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*We are happy to provide this exclusive Nanny Success Kit. This kit contains all of the tools that professional nanny agencies use. Buckingham Nannies, one of the nation's premier nanny agencies, designed these tools to help create a complete hiring process.*

*With this kit - and your instincts - you should be able to find the perfect nanny for your family.*

*We wish you much success.*

*-Steve Lampert, owner*

# FAMILY AND NANNY AGREEMENT

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*This agreement is subject to change upon mutual consent and signature of both parties*

Parent(s) Last Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Parent(s) First Name: \_\_\_\_\_ Cell: \_\_\_\_\_

Parent(s) First Name: \_\_\_\_\_ Cell: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Nanny's Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Child(ren) Gender Date of Birth School Age and Grade

Male  Female DOB: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Male  Female DOB: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Male  Female DOB: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Male  Female DOB: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

## Nanny's Work Schedule:

Monday \_\_\_\_\_ to \_\_\_\_\_

Tuesday \_\_\_\_\_ to \_\_\_\_\_

Wednesday \_\_\_\_\_ to \_\_\_\_\_

Thursday \_\_\_\_\_ to \_\_\_\_\_

Friday \_\_\_\_\_ to \_\_\_\_\_

Saturday \_\_\_\_\_ to \_\_\_\_\_

Sunday \_\_\_\_\_ to \_\_\_\_\_

*Nanny and family agree to make every effort to adhere to the above schedule. Both parties agree to understand and adapt to emergencies if they should occur.*

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## Job Requirements:

- Plan and provide age-appropriate activities (e.g. strolls, reading, games, playground, etc.)
- Read age-appropriate books to the children every day.
- Launder the children's clothing and linens.
- Prepare nutritious meals and snacks for the children (mindful of special dietary needs or allergies.)
- Clean up cooking and eating area after meals.
- Tend to the children's hygiene.
- Bathe the children.
- Clean the children's nursery, bathroom and playroom daily.
- Run child-related errands (e.g., grocery store, clothing store, birthday party gifts, etc.)
- Transport the children when and where needed.
- Plan and carry out play dates.

b.) Who is responsible for housekeeping duties?  Housekeeper  Nanny

If housekeeper, what is the schedule? \_\_\_\_\_

Laundry:  Family's  Household (towels, bed lines, etc.)  Children's How Often? \_\_\_\_\_

Floors:  Sweep  daily  weekly Specify: \_\_\_\_\_

Mop  daily  weekly Specify: \_\_\_\_\_

Vacuum  daily  weekly Specify: \_\_\_\_\_

Kitchen:  Tidy after meals  Empty dishwasher  Clean appliances

Cooking:  Prepare children's meals and snacks

Prepare evening meal for the family

Who will plan meals?  Nanny  Family

Notes regarding Meal Planning: \_\_\_\_\_

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Errands (upon request):  Grocery Store  Dry Cleaning  Pharmacy  Children's clothes shopping

Projects (upon request):  Birthday party planning and helping

Organizing closets cabinets

Bathrooms:  Tub/Shower  Vanity/sink  Toilet

Whose?  Own  All How Often? \_\_\_\_\_

Maintenance:  Take trash out

Schedule/oversee household repairs and maintenance (upon request)

Who is responsible for pet care?  Nanny  Family

If nanny, please describe pet duties: \_\_\_\_\_

## 2.) Family's Expectations of the nanny (*nanny please initial*):

\_\_\_\_\_ To promote physical, emotional, intellectual and social development of the children.

\_\_\_\_\_ Comply as closely as possible with family's preferences regarding child rearing and discipline.

\_\_\_\_\_ Tend to children's personal hygiene, health, welfare and physical safety.

\_\_\_\_\_ Be reasonably flexible regarding emergencies and unexpected changes in the family's schedule

\_\_\_\_\_ Maintain a daily log and or daily communication with family concerning the children.

\_\_\_\_\_ Be responsible, reliable and punctual at the start of the day and for appointments and activities.

\_\_\_\_\_ Have efficient time management of child care tasks and all other related duties.

\_\_\_\_\_ Promote feelings of security and warmth by enjoying daily cuddle, read, and talk time.

\_\_\_\_\_ Read/review any pertinent literature provided by employer in order to promote broader knowledge of child rearing philosophy, education, and child psychology.

\_\_\_\_\_ Actively participate in understanding each child's special problems and interests. Providing solutions to the former and enhancing the latter.

\_\_\_\_\_ Be supportive of the parent-child relationship.

3.) The family will provide for the Nanny (*family please initial*):

\_\_\_\_\_ Access to the children's pediatrician or family physician and teachers for information on children's well being and development.

\_\_\_\_\_ Adequate funds to cover developmentally appropriate games, books, learning, aids and/or outside activities.

\_\_\_\_\_ Meet with Nanny \_\_\_\_\_ times per month to discuss job performance and the events of the past week. (Nanny describes activities of preceding period, plans for upcoming period and any item with which parent's assistance may be needed.)

4.) Nanny's Expectations of Family:

\_\_\_\_\_ Respect the hours, days, and compensation outlined in this agreement.

