

| | |
|----------------------------|-----|
| For office use only | |
| Agency | FMW |
| Job Requested | DH |
| Video Attached | |

CV House Maid

PERSONAL DETAILS

| | | | | | |
|-------------------------|---------------------------|----------------------|-----------------------|-----------------|-------------------------|
| NIWA | RUTH | BALDOMERO | 36 | F | |
| Surname (family) | First Name (given) | Middle Name | Age | Sex | Mobile Phone No' |
| JULY 15, 1983 | CAMARINES SUR | TAGUIG CITY | 153 | 59 | |
| Date of Birth | Place of Birth: | Home Address: | Height | Weight | |
| FILIPINO | EC7345620 | | MARRIED | CATHOLIC | |
| Nationality | Passport No | Expiry Date | Marital Status | Religion | |

FAMILY

| | | | | | | | | |
|---|------------|-------------------|--------------------|------------|-------------------|--------------------|------------|-------------------|
| DECEASED | N/A | N/A | LUCENA | 58 | HOUSEWIFE | YOSHINORI | 66 | FREELANCER |
| Father Name | Age | Occupation | Mother Name | Age | Occupation | Spouse Name | Age | Occupation |
| JUSTINE | 18 | M | JAZMING | 8 | F | | | |
| Child Name | Age | Sex | Child Name | Age | Sex | Child Name | Age | Sex |
| Who will take care on the children while you are working in Cyprus? | | | | | | MY MOTHER | | |

RELEVANT DOMESTIC HELPER EMPLOYMENT HISTORY (Latest First)

| <u>Employer -1</u> | | | | |
|-----------------------------------|---|-----------------------------|--------------------------------|--|
| LEBANON | DOMESTIC HELPER | JUNE 2009-AUG 2011 | JOUMANA HBOUS | |
| Country | Job Title | Dates | Employer Name | Phone No' |
| Care of new-born up to 1 year old | Yes <input type="checkbox"/> | No <input type="checkbox"/> | | |
| Care of children over 1 year old | Yes <input type="checkbox"/> | No <input type="checkbox"/> | How Many? <input type="text"/> | Age <input type="text"/> |
| Care of disabled | Yes <input type="checkbox"/> | No <input type="checkbox"/> | Age <input type="text"/> | Sex <input type="text"/> WITH ASTHMA |
| Care of Old People | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | Age <input type="text"/> | Sex <input type="text"/> 31-M, 29-M,24-F,58-F,60-M |
| Care of Pets | Yes <input type="checkbox"/> | No <input type="checkbox"/> | Details | <input type="text"/> |
| Duties | 1DH,4BR,3WC,5MEM.DO HOUSEHOLD CHORES SUCH AS CLEANING,COOKING,MARKETING,WASHING,IRONING,CARING OF THE OLD PEOPLE,PREPARE THEIR MEALS. | | | |

| <u>Employer - 2</u> | | | | |
|-----------------------------------|---|-----------------------------|----------------------------------|-------------------------------------|
| BAHRAIN | DOMESTIC HELPER | NOV 2014 - AUG 2016 | JAWAD AL QUASAB | |
| Country | Job Title | DATE | Employer Name | Phone No' |
| Care of new-born up to 1 year old | Yes <input type="checkbox"/> | No <input type="checkbox"/> | | |
| Care of children over 1 year old | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | How Many? <input type="text"/> 1 | Age <input type="text"/> 10 YRS OLD |
| Care of disabled | Yes <input type="checkbox"/> | No <input type="checkbox"/> | Age <input type="text"/> | Sex <input type="text"/> |
| Care of Old People | Yes <input type="checkbox"/> | No <input type="checkbox"/> | Age <input type="text"/> | Sex <input type="text"/> |
| Care of Pets | Yes <input type="checkbox"/> | No <input type="checkbox"/> | Details | <input type="text"/> |
| Duties | 1DH,3BR,2WC,3MEM.DO HOUSEHOLD CHORES SUCH AS CLEANING,COOKING,MARKETING,WASHING,IRONING.TAKING CARE OF TH KID,BRING AND FETCH HIM AT SCHOOL,TUTORING SOMETIMES,CHANGING HIS CLOTHES AND BATHING HIM | | | |

