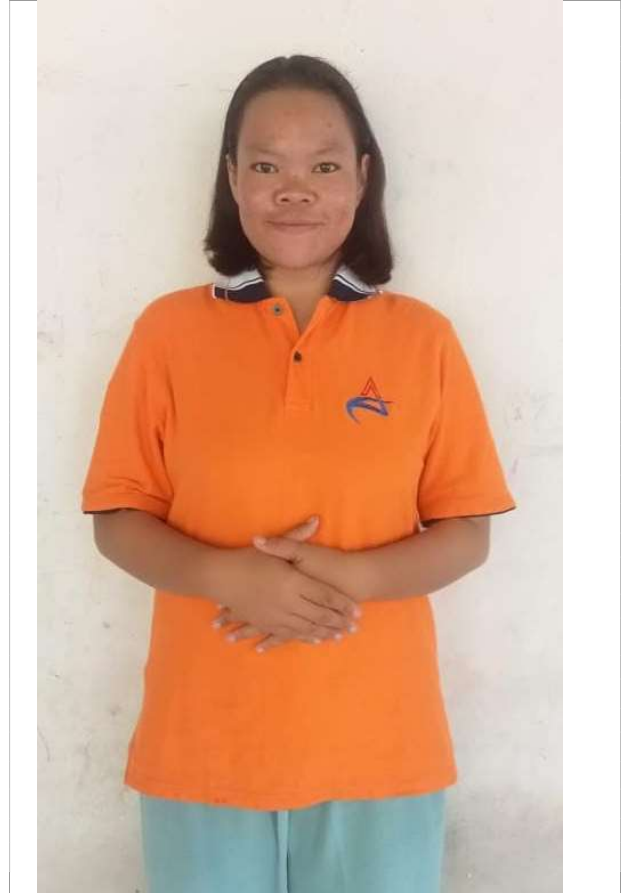


## (A) PROFILE OF FDW

**CODE MDM 266**

### A1 Personal Information

1. Name: KAMIH SURYANIH
2. Date of Birth:       Age:
3. Place of Birth: BEKASI
4. Height & Weight:    c m   k g
5. Nationality: Indonesian
- BEKASI
7. Name of port/ Airport to be repatriated to: Soekarno Hatta
8. Contact number in home country: 085710285054
9. Religion: MOSLEM
10. Educational level: Junior High School
11. Number of Siblings: 3
12. Marital Status: MARRIED
13. Number of children: 1
- Age(s) of children (if any) 7 years old



### A2 Medical History / Dietary Restrictions

14. Allergies (if any): \_\_\_\_\_
15. Past and existing illness (including chronic ailments and illness 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"/> |
| ii. Epilepsy      | <input type="checkbox"/> | <input checked="" type="checkbox"/> | vii. Heart Disease | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| iii. Asthma       | <input type="checkbox"/> | <input checked="" type="checkbox"/> | viii. Malaria      | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| iv. Diabetes      | <input type="checkbox"/> | <input checked="" type="checkbox"/> | ix. Operations     | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| v. Hypertension   | <input type="checkbox"/> | <input checked="" type="checkbox"/> | x. Others: _____   |                          |                                     |
16. Physical disabilities: \_\_\_\_\_
17. Dietary restrictions: \_\_\_\_\_
18. Food handling preferences:  No pork  No beef  Others: \_\_\_\_\_

### A3 Others

19. Preference for rest day: \_\_\_\_\_ Rest day(s) per month.

20. Any other remarks: \_\_\_\_\_

**(B) SKILLS OF FDW**

**B1 Method of Evaluation of Skills**

Please indicate the method(s) used to evaluate the FDW's skills (can tick more than one):

- Based on FDW's declaration, no evaluation/observation by Singapore EA or overseas training centre/EA
- Interviewed by Singapore EA
  - Interviewed via telephone/teleconference
  - Interviewed via videoconference
  - Interviewed in person
  - interviewed in person and also made observation of FDW in the areas of work listed in table