\_\_\_\_\_ Have regular communication from parents regarding job performance, schedule changes, etc.

\_\_\_\_\_ Support of nanny's authority in setting limits with children.

\_\_\_\_\_ Provide a safe childproofed home.

\_\_\_\_\_ Respect the nanny's privacy outside of the job.

\_\_\_\_\_ Respect the fact that the nanny has a life beyond the job.

5.) Household Information:

a. The nanny may have visitors in the family home.  Yes  No

If yes, 24 hour advance notice must be provided and number of guests should be limited to no more than \_\_\_\_\_ at a time.

b. We would like the nanny to answer the telephone in the following manner:

\_\_\_\_\_

c. We would prefer that the nanny address us by our:

Family name (i.e. Mrs./Mr.)  First names

d. The following areas are off limits to the nanny and children:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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e. Our home is childproofed. Yes No Mostly

f. We expect the nanny to help childproof our home and family will respect her decisions.

Yes No

Comments: \_\_\_\_\_  
\_\_\_\_\_

g. The nanny will receive a set of keys to our house?  Yes No

h. What is the procedure to follow if the nanny is locked out of the house? \_\_\_\_\_  
\_\_\_\_\_

i. The nanny will be expected to set our house alarm?  Yes No

j. Our smoke detectors are located: \_\_\_\_\_  
\_\_\_\_\_

k. Our fire extinguisher is located: \_\_\_\_\_

l. Rules regarding extracurricular activities such as:

- Television: \_\_\_\_\_
- Music: \_\_\_\_\_
- Computer: \_\_\_\_\_
- Electronic Games: \_\_\_\_\_
- Misc.: \_\_\_\_\_

## 6.) Health and Emergencies:

a.)Where are the emergency phone numbers kept? \_\_\_\_\_

b.) What is the emergency escape plan?(attach separate sheet)

c.) Preferred hospital (name and location): \_\_\_\_\_

d.) Where are Emergency Phone numbers and contacts: \_\_\_\_\_

e.) Where are the first aid supplies kept? \_\_\_\_\_

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f.) Should the nanny take the children's temperature when necessary?

Yes  No Thermometer is located: \_\_\_\_\_

g.) Does child(ren) take daily medication?  Yes  No

h.) Written authorization to give medication will be supplied.  Yes  No

Note: Written authorization for the nanny to take the child for medical treatment should be on file with pediatrician and preferred hospital.

i.) Name and phone # of pediatrician: \_\_\_\_\_

j.) Where is the health insurance identification kept? \_\_\_\_\_

## 7.) Live-in Nanny Position (if applicable)

a.) Nanny's quarters are private. Family should not enter unless invited or in case of emergency Agreed?  Yes  No

b.) Artwork is allowed on the walls of the nanny's quarters. Agreed?  Yes  No

c.) The nanny may rearrange the furnishings in the quarters. Agreed?  Yes  No

d.) All food consumed by the nanny will be furnished by the family?  Yes  No

Specially requested items up to \$\_\_\_\_\_ per month will be provided by the family.  
 Yes  No

Comments: \_\_\_\_\_

e.) The nanny is to provide any specialty foods or snacks herself. Agreed?  Yes  No

f.) The nanny will eat her evening meal with:  
 The family  The child(ren)  By her/himself  Often varies

g.) The nanny will eat her evening meal:  Before the parents eat  After the parents eat

h.) Specific food items that the nanny may not consume or bring into the home:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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i.) Television and music rules in the nanny's quarters are: \_\_\_\_\_

j.) The nanny will have a private telephone line in her room.  Yes  No

k.) The telephone and the telephone connection will be paid for by:  Family  Nanny

l.) The nanny will pay for all her personal long distance phone charges:  Yes  No

m.) The nanny will pay the telephone company directly?  Yes  No

n.) Toll call charges will be deducted from the nanny's paycheck.  Yes  No

## Nanny's Compensation:

Gross Salary: \$ \_\_\_\_\_  Per Hour  Per Week  Per Month

Salary will be paid:  Weekly  Bi-Monthly  Monthly

The Nanny's obligation for Social Security/Medicare(7.65 % gross pay) will be withheld from gross salary.

Federal and State (if applicable) income taxes  will  will not be withheld by the family.

*Flextime are the hours an employee works beyond the normal schedule to accommodate the employer's schedule. This can be treated as comp time if agreed to by both parties or can be treated as overtime.*

1.) Flextime will be handled in the following manner:

\_\_\_\_\_  
\_\_\_\_\_

2.) Additional childcare will be compensated as follows:

Per Hour: \$ \_\_\_\_\_ Overnight: \$ \_\_\_\_\_ Weekend: \$ \_\_\_\_\_

Additional children to be cared for: \$ \_\_\_\_\_ per child per  hour  day

3.) Out of town travel with the family: \$ \_\_\_\_\_ per day.

