

**Which programme are interested on?** You can apply to both

**- Au Pair**

**- Au Pair Plus**

Name & Surname

Region preferred      Town      Suburb      Countryside     

Are you flexible with region?      Yes      No

First date available to start     

Last date available to start     

Last date available to stay in Spain

## Contact Information

Full Address

Email      Mobile number

Skype      Home number

## Personal Information

Passport/ID      Nationality

Date of Birth      Age      Gender      Male      Female

Full driving license?      Yes      No      Date license obtained     

If yes, are you willing to drive in Spain?      Yes      No

Do you have any criminal record?      Yes      No

If YES, please explain

**Are you in good health?**      Yes      No      If NO, please explain

**Any disabilities?**      Yes      No      If YES, please explain

**Any medication?**      Yes      No      If YES, please explain

**Any serious allergies?**      Yes      No      If YES, please explain

**Do you like pets?**      Yes      No      If NO, please explain

**Any special diet?**      Yes      No      If YES, please explain

If you are a vegetarian or vegan, will you be willing to cook meat for the children?      Yes      No

**Do you smoke?**      Yes      No      If YES, how many daily?

If you do smoke would you accept NOT to smoke in the house or in front of the children?      Yes      No

**Your religion**      Practising?      Yes      No      Special occasions

Would you accept a family with another religion?      Yes      No

**Can you swim?**      Yes      No

**Knowledge of first aid?**      Yes      No      **Do you have a first aid certificate?**      Yes      No

Are you able / willing to provide medical help, such as inject insulin?      Yes      No

**Do you have any previous experience in a foreign country?**      Yes      No

**What are your future plans?**

**Do you wish to attend a language course in the host country?**      Yes      No

## Languages Spoken

**How long studied for?**

Fair      Good      Fluent

Fair      Good      Fluent

Fair      Good      Fluent

Fair      Good      Fluent

## Educational Background

Attended school/College

How many years?

Type of graduation

Your current occupation

If you are currently employed what is your profession

Current employer and company, if any

Your position

Employed until / or notice period

## Hobbies & Interests

Writing

Theatre

TV

Animals

Swimming

Running

Cooking

Reading

Cinema

Art

Plants

Skiing

Cycling

Sewing

Piano

Singing

Handcrafts

Nature

Skating

Football

Knitting

Other/s

## Your family

Parent's address (if different)

Parent's phone number

Your father's occupation

Your mother's occupation

Siblings (name & age)

## Childcare Experience

Please, indicate the age groups you have experience with

Newborn

9 - 24 months

2 - 5 years old

5 - 10 years old

Older than 10 years

Do you have experience with children with special needs or handicapped?

Yes

No

If YES, please explain

Any further information that would assist a family in deciding to invite you as their au pair

Please, list details of your childcare experience

**Name & Age  
of children**

**Type of childcare**

**Start /end** (Aprox. dates)  
**Frequency** (How often?)

**Activities**

## Host family preferences

Please, indicate the age groups you would like to care for

Newborn

9 - 24 months

2 - 5 years old

5 - 10 years old

Older than 10 years

Do you think you are capable of taking care of children with special needs?

Yes

No

If YES, please explain

Would you accept a single parent family?

Single mother

Yes

No

Single father

Yes

No

Any other preferences?

## Household experience

Are you willing to do light housework and collaborate like another family member?

Yes

No

Your experience in childcare related duties

Feed a baby with bottle?

Yes

No

Change diapers

Yes

No

Prepare light meals/snacks for children?

Yes

No

Are you willing to prepare meals for the children?

Yes

No

## In case of emergency, please call:

Contact 1:

Name & Surname

Mobile number

Relationship to you

Contact 2:

Name & Surname

Mobile number

Relationship to you

Would you like Club RCI to book a Spanish course in Madrid for you?

If yes, how many weeks?

Yes

No

## Health & Travel Insurance

[CHECK CONDITIONS HERE.](#)

### Non-EU citizens (compulsory)

Private health and accident insurance is **COMPULSORY** for Non-EU citizens. We provide you a special flat rate of 20€/week with Guard me (multirisk).

Number of weeks

### EU citizens (optional)

We recommend EU citizens to get private insurance. We could provide you a multirisk Guard Me at a flat rate of 10€/week. Would you like to get insurance to cover your stay in Spain?

Yes

No

If yes, how many weeks?

# Declaración | Disclaimer

Confirmando que la información dada es veraz y estoy de acuerdo con las condiciones del programa Au Pair in Spain de Club RCI, de las cuales he sido debidamente informado para participar en el programa.

I herewith confirm the given information is true to the best of my knowledge and I agree with the terms of business of Club RCI; I've been properly informed about the conditions to join the Au Pair in Spain programme.

By submitting this form you are agreeing to our [privacy policy](#).

**Name & Surname**

**Passport number**

**Date**

**Signature**

## Marketing preferences

Sign up for our newsletter emails, news, events and special offers.

Sign up to hear more about other work travel opportunities Club RCI offer via email.



## Documents needed

- **Diplomas or certificates**  
of qualifications you may have achieved.
- **Criminal record**
- **Photocopy of passport**
- **Curriculum Vitae**  
in Spanish or English.
- **3 pictures of you**  
Smile!
- **Doctor Certificate**  
proving you are in good health.  
[Download form](#)
- **References**  
2 childcare references forms  
[Download form](#)

Once you've gathered all the documents needed, please submit them to us via email: [spain@clubrci.es](mailto:spain@clubrci.es), including your application form in word/pdf document.

Please, state your full name in the subject field when emailing us.

## Where have you heard from Club RCI?

Google/Other search engine



Other Participant (Name, please)

Others (Please, specify)