



Dear Nanny,

Thank you for your interest in the International Nanny Association's Nanny Mentor Program. To ensure the best match possible, please provide us with the following information about you.

Name: _____

Address: _____

City/State: _____ Zip Code: _____

Preferred Contact: _____ Phone: _____

_____ E-mail: _____

Date you joined INA: _____

Please respond the following questions in as much detail as you feel is needed (feel free to use additional paper if necessary).

1) What are you looking to gain from working with an INA nanny mentor?

2) List at least three goals you would like to work on with your mentor.

3) Please summarize your child care background, training and skills.

What length of commitment are you requesting from your mentor?

_____ Less than a month

_____ One month to six months

_____ Six months to a year

_____ A year or more

In participating in the INA Nanny Mentor Program you understand that your mentor is a volunteer and will make every effort to return any contact from you within 24 business hours, but due to the nature of nannying, she may not always be able to do so.

Please forward the completed application via e-mail or regular mail to the INA Membership Services Office. You will be contacted by the Nanny Mentor Chair with your mentor's information once they have confirmed your mentor assignment.

International Nanny Association

Toll Free: 888.878.1477 • Fax: 508.638.6462 • Email: info@nanny.org • Web Site: www.nanny.org