### OPENING DOORS TO THE WORLD SINCE 1980!



## CULTURAL HOMESTAY INTERNATIONAL

- A Non-Profit Educational Exchange Program -

255 WEST END AVENUE, SAN RAFAEL, CA, 94901, USA (415) 259-2114 • TOLL FREE 1-866-528-5152

E-mail: chiaupairops@chinet.org • www.chinet.org/au-pair

# Au Pair Child Care Reference

"OPEN YOURSELF TO THE WORLD, THE WORLD WILL BECOME YOUR HOME"

# CHILD CARE OVER THE AGE OF 2 YEARS OLD

THIS FORM IS TO BE COMPLETED BY A CHILD CARE OR INFANT CARE REFEREE (EMPLOYER). INFANT CARE REFERS TO THE CARE OF CHILDREN UNDER THE AGE OF TWO YEARS OLD.

### RELATIVES MAY NOT COMPLETE THIS FORM.

The person named below has applied to the Au Pair program in the US; please answer the following as honestly and completely as possible. Your answers will be a useful guides to determinate an appropriate placement with an American host family. Please let us know if you have any hesitation with recommending this candidate as a child care provider.

Name of the applicant:							
How do you know the applicant (employer, neighbor, teacher)?							
How long have you known the applicant?							
Has the applicant lived with your family?							
□ Yes □ No							
The applicant has:							
☐ Taken care of my children ☐ Been supervised by me							
☐ Has been working together with me when working with children ☐ Other							

The applicant took care of the cl	nildren from:						
Started (mo/year):/	End (mo/year):	_/ □	Ongoing				
Did the applicant take care of ar	ny children under the	age of 2?					
☐ Yes ☐ No							
Please indicate the name, age of the children the applicant cared for and the total hours:							
Name of chidren (if it's a group please write # of children)	Age of the children when started	Age of the children when stopped	Total number of hours caring for children under the age of two	Total number of hours provided			
Please list 5 of the applicants ma	ain duties:						
Describe any special skills and abilities the applicant showed:							
besting any special similar abilities the applicant showed.							
Diagram of the	and the same about the same			lt			
Please give your opinion of the	applicant's ability to n	andie new situatio	ons and possible stress, cu	iture:			
Are you aware of any circumstances in the applicant's background which would cause concerns when caring directly							
for children?							
Please provide any additional information about the applicant which would be helpful to a prospective family:							
Please rate the applicant's qualities in the following areas: 1= low; 2 =fair; 3=good; 4= excellent; 5= superior							
Love for children	M	aturity	Independence				
Patience	Pı	unctuality	Ability to handle	e emergencies			
Ability to carry out instruction	onsH	onesty	Enthusiasm/Hu	mor			
Name of the reference:							

Profession:						
Address:						
Telephone:	011			Best time to call (your time zone):		
	,		Local number			
Mobile:				Best time to call (your time zone):		
	Country Code	Area Code	Local number			
CHI Au Pair or a Host Family may wish to telephone you to discuss this reference.						
Do you spea	ak English?					
□ Yes	□ No					
IMPORTANT: By clicking the check boxes below, you will be submitting an electronic signature acknowledging accuracy of the provided information, and consequently will be considered valid in lieu of a handwritten signature.						
As the Refere	ee, I			(Referee name) confirm the information provided		
above is true	e and accurate.					
As the CHI A	u Pair Partner Ac	ency I		(Partner Agency name) confirm the		
As the CHI Au Pair Partner Agency, I(Partner Agency name) confirm the information provided above has been verified.						
, 0	p. ovided above	iids beeil ve	,			