

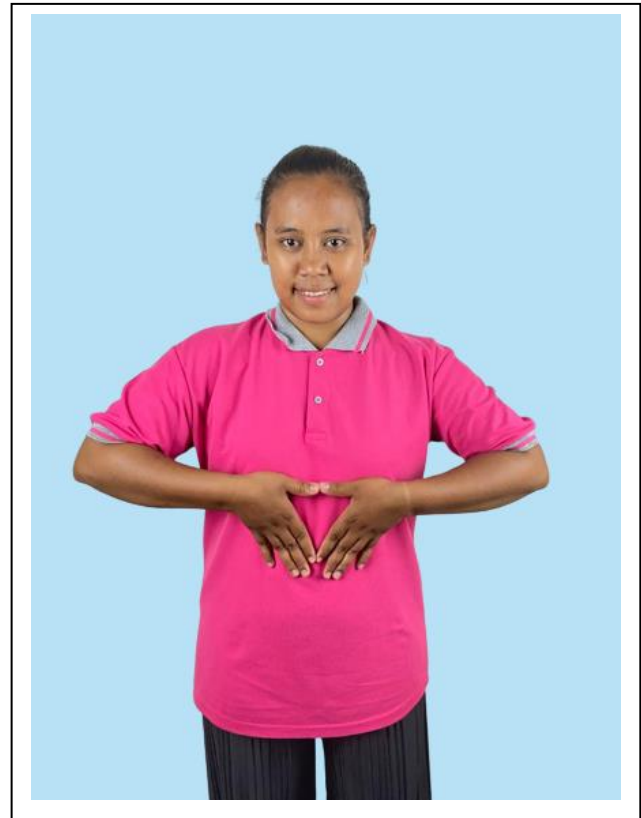
BIO-DATA OF FOREIGN DOMESTIC WORKER (FDW)

*Please ensure that you run through the information within the bio-data as it is an important document to help you select a suitable FDW

(A) PROFILE OF FDW

A1 Personal Information

1. Name: ENDANG FITRIANTI – **SP062**
2. Date of birth: Age:
3. Place of birth: BUMI TINGGI, LAMPUNG
4. Height & weight: cm kg
5. Nationality: INDONESIA
6. Residential address in home country: Dusun IV Bumitinggi Rt/Rw 010/004
Desa Bumi Tinggi Kec. Bumi Agung Kab. Lampung Timur
- be repatriated to: _____
8. Contact number in home country: -
9. Religion: HINDU
10. Education level: JUNIOR HIGH SCHOOL
11. Number of siblings: 3
12. Marital status: SINGLE
13. Father's Name: SLAMAT EFENDI Age: 65YO
14. Mother's Name: MISINAM Age: 58YO
15. Vaccine: 3DOSE (SINOVAC)



A2 Medical History/Dietary Restrictions

14. Allergies (if any): _____

15. Past and existing illnesses (including chronic ailments and illnesses requiring medication):

	YES	NO		YES	NO
i. Mental illness	<input type="checkbox"/>	<input checked="" type="checkbox"/>	vi. Tuberculosis	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i. Epilepsy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	vii. Heart disease	<input type="checkbox"/>	<input checked="" type="checkbox"/>
ii. Asthma	<input type="checkbox"/>	<input checked="" type="checkbox"/>	viii. Malaria	<input type="checkbox"/>	<input checked="" type="checkbox"/>
iii. Diabetes	<input type="checkbox"/>	<input checked="" type="checkbox"/>	ix. Operations	<input type="checkbox"/>	<input checked="" type="checkbox"/>
iv. Hypertension	<input type="checkbox"/>	<input checked="" type="checkbox"/>	x. Others: _____		

16. Physical disabilities: None _____

17. Dietary restrictions: None _____

18. Food handling preferences: No Pork No Beef Others: _____

(B) SKILLS OF FDW

S/No	Areas of Work	Willingness	Experience	Assessment/Observation
		Yes/No	Yes/No If yes, state the no. of years	Please state qualitative observations of FDW and/or rate the FDW (indicate N.A. of no evaluation was done)
1.	Care of infants/children Please specify age range: _____	Yes	Yes	4
2.	Care of elderly	Yes	No	N.A
3.	Care of disabled	Yes	No	N.A
4.	General housework	Yes	Yes	4
5.	Cooking Please specify cuisines:	Yes	Yes	4
6.	Language abilities (spoken) Please specify: _____	X		
7.	Other skills, if any Please specify: _____			

(C) EMPLOYMENT HISTORY OF THE FDW**C1 Employment History Overseas**

Date		Country (including FDW's home country)	Employer	Work Duties	Remarks
From	To				
2016	2018	TAIWAN	CINA	TAKE CARE ELDERLY (AMHA 85 YO) HOUSE KEEPING 3 FLOOR, COOKING	
2018	2019	HONG KONG	BUDHA	TAKE CARE CHILDREN (7 YO) HOUSE KEEPING, COOKING, MARKETING	
2019	2022	HONG KONG	KATOLIK	TAKE CARE ELDERLY (AKONG 83 YO) HOUSE KEEPING, COOKING, MARKETING	

ENDANG FITRIANTI WHOLEBODY PICTURE