OTHER EMPLOYMENT HISTORY

| | | | | |
|----------------|------------------|---------------------|----------------------|----------------|
| HONGKONG | DOMESTIC HELPER | APR 2017 - APR 2019 | MO KIM KUN | CLEANING HOUSE |
| Country | Job Title | Dates | Employer Name | Duties |
| | | | | |
| | | | | |
| Country | Job Title | Dates | Employer Name | Duties |
| | | | | |
| Country | Job Title | Dates | Employer Name | Duties |

EDUCATIONAL BACKGROUND

| | | | |
|--|---|---|---|
| BANGTUG ELEMENTARY SCHOOL | 1990 - 1996 | TALavera NATIONAL HIGH SCHOOL | 1996 - 2000 |
| Elementry School Name | Dates (YYYY-YYYY) | High School Name | Dates (YYYY-YYYY) |
| WESLEYAN UNIVERSITY | 2000 - 2001 | UNDERGRADUATE | BS ECE |
| College \ university name | Dates (YYYY-YYYY) | Graduate \ Under | Course Name |
| English: <input type="checkbox"/> Poor <input type="checkbox"/> Fair <input type="checkbox"/> Good | Other ? <input type="checkbox"/> Poor <input type="checkbox"/> Fair <input type="checkbox"/> Good | Other ? <input type="checkbox"/> Poor <input type="checkbox"/> Fair <input type="checkbox"/> Good | Other ? <input type="checkbox"/> Poor <input type="checkbox"/> Fair <input type="checkbox"/> Good |

PERSONAL QUESTIONS

| | | | | |
|---|-----|---|----|----------------------------|
| Are you willing to accept the "NO-DAY-OFF" policy of your employer? | YES | / | NO | <input type="checkbox"/> |
| Are you willing to accept and take your "DAY-OFFs" set by your employer? | YES | / | NO | <input type="checkbox"/> |
| Are you prepared NOT to use the telephone or internet without permission or consent of your employer? | YES | / | NO | <input type="checkbox"/> |
| Would you be able to follow the rules and regulations in the house set by your employer? | YES | / | NO | <input type="checkbox"/> |
| Can you promise no visitor allowed without the consent of your employer? | YES | / | NO | <input type="checkbox"/> |
| Do you smoke? (if yes, how many cigarettes a day? <input type="text"/>) | YES | | NO | / <input type="checkbox"/> |
| Do you drink alcoholic beverages? (if yes, light, moderate, or heavy? <input type="text"/>) | YES | | NO | / <input type="checkbox"/> |
| Have you experienced taking drugs? (if yes, please specify <input type="text"/>) | YES | | NO | / <input type="checkbox"/> |
| Are you under medication? (if yes, please specify <input type="text"/>) | YES | | NO | / <input type="checkbox"/> |
| Do you have disabilities/sickness? (if yes, please specify <input type="text"/>) | YES | | NO | / <input type="checkbox"/> |
| Have you suffered from serious illness? (if yes, please specify <input type="text"/>) | YES | | NO | / <input type="checkbox"/> |
| Any operations for the last year? (if yes, please specify <input type="text"/>) | YES | | NO | / <input type="checkbox"/> |
| Do you suffer from any form of allergy? (if yes, please specify <input type="text"/>) | YES | | NO | / <input type="checkbox"/> |
| Do you wear glasses while working? (if yes, please specify <input type="text"/>) | YES | | NO | / <input type="checkbox"/> |
| Are you afraid of dogs, cats or other pets? (if yes, please specify <input type="text"/>) | YES | | NO | / <input type="checkbox"/> |
| Would you be willing and/or able to handle taking care of pets? | YES | / | NO | <input type="checkbox"/> |
| Can you promise to dress properly and without make-up and perfume while working? | YES | / | NO | <input type="checkbox"/> |
| Can you promise to be good to your employer and or/ any member(s) of his family? | YES | / | NO | <input type="checkbox"/> |
| Can you swim? | YES | | NO | / <input type="checkbox"/> |
| Can you drive vehicle? | YES | / | NO | <input type="checkbox"/> |
| Do you promise NOT take any salary advances from your employer? | YES | / | NO | <input type="checkbox"/> |
| Can you promise to keep your personal hygiene and take a bath before sleep? | YES | / | NO | <input type="checkbox"/> |
| Are you willing to eat Cypriot/ Western or any dishes same as your employer? | YES | / | NO | <input type="checkbox"/> |
| Can you promise not to touch anything that is not yours, in your employer's house or another place? | YES | / | NO | <input type="checkbox"/> |
| Can you promise to report immediately and honestly something that you might have found? | YES | / | NO | <input type="checkbox"/> |

