


APPLICANT'S INFORMATION SHEET																																
Name : NALIS KARTATI	Age : 37YO REFF NO : <b>SGW126</b>																															
Place & Date of Birth : SUBANG, 12 MEI 1985																																
Address : KRAJAN RT.04 RW.01 DS.TANGGULUN BARAT KEC.KALIJATI KAB.SUBANG																																
Vaccine: 3DOSE (SINOVAC)																																
Height : 145CM	Weight : 48KG Religion : MOSLEM																															
Marital status : <input checked="" type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced																																
Husband's Name: DENI	Occupation : FARMER Age : 31 YEARS																															
Father's Name : ARIPIIN	Occupation : FARMER Age : 56 YEARS																															
Mother's Name : MIMIS	Occupation : FARMER Age : 50 YEARS																															
No. Of Brother & Sister : 1 BROTHER	Number of(in the family) : 1																															
No. Of children & Age : 2 BOY & 1 GRILS ( 18,12,9YEARS)																																
Education <input type="checkbox"/> Elementary <input type="checkbox"/> Secondary <input checked="" type="checkbox"/> High school																																
DESERVES YOUR FAMILY THE BEST	WORK CHOSEN / PREFERENCES																															
	<input checked="" type="checkbox"/> General Housekeeping <input checked="" type="checkbox"/> Care Of baby And Child																															
	<input checked="" type="checkbox"/> Cooking / Memasak <input checked="" type="checkbox"/> 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 type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Personality</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Attitude</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Kindness</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Spoken English</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Written English</td> <td><input 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 type="checkbox"/>	<input type="checkbox"/>	Personality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Attitude	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Kindness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Spoken English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other Language	<input type="checkbox"/>	<input type="checkbox"/>
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REMARKS																																
<b>PENANG, MALAYSIA 3YEARS (2017-2020)</b>																																
CLEANING THE HOUSE , WASHING THE CLOTHES , IRONING THE CLOTH																																
WASHING THE CAR , TAKE CARE CHILDREN ( 3YEARS)																																
<b>JAKARTA 1YEAR (2016-2017)</b>																																
DO GENERAL HOUSEWORK, CLEANING, COOKING AND TAKE																																
CARE OF ELDERY																																

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 checked="" type="checkbox"/>	<input 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 Handle or cut pork ?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Do you Eat Pork?	<input type="checkbox"/>	<input checked="" 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 ?	little	<input 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"/>

# NALIS KARTATI WHOLEBODY PICTURE

