

APPLICATION FOR EMPLOYMENT AS DOMESTIC HELPER

PREFERENCES

(Please write 1,2,3 or 4 in order of preference)

REFERENCE NO: TJL 002

- | | |
|----------|----------------------------|
| 4 | Baby/Child Care |
| 3 | Care for Old Age/Bedridden |
| 2 | Cooking |
| 1 | General Housekeeping |



The information and details in this bio data are made available voluntarily and in Strictest confidence by the Applicant herself and is furnished in good health

Name as in Passport: **ROSITA RISNAWATI**
 Permanent address: **KP.Nenggewer Rt 02 Rw 11 Desa.sukakerta
 kec.matalilaku kab.cianjur Jawabarat-
 INDONESIA**

Passport Details

Passport No: _____
 Date of Issue: _____
 Date of Expiry: _____
 Place of Issue: _____

Tel. No: **085759871507**

Date of Birth: **2 april 1982** Age: **35 thn**
 Place of Birth: **cianjur** Religion: **islam**
 Nationality: **Indonesia** Height: **146 cm** Weight: **44 Kg**
 Marital Status: **widowed** *(Single/Married*/Separated/Divorced/Deserted*/Widowed*)*
 *State since when: _____

Husband's Name: _____ Age: _____ Occupation: _____
 Father's Name: **Ayep** Age: **58 thn** Occupation: _____
 Mother's Name: **Iyan** Age: **49 thn** Occupation: _____
 Number of Brothers: **5** Age of Brothers: _____
 Number of Sisters: _____ Age of Sisters: _____

I am number **1** in the family

Who is the breadwinner in your family?

What would you do if you received news that a member of your family has become ill/die:

Return home immediately
 Send Money
 Or What else will you do? _____

PARTICULARS OF CHILDREN

No:	Name:	Age:	Sex:
1	Damar Rudin	13	Men
2	_____	_____	_____
3	_____	_____	_____
4	_____	_____	_____
5	_____	_____	_____

LANGUAGES SPOKEN

- 1 **Arabic**
 2 **INDONESIA**
 3 _____



ENGLISH LANGUAGE FLUENCY

	Poor	Fair	Good	Excellent
Speaking				
Reading				
Writing				
Understanding				

EDUCATIONAL BACKGROUND

	Name of Institution	Year Graduated:
Elementary School:	Sd Sindangkerta	1990-1996
High School:		
Others:		

EMPLOYMENT RECORD

Name of Employer:	Country:	Year		Reason for leaving:
		From:	To:	
Fatmah, abdl karim	3 thn	2002	2005	Quwait
Mr. ahmad	2 thn	2011	2013	Saudi

(The Interviewer should tick[/] "Willing to learn(W)" or "experienced(E)" or "Not Willing(N)" ONLY after receiving the appropriate answer from the Applicant.

	W	E	N
To care for Newborn Baby-up to six months of age.	√		
To care for Baby 6 to 12 months of age.	√		
To care for young children from 1 to 6 years of age.	√		
To care for young children from 6 to 12 years of age.	√		
To care for children over 12 years of age.	√		
To sleep with baby/child at night.	√		
To change nappies.	√		
To wash soiled nappies.	√		
To Wash and Bathe the baby/ child.	√		
To Sterilize and clean feeding bottles.	√		
To Bottle feed babbies up to 12 months of age.	√		
To Prepare Baby's formula feed.	√		
To play with the children.	√		
To Tutor children or help with their homework assignments.	√		
To operate electric washing machine.	√		
To wash the Family personal laundry by hand.	√		
To Iron clothes- including silks/synthetics/cottons/woollens.	√		
To operate the vacuum cleaner.	√		
To operate electric floor polisher.	√		
To Clean and maintain refrigerator/bottle cooler/freezer.	√		
To operate electric oven.	√		
To operate gas/electric cooking range.	√		

	W	E	N
To operate electric/food/sewing machine.	✓		
To look after mentally retarded child/children.	✓		
To look after crippled child/children.	✓		
To look after elderly / invalid parent of the Employer.	✓		
To look after dog/s.			✓
To trim or cut hair.	✓		
To do Midwifery or Home Nursing assignments.	✓		
To render First Aid in an emergency.	✓		
To use the telephone if and when necessary.	✓		
To swim or teach child/children swimming.	✓		
To cook meals.	✓		
To drive a car.	✓		
To go to the market or do shopping for the family.	✓		

	NO	YES
Do you smoke or use tobacco?	✓	
Do you consume alcohol?	✓	
Have you ever taken narcotics?	✓	
Are you left-handed?	✓	
Have you undergone any surgery?	✓	
Have you been sterilised?	✓	
Do you suffer from any serious illness?	✓	
Are you currently under any medication?	✓	
Do you suffer from menstrual discomfort?	✓	

Have you ever suffered from:

Asthma	✓	
Blood Pressure	✓	
Diabetes	✓	
Epilepsy	✓	
Filarial	✓	
Heart Disease	✓	
Malaria	✓	
Mental Illness	✓	
Migraine Headaches	✓	
Sinusitis	✓	
Skin Disease	✓	
T.B.	✓	
Tooth Decay	✓	

	NO	YES
Do you agree to work without off days?		✓
Do you agree to go out with your Employer?		✓
Do you have any friends/relatives in Malaysia?	✓	
Do you promise not to invite friends / relatives without your Employers permission?		✓
Can you say "Sorry" and admit your mistakes when you are in the wrong?		✓
Can you accept scolding from your employer and still maintain a pleasant attitude?		✓
Do you promise not to cry in the presence of your Employer?		✓
Will you be honest and faithful to your Employer?		✓
Will you wear the uniform when working?		✓
If your employer request you to help at his parent's house, will you do so?		✓
Are you afraid to stay home alone in the night?		✓
Are you afraid of dogs?		✓

PLEASE GIVE A PERSONAL NOTE TO YOUT EMPLOYER

(Full signature of the Applicant)

(Countersigned by the interview)

SUMMARY OF EVALUATION DONE BY THE INTERVIEWER

PERSONALITY

a Appearance	<input checked="" type="checkbox"/>	Fair	<input checked="" type="checkbox"/>	Pleasant	<input type="checkbox"/>	Very Pleasant
b Dressing	<input type="checkbox"/>	Shabby	<input type="checkbox"/>	Neat	<input type="checkbox"/>	Very Neat
c Personal Hygiene	<input type="checkbox"/>	Poor	<input type="checkbox"/>	Fair	<input checked="" type="checkbox"/>	Good
d Complexion	<input type="checkbox"/>	Dark	<input type="checkbox"/>	Tanned	<input type="checkbox"/>	Fair

LANGUAGES

a English	<input type="checkbox"/>	Poor	<input checked="" type="checkbox"/>	Little	<input type="checkbox"/>	Fair	<input type="checkbox"/>	Fluent
b Chinese	<input type="checkbox"/>	Poor	<input type="checkbox"/>	Little	<input type="checkbox"/>	Fair	<input type="checkbox"/>	Fluent
c Other	<input checked="" type="checkbox"/>	Poor	<input type="checkbox"/>	Little	<input type="checkbox"/>	Fair	<input type="checkbox"/>	Fluent

SKILLS

<i>Duty</i>	<i>None</i>	<i>Fair</i>	<i>Good</i>	<i>Excellent</i>
A Cooking skills				
1. Indian Food	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Chinese Food	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. Western Food	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
B Baby-care				
1. New Born	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. 6 months – 1 year	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
C Care of Children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D 1. Care of Aged Parent	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Care of Bedridden	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E Others				
1. General Housekeeping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. Washing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. Ironing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Gardening	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Wash Cars	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Care of Dogs	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

REMARKS – by Interviewer

Signature

Name: Rosita Risnawati
 Date: 05 maret 2018