CAN YOU HANDLE THE FOLLOWING? (PLEASE TICK YOUR ANSWERS BELOW)

| ELECTRICAL HOME APPLIANCES | | | | HOUSEHOLD CHORES | | | | BABY / PEDIATRIC CARE | | | |
|----------------------------|-----|---|----|--------------------------|-----|---|----|-----------------------|-----|---|----|
| Washing Machine | Yes | / | No | Cleaning | Yes | / | No | Bathing | Yes | / | No |
| Rice Cooker | Yes | / | No | Washing | Yes | / | No | Dressing | Yes | / | No |
| Dish Drainer | Yes | / | No | Ironing | Yes | / | No | Diapers | Yes | / | No |
| Vacuum Cleaner | Yes | / | No | Cooking | Yes | / | No | Feeding | Yes | / | No |
| Floor Polisher | Yes | / | No | Gardening | Yes | / | No | Nurturing | Yes | / | No |
| Microwave Oven | Yes | / | No | Car Washing | Yes | / | No | Bedtime | Yes | / | No |
| Oven toaster | Yes | / | No | Marketing | Yes | / | No | Baby Massage | Yes | / | No |
| Electric Iron | Yes | / | No | Mopping floor | Yes | / | No | Sterilize Bottle | Yes | / | No |
| BEDRIDDEN CASES CARE | | | | GERIATRIC \ INVALID CARE | | | | CHILD/INFANT CARE | | | |
| Bed Bath | Yes | / | No | Bathing | Yes | / | No | Bathing | Yes | / | No |
| Check Sugar | Yes | / | No | Dressing | Yes | / | No | Dressing | Yes | / | No |
| Diapers | Yes | / | No | Diapers | Yes | / | No | Diapers | Yes | / | No |
| Tube Feeding | Yes | / | No | Oral Feeding | Yes | / | No | Oral Feeding | Yes | / | No |
| Gastric Tube (NGT) | Yes | / | No | Nurturing | Yes | / | No | Nurturing | Yes | / | No |
| Body Massaging | Yes | / | No | Baby Massage | Yes | / | No | Bedtime | Yes | / | No |
| Carry to wheel chair | Yes | / | No | Take for walk | Yes | / | No | Take for walk | Yes | / | No |
| Take Blood Pressure | Yes | / | No | Blood Pressure | Yes | / | No | Tutoring | Yes | / | No |

ADDITIONAL PERSONAL QUESTIONS (please answer them with all honesty)

| | |
|---|---|
| Why do you want to work abroad? | TO EARN MONEY FOR MY CHILDREN |
| In your opinion, what are the real qualities of house maid (or caregivers / caretakers)? | RESPONSIBLE, HARDWORKING, AND PASSIONATE |
| What foreign dishes can you cook (Chinese, Japanese, Italian, Western, Others)? | I CAN COOK FILIPINO DISH, CHINESE DISH AND IM WILLING TO LEARN MORE |
| Do you have any friends / relatives in Cyprus? If yes, please give some details about them: | NONE |
| Please write a nice personal note below for your prospective employer to read about you: | HELLO MADAM/SIR I AM AN ENTHUSIASTIC PERSON. I WILL DO MY BEST TO DO MY JOB PROPERLY. |

DECLARATION

I hereby affirm that all information above were true, and that:

*I shall undergo the required medical & trade test exams at my own expense;

*The act of filing of such application & the required travel documents I submitted does not assure an immediate employment but a mere application for overseas employment;

*Upon acceptance by the employer I shall pay the required processing fee;

*If I withdraw my application, I shall pay a withdrawal fee to cover any and all administrative costs, paper works & time consumed;

*In three months after my employment, I shall not hold the respective recruitment agencies liable for any violation of my contract of employment;

*In any mis-declaration or misinterpretation I may have written/stated herein can become a just cause for my immediate dismissal in my employment in the future.

I ALSO HEREBY ATTEST THAT I am aware of the offered salary for the above position as stated above, and that I voluntarily, and on my own volition, will accept the said salary should I be hired.

MARCH 10, 2020

Date Applied

RUTH NIWA

Signature of the Applicant

INTERVIEWER`S REMARKS:

Foreign Agent:

Cyprus Agent:

Other:

