

# Enannysource.com *Nanny Success Kit* Family and Nanny Agreement

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

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

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

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

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

This agreement is effective from \_\_\_\_\_ to \_\_\_\_\_

*Start Date agreement will be reviewed*

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

## **I. Commitment to Quality Child Care:**

*(A detailed job description can be attached to this agreement.)*

The nanny agrees to provide consistent high quality child care to meet the child/ren's physical, emotional, social, and intellectual needs based on the family's directives.

Comments:

## **II. Nanny's Work Schedule:**

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

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

Friday \_\_\_\_\_ 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.

## **III. Nanny's Compensation:**

Gross Salary: \$ \_\_\_\_\_ Salary will be paid every: \_\_\_\_\_ (day of the week of date of month)

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.

Net (take home) salary: \$ \_\_\_\_\_

*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.

**Benefits:**

1.) **Insurance:**

*Please check where appropriate:*

\_\_\_ Health insurance provided by the family \_\_\_ Yes \_\_\_ No

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 (the 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. Mileage compensated for work related use at the rate of \_\_\_\_\_ cents per mile.

\_\_\_ Nanny provides. \$ \_\_\_\_\_ 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 or a driving radius of \_\_\_\_\_ miles.

Comments:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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, the nanny \_\_\_ will \_\_\_ will not be paid full salary.

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

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

Personal days: \_\_\_ Paid \_\_\_ Not paid How many \_\_\_\_\_

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

d.) Paid/Unpaid Holidays:

*Please check where appropriate:*

New Years Eve \_\_\_ Off \_\_\_ Paid

New Years Day \_\_\_ Off \_\_\_ Paid

Memorial Day \_\_\_ Off \_\_\_ Paid

4<sup>th</sup> of July \_\_\_ Off \_\_\_ Paid

Labor Day \_\_\_ Off \_\_\_ Paid

Thanksgiving Day \_\_\_ Off \_\_\_ Paid

Day After Thanksgiving \_\_\_ Off \_\_\_ Paid

Christmas Eve \_\_\_ Off \_\_\_ Paid

Christmas Day \_\_\_ Off \_\_\_ Paid

Others: \_\_\_\_\_ \_\_\_ Off \_\_\_ Paid

5.) **Other** (may include INA membership conference attendance, health club membership, train pass, nanny support group membership, continuing education, e.t.c.) \_\_\_\_\_  
\_\_\_\_\_

\_\_\_ We will pay for the nanny's membership with the INA at the appropriate membership rate. (INA membership dues are tax deductible)

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**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 \_\_\_\_\_  
 6:00am \_\_\_\_\_

**V. Termination/Renewal**

\_\_\_ Either party may terminate the agreement upon \_\_\_\_\_ days notice.  
 \_\_\_ Renewal of the agreement will specify any changes in the salary or changes in he 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

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

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

_____	_____
Nanny’s Signature	Date
_____	_____
Mother’s/Guardian’s Signature	Date
_____	_____
Father’s/Guardian Signature	Date

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