



PT. RAJASA INTAMA 全隆人才國際仲介公司(印尼)

Indonesia Legal Manpower Supplier & Training Center

電話/TEL : (6221) 29827096 傳真/FAX : 29827098

地址/ADD : JL. Jatinegara Timur No.107F Balimester, Jakarta Timur

Name : SITI ROHM
Nationality : INDONESIAN
Health : FIT
Age : 39 Y.O
Height: : 155 Cm
Weight : 65 Kg
Education : JUNIOR HIGH SCHOOL
Complexion : LIGHT BROWN
Marital Status: : MERRIED
No of Children : 2
Age of Children : 10.2 Y.O

CH9879

INTERVIEW APPRAISAL

	Poor	Fair	Good
Appearance	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Personality	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Common Sense	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Household Chores	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Nursing Infants	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Care Children	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Care Elderly Person	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Care Disabled	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Cooking	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Working Experience	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Spoken Inggris	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Spoken cantonese	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>



COMMENTS:

- 2 Y (2018-2020) in HONGKONG
WORK: CLEANING THE HOUSE, SWEEPING-MOPPING, WASHING-IRONING, DAILY MARKETING &HELP COOKING.GAERDENING

This maid plus point : active, honest, obedient.

PERSONAL DATA

Name : **SITI ROH** Date of birth : **15/09/1986**
Age : **39 Y.O** Place of birth : **SUBANG**
Sex : **FEMALE** Height : **155 Cm**
Religion : **MOSLEM** Weight : **65 Kg**
Current Address : **SUBANG – WEST JAVA**

Marital Status : ☐ Single ☒ Married ☐ Divorced ☐ Widowed
Name of Father : **PASS WAY** Age : **Y.O** Occupation : **-**
Name of Mother : **SAMINA** Age : **70 Y.O** Occupation : **HOUSEWIFE**
No. of brother/sister : **3/2** Your order in family : **3**
Name of spouse : **TARYA** Age : **32 YO** Occupation : **FARMER**
No. of children : **2** Sons : **1** Daughters : **1**

1. Have you ever been treated for any mental disorders? ☐ Yes ☒ No
2. Have you suffered from any serious/prolonged illness? ☐ Yes ☒ No
3. Have you ever had a major surgery? ☐ Yes ☒ No
4. Have you suffered any skin irritation? ☐ Yes ☒ No
5. Do you smoke? ☐ Yes ☒ No
6. Do you consume alcohol? ☐ Yes ☒ No

EDUCATIONAL BACKGROUND

Level	Name of Institute	Year
Elementary		To
Junior High School		To
High School		To

WORKING EXPERIENCE

a) Have you worked overseas before? **YES**
If Yes, where? **IN 1. HONGKONG**
Length of service : 1. From **2022** to **2024** Reasons for Leaving : **FINISH CONTRACT**
Length of service : 2. From **2019** to **2021** Reasons for Leaving : **FINISH CONTRACT**
Name of Employer : **1. MAM PAM** Nationality **1. CHINESE**
Name of Employer : **2.** Nationality **2..**

How many maids were working for the family ? **1 MAID**

b) What experience do you have in taking care of children ? **NO**

Age of Children : NO

c) Who did the cooking ? (1. Employer 2. Myself) MY SELF _____

d) Do you know how to prepare these cuisines ? **CHINESE FOOD**
(1. Chinese 2. Western 3. Indonesia)

e) What kind of language can you speak other than your mother tongue ?

Language	Excellent	Good	Fair	Poor
English		√		
Cantonese			√	
Mandarin				

f) Briefly talk about the responsibilities of a domestic Helper !
CLEANING THE HOUSE, SWEEPING-MOPPING, WASHING-IRONING, DAILY MARKETING & COOKING

g) Explain briefly your reasons for working in Hong Kong ?
TO HELP FAMILY FOR BETTER LIVING

h) Who will take care of your children/family when you are away ?
MY HUSBAND & MOTHER

i) Do you have any family/friend in Hong Kong ? If yes, please identify their name and address.
NO

j) What was the base salary with your previous employer ?

