

# Village Kids

## Home Based Care

*'The Early Learning Experience for your Child'*

**Educators Application Form** - Please complete and return to Village Kids (Havelock North or Napier)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Email Address: \_\_\_\_\_

Home Phone No: \_\_\_\_\_ Mobile Ph No: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Ethnic Origin: \_\_\_\_\_

How long have you lived in this Community? \_\_\_\_\_

How many people live in your home? *Please further details of people living in your home*

Name	DOB	Relationship	Occupation	Times at Home

Do you care for other children on a regular basis? *If yes, please provide further details*

Name	DOB	Days & Times in your Care

Are you presently employed? \_\_\_\_\_

What was your previous occupation? *Please provide name of employer and when you ceased their employment.*

\_\_\_\_\_

Are you involved in any community groups? *Please provide the groups you are involved in.*

\_\_\_\_\_

Have you worked for any other Home Based Care service? *Please provide details of the service*

\_\_\_\_\_

Do you give us permission to contact them? \_\_\_\_\_

How does your family feel about you caring for other children? \_\_\_\_\_

What is your experience with children? \_\_\_\_\_

Do you have any Early Childcare qualifications or other qualifications? *Please provide details of the qualifications*

Do you have a current First Aid certificate? \_\_\_\_\_

Do you have a current Drivers Licence? \_\_\_\_\_

Do you have any injury or illness that may be aggravated or further contributed to by the tasks of this role?

Are you a smoker? \_\_\_\_\_

Are you prepared to provide a smoke free environment for the children in your care? \_\_\_\_\_

Do you have any pets? *Please provide further details*

Pet	Age	Reaction to Children

What sort of care are you wishing to offer? You may circle more than one.

*Full time, Part time, Emergency, Before/After School, Babies, Under 2's, Over 2's, School Holidays*

Are you prepared to have your home inspected to ensure it meets the MOE Early Childhood Regulations?

Are you prepared to make any alterations required to meet MOE Early Childhood Regulations, at your own cost? \_\_\_\_\_

If successful when are you able to start? \_\_\_\_\_

Have you had a recent Police check done? \_\_\_\_\_

Any further comments you would like to make \_\_\_\_\_

Referees are required. Please list two names, addresses & phone numbers.

Name	Address	Phone No.

*The referees do not need to be related to you and if possible someone who has seen you interacting with children. Information supplied is confidential between Village Kids and the referees.*

**Signed** \_\_\_\_\_ **Date** \_\_\_\_\_