



## Sitter Application

Please make sure all fields are complete. When finished, click "submit" at the top of the form.

Name:    Date of Birth:   
First Middle Last MM/DD/YY

Social Security Number:  Email:

Address:   
Street City State Zip Code

Home Phone:  Cell Phone:

It is important that we be able to contact you about potential jobs and get a quick response.

What is the best way for us to reach you?

Are you Infant & Child CPR certified?  Y  N If yes, give expiration date:

Are you First Aid certified?  Y  N If yes, give expiration date:

Note: If you answered no, you must be willing to obtain certification for Infant & Child CPR and First Aid prior to your first sitting job with Rocket City Sitters.

Have you ever had a background check?  Y  N If yes, give the date:

Note: If you answered no, you must consent to a background check prior to your first sitting job with Rocket City Sitters.

Do you have reliable transportation?  Y  N

Do you have a valid driver's license?  Y  N

Do you have auto insurance?  Y  N

### EXPERIENCE & EDUCATION

Please describe all relevant babysitting and childcare experience, including dates, ages and number of children cared for, and description of services provided (attach additional pages if needed).

Please list any achievements, credentials, or awards, if applicable.

Please list all high schools/colleges attended and degree(s) obtained.

### WORK HISTORY

Please list, starting with the most recent, any jobs held within the past five years (attach additional pages if needed).

Company:  Job Title:

Supervisor name:  Phone number:

Dates of employment: From  to  Can we contact this employer?  Y  N

Reason for job change:

Company:  Job Title:

Supervisor name:  Phone number:

Dates of employment: From  to  Can we contact this employer?  Y  N

Reason for job change:

Company:  Job Title:

Supervisor name:  Phone number:

Dates of employment: From  to  Can we contact this employer?  Y  N

Reason for job change:

Company:  Job Title:

Supervisor name:  Phone number:

Dates of employment: From  to  Can we contact this employer?  Y  N

Reason for job change:

**Please provide us with five references, including three childcare references and two professional or personal (non-family) references.**

|                      |                      |                      |                      |
|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Name                 | Relationship         | Phone Number         | Best Time to Contact |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Name                 | Relationship         | Phone Number         | Best Time to Contact |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Name                 | Relationship         | Phone Number         | Best Time to Contact |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Name                 | Relationship         | Phone Number         | Best Time to Contact |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Name                 | Relationship         | Phone Number         | Best Time to Contact |

**CRIMINAL HISTORY**

Have you ever been arrested?  Y  N

If yes, please list charges, dates, and outcome.

Have you ever been convicted of a crime?  Y  N

If yes, please list charges and dates (specify whether felony or misdemeanor).

**Please describe your availability (days and times).**

When providing childcare in the home, you will encounter numerous situations that you might be uncomfortable with. **In order to best match you with families, please let us know if you would be comfortable in the following situations:**

- |  |                            |                            |
|--|----------------------------|----------------------------|
| Caring for a newborn (0-3 months)?             | <input type="checkbox"/> Y | <input type="checkbox"/> N |
| Caring for an infant (4-24 months)?            | <input type="checkbox"/> Y | <input type="checkbox"/> N |
| Caring for toddlers (2-3 years)?               | <input type="checkbox"/> Y | <input type="checkbox"/> N |
| Caring for young children (4-8 years)?         | <input type="checkbox"/> Y | <input type="checkbox"/> N |
| Caring for older children (9-12 years)?        | <input type="checkbox"/> Y | <input type="checkbox"/> N |
| Caring for teenagers?                          | <input type="checkbox"/> Y | <input type="checkbox"/> N |
| Caring for multiple children at once?          | <input type="checkbox"/> Y | <input type="checkbox"/> N |
| Caring for a special needs child?              | <input type="checkbox"/> Y | <input type="checkbox"/> N |
| Transporting children in your vehicle?         | <input type="checkbox"/> Y | <input type="checkbox"/> N |
| Transporting children in the client's vehicle? | <input type="checkbox"/> Y | <input type="checkbox"/> N |
| Sitting at a home with pets?                   | <input type="checkbox"/> Y | <input type="checkbox"/> N |
| Completing light housework while sitting?      | <input type="checkbox"/> Y | <input type="checkbox"/> N |
| Cooking for your clients' children?            | <input type="checkbox"/> Y | <input type="checkbox"/> N |
| Swimming with your clients' children?          | <input type="checkbox"/> Y | <input type="checkbox"/> N |

When family calls to request a sitter, they like to hear about who will be caring for their children. **Please tell us any further information about yourself that you would like for us to consider or to share with families, such as hobbies and interests.**

**How did you hear about Rocket City Sitters?**