

Sitter Application Form

Please complete one form per person. It is important for us to have as much information as possible for our clients whose homes and pets you will be caring for.

Name _____

Address _____

Suburb _____

Postcode _____

Age _____

Date of Birth _____

Mobile _____

Landline _____

Email address _____

Business ABN number _____

Emergency Contact (someone who is not sitting with you)

Name _____

Relationship to you _____

Mobile _____

Landline _____

Email address _____

Current Employment Details

Are you currently employed? Yes / No / Student / Retired

Current role? _____

How many hours would you be away from the house each day? _____

Do you have a current Drivers Licence? _____

Drivers Licence Number _____

Country/State of Issue _____

Do you have a vehicle? _____

Vehicle Registration No. _____

Are you a Smoker? _____

How many units of alcohol do you drink per week? _____

Are you on any prescribed or street drugs that would affect your job performance?

Please tell us about your previous and/or current relationship with animals? i.e. have you had pets of your own? If so what kind?

Any other information you think maybe relevant to your application, as this is a pet focused service.

Are you happy for the pets to sleep on the bed? _____

Which animals are you prepared to look after? Please note either YES or NO after each type below:

Dogs _____ Rabbits _____ Cats _____

Guinea Pigs _____ Mice _____ Lizards _____

Ferrets _____ Horses _____ Fish _____

Birds _____

Do you have any condition HPS should be aware of that may affect your ability to carry out the requirements of a HPS sitter? _____

Hobbies/Interests _____

Housesitting Preferences

Why are you interested in and suited to becoming a Pet / House / Sitter?

When are you available to start? _____

Dates of non-availability? _____

Preferred Suburbs/Areas i.e. NOR, SOR, the Hills _____

Would you be happy to house share with other sitters? _____

I declare the information on this form is true and correct.

Signature _____

Witness Date _____