S/No	Areas of Work	Willingness Yes/No	Experience Yes/No If yes, state the no. of years	Assessment/Observation Please state qualitative observations of FDW and/or rate the FDW (indicate N.A. of no evaluation was done) Poor .....Excellent...N.A 1 2 3 4 5 N.A
1.	Care of infants/children Please specify age range: <u>Takecare children 5 years old</u>	Yes	2 Years	4
2.	Care of elderly Takecare Grandma Healthy 63 Years old	Yes	2Years	4
3.	Care of disabled :	No		
4.	General housework : Washing, Ironing, Cleaning, Cooking	Yes	2 Years	4
5.	Cooking Please specify cuisines: indonesian		2 Years	3
6.	Language abilities (spoken) Please specify indonesian	X	2 Years	
7.	Other skills, if any Please specify: _____	-		

- Interviewed by overseas training centre / EA**  
Please state name of foreign training centre / EA: \_\_\_\_\_  
State if the third party is certified (e.g. ISO9001) or audited periodically by the EA: \_\_\_\_\_
- Interviewed via telephone/teleconference
- Interviewed via videoconference
- Interviewed in person
- interviewed in person and also made observation of FDW in the areas of work listed in table

S/No	Areas of Work	Willingness Yes/No	Experience Yes/No If yes, state the no. of years	Assessment/Observation Please state qualitative observations of FDW and/or rate the FDW (indicate N.A. of no evaluation was done) Poor .....Excellent...N.A 1 2 3 4 5 N.A
1.	Care of infants/children Please specify age range: <u>Takecare children 5 years old</u>	Yes	2 Years	4
2.	Care of elderly Takecare Grandma Healthy 63years old	Yes	2 Years	4
3.	Care of disabled :	No		
4.	General housework : Washing, Ironing, Cleaning, Cooking	Yes	2 Years	4
5.	Cooking Please specify cuisines: indonesian		2 Years	3
6.	Language abilities (spoken) Please specify indonesian	X	2 Years	
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				
2020	2022	Indonesian	Indonesian	Takecare children 5 years old, Grandma healthy 63 years old Cooking, Cleaning and House Keeping .	

Previous working experience in Singapore  Yes  No

(The EA is required to obtain the FDW's employment history from MOM and furnish the employer with the employment history of the FDW. The employer may also verify the FDW's employment history in Singapore through WPOL using SingPass

**C3 Feedback from previous employers in Singapore**

Feedback was/was not obtained by the EA from the previous employers. If feedback was obtained (attach testimonial if possible), Please indicate the feedback in the table below:

<b>Feedback</b>	
<b>Employer 1</b>	
<b>Employer 2</b>	

**(D) AVAILABILITY OF FDW TO BE INTERVIEWED BY PROSPECTIVE EMPLOYER**

- FDW is not available for interview
- FDW can be interviewed by phone
- FDW can be interviewed by video-conference
- FDW can be interviewed in person

**(E) OTHER REMARKS**

not affraid of dog

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KAMIH SURYANIH

FDW Name and Signature  
Date: 29/Aug/2024

EA Personnel name and Registration Number  
Date:

I have gone through the 4 page biodata of this FDW and confirm that I would like to employ her

Employer Name and NRIC/Fin No.  
Date:

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**IMPORTANT NOTES FOR EMPLOYERS WHEN USING THE SERVICES OF AN EA**

- Do consider asking for an FDW who is able to communicate in a language you require, and interview her (in person/phone/videoconference) to ensure that she can communicate adequately.
- Do consider requesting for an FDW who has a proven ability to perform the chores you require, for example, performing household chores (especially if she is required to hang laundry from a high-rise unit), cooking and caring for young children or the elderly.
- Do work together with the EA to ensure that a suitable FDW is matched to you according to your needs and requirements.
- You may wish to pay special attention to your prospective FDW's employment history and feedback from the FDW's previous employer(s) before employing her.