

Name of Applicant _

Return the form to JCR SA Intercultural Exchange Programs (Pty) Ltd, Postnet#88, Private Bag X033, Rivonia, 2128. Fax (011)4642973. Tel (011) 4642975 www.jcr.co.za



AU PAIR CHARACTER REFERENCE

- 1. All references must be translated into English on this form with the original attached.
- 2. We encourage you to provide as many additional references as possible. (photocopy this form)
- 3. Please ask each employer to fill in a separate form.
- 4. Please type or write clearly on this form using black ink.

Relationship to Applicant				
How long have you known the Appl	licant?			
Please indicate the Applicant's abili	ity in the following a	reas:		
Communication skills	î Excellent	í Good	∫ Fair	∫ Poor
Reliability	f Excellent	í Good	∫ Fair	∫ Poor
Work quality	f Excellent	∫ Good	∫ Fair	1 Poor
Maturity	f Excellent	∫ Good	∫ Fair	1 Poor
Friendliness	¹ Excellent	∫ Good	∫ Fair	1 Poor
Manners	¹ Excellent	í Good	∫ Fair	1 Poor
Attitude	¹ Excellent	í Good	∫ Fair	1 Poor
Grooming	¹ Excellent	í Good	∫ Fair	1 Poor
Ability to handle stress	f Excellent	í Good	∫ Fair	∫ Poor
Ability to handle emergencies	f Excellent	í Good	∫ Fair	∫ Poor
Ability to work with others	¹ Excellent	í Good	∫ Fair	1 Poor
Please list any strengths and/or we	aknesses of the App	olicant		
Please describe the Applicant's per	rsonality			
Name of person completing the fore	M(Please print)			
City/State/Country				
Postal code		Relationship to Applicant		
Telephone		Best time to call		
Signature		Date		



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CHILDCARE REFERENCE #1 FORM

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Name of Applicant				
How long have you known th	ne Applicant?			
In what capacity do you kno	w the Applicant? (friend, neight	oor, ?)		
Please note: people related to you form!)	cant? (parent, brother, sister,?) may not provide a mandatory refered the death the Applicant as a childcan	ence but CAN provide an additiona	I reference for you! Copy this	
Approximate Dates of Care	Names / Ages of Children when the supervision began	Outline Responsibilities e.g. bathing, playing, change diapers, help with homework, other activities	Amount of Care Provided Please approximate the number of hours of care you provided	
	1			
	2			
	3			
	4			
	5			
	6			
	7			
experience with children under Describe the Applicant's per	er age two. Please estimate the	number of hours the Applicant	cared for all your children).	
Would you recommend this	Applicant for placement as a	n Au Pair in the United State	es? (Please be specific)	
Any additional comments? _				
Name of Employer				
City/State		Postal code		
Country		Best time to call		
Signature		Date		



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CHILDCARE REFERENCE #2 FORM

- 1. All references must be translated into English on this form with the original attached.
- 2. We encourage you to provide as many additional references as possible. (photocopy this form)
- 3. Please ask each employer to fill in a separate form.
- 4. Please type or write clearly on this form using black ink.

Name of Applicant				
How long have you known the	he Applicant?			
In what capacity do you kno	w the Applicant? (friend, neigh	bor, ?)		
Are you related to the Applic Please note: people related to you form!)	cant? (parent, brother, sister,?) may not provide a mandatory refer	rence but CAN provide an additiona	I reference for you! Copy this	
How long have you employed	ed the Applicant as a childca	re giver? (please list below)		
Approximate Dates of Care	Names / Ages of Children when the supervision began	Outline Responsibilities e.g. bathing, playing, change diapers, help with homework, other activities	Amount of Care Provided Please approximate the number of hours of care you provided	
	1			
	2			
	3			
	4			
	5			
	6			
	7			
	children less than two years of a er age two. Please estimate the sonality:			
Would you recommend this	Applicant for placement as a	an Au Pair in the United State	es? (Please be specific)	
Any additional comments? _				
Name of Employer		Telephone		
Street Address	nt) 			
City/State		Postal code		
Country		Best time to call		
Signature		Date		



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UNDER TWO VERIFICATION

UNDER 2 VERIFICATION

This form is to be filled out by the au pair to verify the amount of experience with each specific age group under two.

Age Group

Age Group	Amount of Hours	Reference N	ame & Phone #'s
0-3 months			
3-6 months			
6-12 months			
12-18 months			
18-24 months			
Print Au Pair Name	Au Pair Signatui	re	Date
Print Representative Name	Representative S	Signature	Date
Agency Name			