EVALUATION & ANALYSIS FORM

Willing Experience (If experienced, please state level)

1. Nursing new born to six months old infant	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Level :	Poor	<input type="checkbox"/>	Fair	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>
2. Nursing six months to one year old infants	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Level :	Poor	<input type="checkbox"/>	Fair	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>
3. Care for 1 – 5 years old children	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Level :	Poor	<input type="checkbox"/>	Fair	<input type="checkbox"/>	Good	<input type="checkbox"/>
4. Care for over 5 years old children	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Level :	Poor	<input type="checkbox"/>	Fair	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>
5. Caring for metally retarded children	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Level :	Poor	<input type="checkbox"/>	Fair	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>
6. Caring for elderly ?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Level :	Poor	<input type="checkbox"/>	Fair	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>
7. Caring for disabled / bedridden people	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Level :	Poor	<input type="checkbox"/>	Fair	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>
8. Taking care male senior / invalid patient	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Level :	Poor	<input type="checkbox"/>	Fair	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>

GENERAL DUTIES

Willing Experience (If experienced, please state level)

1. Gardening	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Level :	Poor	<input type="checkbox"/>	Fair	<input type="checkbox"/>	Good	<input type="checkbox"/>
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2. Cooking	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Level :	Poor	<input type="checkbox"/>	Fair	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>
3. Washing cars	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Level :	Poor	<input type="checkbox"/>	Fair	<input checked="" type="checkbox"/>	Good	<input type="checkbox"/>
4. Vacuuming	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Level :	Poor	<input type="checkbox"/>	Fair	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>
5. Doing laundry	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Level :	Poor	<input type="checkbox"/>	Fair	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>
6. Ironing	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Level :	Poor	<input type="checkbox"/>	Fair	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>
7. Doing laundry by hand	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Level :	Poor	<input type="checkbox"/>	Fair	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>
8. Sewing clothes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Level :	Poor	<input type="checkbox"/>	Fair	<input type="checkbox"/>	Good	<input type="checkbox"/>
9. Caring of Pets e.g. cats and dogs	<input type="checkbox"/>	<input type="checkbox"/>	Level :	Poor	<input type="checkbox"/>	Fair	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>
10. Making Beds	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Level :	Poor	<input type="checkbox"/>	Fair	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>
11. Cleaning windows, Ceilings and floors	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Level :	Poor	<input type="checkbox"/>	Fair	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>
12. Marketing	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Level :	Poor	<input type="checkbox"/>	Fair	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>
13. Operating electrical appliances	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Level :	Poor	<input type="checkbox"/>	Fair	<input type="checkbox"/>	Good	<input checked="" type="checkbox"/>

PLEASE ANSWER THE FOLLOWING QUESTION

	<i>Yes</i>	<i>No</i>
1. Are you prepared to work with a family of more than six members ?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Are you willing to work for a family with a family which one of the members is an elderly person?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Are you willing to accept the non-working days set up by your employer ?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Are you willing to work on non-working days with compensation ?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. Will you finish the morning chores before going out on your day-off ?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Are you willing to handle/prepare pork ?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7. Can you eat pork ?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8. Are you willing to return home not later than time set by your employer when you go out on your off-day?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9. Do you promise to ask employer's before using the telephone ?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
10. Are you afraid of dogs, others pets ?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11. Do you promise not to invite friends and relatives without employer consent ?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
12. Do you promise not to put on make-up & wear proper attire while working ?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
13. Can you promise not to ask for advance salary from your employer under any circumstances ?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
14. Are you ready to extend your contract after 2 years ?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

I hereby certify that the above information are true and to the best of my knowledge. I understand that any false statement here in made shall be enough for the employment agency to terminate this application.

Name of Applicant : _____