


APPLICANT'S INFORMATION SHEET																																	
Name : IKA RATNA PEBRIANI	Age : 37 YO REFF NO : CI029																																
Place & Date of Birth : JAKARTA, 27-02-1985																																	
Adress : KP SILUMAN RT003 RW018 KEL.MANGUNJAYA KEC.TAMBUN SELATAN KAB.BEKASI, JAWA BARAT																																	
Contact number :																																	
Height : 156 CM	Weight : 65 kg Religion : MOSLEM																																
Marital status : <input checked="" type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced																																	
Husband's Name: AGUNG HERI HARTAJI Occupation : ENTREPRENEUR Age : 41 YO																																	
Father's Name : BASIRAN Occupation : Age : PASSED AWAY																																	
Mother's Name : SRI SUYATMI Occupation : Age : PASSED AWAY																																	
No. Of Brother & Sister : 1 BROTHER & 4 SISTERS Number of(in the family) : 1																																	
No. Of children & Age : 1 BOY (18 YO), 2 DAUGHTERS (13 YO & 11 YO)																																	
Education <input type="checkbox"/> Elementary <input checked="" type="checkbox"/> Secondary <input type="checkbox"/> High school																																	
DESERVES YOUR FAMILY THE BEST	WORK CHOSEN / PREFERENCES																																
	<input type="checkbox"/> 1 General Housekeeping <input type="checkbox"/> 4 Care Of baby And Child																																
	<input type="checkbox"/> 2 Cooking / Memasak <input type="checkbox"/> 3 Care elder people / Bedridden																																
	INTERVIEW APPRAISAL																																
	<table border="1"> <thead> <tr> <th></th> <th>Fair</th> <th>Pleasant</th> <th>Excellent</th> </tr> </thead> <tbody> <tr> <td>Facial Expression</td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Personality</td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Attitude</td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Honestness</td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Spoken English</td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Written English</td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Other Language</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </tbody> </table>		Fair	Pleasant	Excellent	Facial Expression	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Personality	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Attitude	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Honestness	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Spoken English	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written English	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other Language	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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REMARKS	<p>EX JAKARTA BARAT, INDONESIA (2018-2021)</p> <p>GENERAL HOUSE WORK, WASHING, IRONING, GO MARKETING, COOKING, AND TAKE CARE OF CHILD 3 YO & 6 YO</p>																																

OTHER INFORMATION	YES	NO
Do you know how to look after babies?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Do you Know How To Look After Children?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Do You Know How To Look After Retarded Person ?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Do You Know How To Look After Bedridden Person?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Do You Know How To Look After Elderly Person ?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Do you sew ?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Can you do Gardening ?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Do you Smoke ?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Can you Swim ?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Can you Speak and Write English ?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If your Employer Leave you Alone in the House, Are you Afraid ?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Are you Ready to Extend your Contract After Two Year ?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Can you Cook Simple Cooking ?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Are you afraid of dog ?	<input type="checkbox"/>	<input checked="" type="checkbox"/>