## IV. Benefits:

### 1.) Insurance:

Please check where appropriate:

Health insurance provided by the family. Type: \_\_\_\_\_

Automobile insurance coverage provided by family: Percentage Paid \_\_\_\_\_ %

Nanny's car  Family's Car

In case of an accident, the deductible will be paid by:  Nanny  Family  Both  
\_\_\_\_\_ % Nanny \_\_\_\_\_ % Family

Amount of the deductible \$ \_\_\_\_\_

Homeowner's and Worker's Compensation (if applicable) insurance is in effect.  
(Family will review the policy to see that it covers bodily injury and property damage if it occurs in the home).

Comments: \_\_\_\_\_  
\_\_\_\_\_

### 2.) Vehicle:

Please check where appropriate:

Nanny provides own vehicle with mileage compensated for work related use at the rate of:  
\_\_\_\_\_ cents per mile.

Nanny provides own vehicle and is paid \$ \_\_\_\_\_ monthly by the family toward insurance and upkeep.

Family provides for work-related use only.

Family provides for occasional personal use.

Family provides for personal use with employer's permission.

Family provides for full personal use with a \_\_\_\_\_ mile limit per month.

Comments: \_\_\_\_\_  
\_\_\_\_\_

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### 3.) Meals:

Family will provide all necessary food to prepare nutritious meals, snacks and beverages for nanny and child/ren during normal working hours.

Food items requested by Nanny:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### 4.) Paid Time Off:

a.) Vacation: Family agrees to provide the nanny \_\_\_\_\_ week(s) of paid vacation.

Paid vacation may be taken after \_\_\_\_\_ months of employment.

Other/Comments: \_\_\_\_\_

b.) When the family travels or has personal days and does not need the nanny to work, nanny

will  will not be paid full salary.

c.) Sick days:  Paid  Not paid How many \_\_\_\_\_  Per Month  Per Year

Conditions: \_\_\_\_\_

d.) Personal days:  Paid  Not paid How many: \_\_\_\_\_

Conditions: \_\_\_\_\_

e.) Holidays (Please check where appropriate):

New Years Eve	<input type="checkbox"/> Off	<input type="checkbox"/> Paid	<input type="checkbox"/> Unpaid
New Years Day	<input type="checkbox"/> Off	<input type="checkbox"/> Paid	<input type="checkbox"/> Unpaid
Memorial Day	<input type="checkbox"/> Off	<input type="checkbox"/> Paid	<input type="checkbox"/> Unpaid
4th of July	<input type="checkbox"/> Off	<input type="checkbox"/> Paid	<input type="checkbox"/> Unpaid
Labor Day	<input type="checkbox"/> Off	<input type="checkbox"/> Paid	<input type="checkbox"/> Unpaid
Thanksgiving Day	<input type="checkbox"/> Off	<input type="checkbox"/> Paid	<input type="checkbox"/> Unpaid
Day After Thanksgiving	<input type="checkbox"/> Off	<input type="checkbox"/> Paid	<input type="checkbox"/> Unpaid
Christmas Eve	<input type="checkbox"/> Off	<input type="checkbox"/> Paid	<input type="checkbox"/> Unpaid
Christmas Day	<input type="checkbox"/> Off	<input type="checkbox"/> Paid	<input type="checkbox"/> Unpaid
Other: _____	<input type="checkbox"/> Off	<input type="checkbox"/> Paid	<input type="checkbox"/> Unpaid

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5.) Additional Expenses Family is willing to Pay for: (such as INA membership(tax deductible), conference attendance, health club membership,train pass, nanny support group membership, education, etc.)

Please specify: \_\_\_\_\_  
\_\_\_\_\_

## IV. Typical Daily Schedule:

7:00am \_\_\_\_\_  
8:00am \_\_\_\_\_  
9:00am \_\_\_\_\_  
10:00am \_\_\_\_\_  
11:00am \_\_\_\_\_  
12:00pm \_\_\_\_\_  
1:00pm \_\_\_\_\_  
2:00pm \_\_\_\_\_  
3:00pm \_\_\_\_\_  
4:00pm \_\_\_\_\_  
5:00pm \_\_\_\_\_  
6:00pm \_\_\_\_\_  
7:00pm \_\_\_\_\_  
8:00pm \_\_\_\_\_

## V. Termination/Renewal (nanny initial)

\_\_\_\_\_ Either party may terminate the agreement upon \_\_\_\_\_ days notice.

\_\_\_\_\_ Renewal of the agreement will specify any changes in the salary or changes in the job description or schedule.

\_\_\_\_\_ If the family must terminate the nanny's employment unexpectedly, the nanny will be paid severance pay.  Yes  No

\_\_\_\_\_ If severance will be paid, how much? \$ \_\_\_\_\_

\_\_\_\_\_ At the time of termination, if the nanny has any expenses owed to the family (such as long distances charges) those amounts may be deducted form the nanny's pay.  Yes  No

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There are \_\_\_\_\_ additional pages attached that are part of this agreement.

We have read, discussed and agreed to the aforementioned terms and conditions.

\_\_\_\_\_  
Nanny's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Mother/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Father/Guardian Signature

\_\_\_\_\_  
Date

*Nanny and family should each receive a copy of this agreement.*