriate for your needs)
 ___ Baby Nurse ___ Nanny ___ Housekeeper ___ Others _____ ___ Live-In- ___ 5 ___ 6 Days ___ Live-Out
 who will perform the following duties which will be mutually agreed upon at the time of hire:

Childcare	Taking children to school, play dates, doctor appointments
Meal preparation	Care of pets? Be Specific _____
Feeding (Children's meals & clean up)	Accompany family on outings
Bathing	Travel with family outside the State like _____
Dressing	Tidy kitchen and playroom
Children's laundry	Iron children's clothes
Keeping children's room tidy	Dust, vacuum children's rooms and bathroom
Making/changing beds (Child's room)	Light housekeeping - if there are hours in the day
Grocery shopping	That do not involve direct childcare and chores
Errand running	such as family laundry, loading and emptying dishwasher, errands, grocery, shopping, ironing, Dinner prep.

What days do you need the employee? _____ Days off? _____
 WORK SCHEDULE –Employee Starts _____ AM to _____ PM Total hours per Week? _____

2. Salary Information: Salary offered for this position is between \$ _____ & \$ _____ per week/year?

The salary will be paid by cash, check or direct deposit ___ WEEKLY ___ BIWEEKLY

3. Vacations and holidays: Paid vacation and holidays:..... ___ 1 WEEK ___ 2 WEEKS

Standard paid holidays given or will be given New Year's Day, Memorial Day, Independence Day, Labor Day, Thanksgiving Day, Christmas Day Others _____

4. Employee Accommodation: Live-in shall have ___ Private ___ Separate Level ___ Bathroom ___ Private ___ Shared

5. Other Benefits: We will or We will NOT be offering health insurance after 90 days of employment..

Signature: We have registered with IMMANUEL AGENCY INC. a licensed employment agency with offices at 630 9th Ave. Suite 405 NY, NY 10036 Phone 212-594-2859 NYC DCA LIC.#1119193 for the purpose of hiring an employee. We represent and warrant above information is true and accurate to the best of our knowledge and that:

1. There have not been any incidents of domestic violence in our family home that have been reported to the police or Department of Social Services.
2. There are NO criminal acts being conducted in or from our home(s)
3. NO one in our family has ever physically/verbally harmed or threatened to physically/verbally harm a caregiver employed by us.
4. There is NO drug or alcohol abuse in the home by any member of the family
5. We agree to provide the employee a written and oral reference for her next employer.
6. We have the financial ability to pay the salary to the employee on a timely basis and provide the benefits as discussed with the Immanuel Agency.
7. We intend to have a written agreement with our employee before she begins employment which has been provided or assisted by Immanuel Agency Inc.

Authorized Parent _____ Date _____