



Employer Profile (Caregiver Applications)

Personal Information

Full Name: Last First M.I.

Address: Street Address Apartment/Unit # City Province Postal Code

Phone: Email:

Cell Phone: (Please check the box if texts are accepted) Yes

After hours or Weekend Number: [Used for urgent and priority applications]

Household Information

Please list all members of household: (Check box beside name to indicate who needs care and please state why person needs care) Total number of members in household: (Date of Birth) (Reason for care)

General Inquiry

Have you ever hired a Filipino caregiver through the Temporary Foreign Worker Program? Yes No If yes, when? Please indicate month and year: (month) (year)

Do you have a caregiver now? Yes No

Philippine Recruitment Agency:

Canadian Agency/Agent (optional, if applicable):

Acknowledgement

Printed Name:

Signature (in blue ink): Date: