

JHON 003

Full Name: LIDIA LINDA

(FIRST NAME, SURNAME)

CONTACT INFORMATION

Personal Mobile Number:

Contact Person's:

Fb/Messenger:

Marital Status: Single With Live-in Partner
 Divorced Separated

Religion: Christian

Height (cm): 153 Weight (kg): 45

Birth Date: 01-Juli-1991 Age: 32

Place of Birth: Gollu Winno

Nationality: Indonesia

Address: (House No. / Street / Municipality) Gollu Winno, RT 009/RW 005, Kel. Modu Waimaringu, Kota Waikabubak. Kabupaten Sumba Barat

Passport Details: With Renewal
 On Process For Release

Passport No: Place Issued: Validity:

If married/with Live-in Partner;

Husband Name: Age: Occupation:

No. of Children: 1. sintia yasinta solot doni 2. argia tristan geofani
Age of Children: 1. 13 Years Old 2. 6 Years Old

Highest Educational Attainment

Name of School:

Course / Degree:

Year Completed:

Local Work Experience

Name of Employer: Nationality: Indonesia

Date of Employment: Reason of Leave:

Complete Address: Contact No.

Employer's Type of House: Size of House:

No. of Children: Age of Children:

Household Members: Employer's Age:

Job Description (Explain your Duties & Responsibility in the House)



Overseas Work Experience

Name of Employer:		Nationality:	Malaysia
Date of Employment:		Reason of Leave:	
Complete Address:		Contact No.	
Employer's type of house:		Size of House:	
No. of Children:		Age of Children:	
Household Members:		Employer's Age:	

Job Description (Explain your Duties & Responsibility in the House)

Areas of Work (Domestic Work)	Willingness		Experience		Assessment/Observation		
	Yes	No	Yes	No	Poor	Good	Excellent
Housekeeping	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Cooking	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Newborn baby care	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Child care	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Special child care	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Elderly care	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Bedridden care	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Pet care	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Gardening	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>

QUESTIONS

QUESTIONS	YES/NO
Do you know that its your responsibility to finish the 2 year contract?	YES
Are you willing to extend your 2 years contract?	YES
Are you willing to work from Monday to Saturday?	YES
Are you okay to not use your hand phone during working hours?	YES
Do you smoke or drink?	NO
Are you afraid to big dog?	YES

Remarks: She is available for interview anytime.