

## 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 : KETUT DEWI INDRA BT GEDE SUHEN (AH001)
2. Date of Birth:  Age:
3. Place of Birth: SURABAYA
4. Height & Weight:  cm  kg
5. Nationality: Indonesian
- DS TIRON KEL BANYAAN KEC
6. Residential Address in home country: NGANJUK KABUPATEN  
NGANJUK
7. Name of port/airport to be repatriated to: SURABAYA
8. Contact Number in home country: 081212898524
9. Religion: Muslim
10. Education level: Secondary (7-9)
11. No. of Siblings: 5 [44,41,39,37,29]
12. Marital status: Divorced
13. No. of Children: 2 [13,7]

PHOTO  
(half/full bodied and coloured)

#### A2. Medical History / Dietary Restrictions

14. Allergies(if any): \_\_\_\_\_
15. Past and existing illness(including chronic ailments and illnesses requiring medication):
- |                   | Yes                      | No                                  |                   | Yes                      | No                                  |
|-------------------|--------------------------|-------------------------------------|-------------------|--------------------------|-------------------------------------|
| i. Mental illness | <input type="checkbox"/> | <input checked="" type="checkbox"/> | ii. Tuberculosis  | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| iii. Epilepsy     | <input type="checkbox"/> | <input checked="" type="checkbox"/> | iv. Heart disease | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| v. Asthma         | <input type="checkbox"/> | <input checked="" type="checkbox"/> | vi. Malaria       | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| vii. Diabetes     | <input type="checkbox"/> | <input checked="" type="checkbox"/> | viii. Operation   | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| ix. Hypertension  | <input type="checkbox"/> | <input checked="" type="checkbox"/> | x. Others :       |                          |                                     |
16. Physical Disabilities: No
17. Dietary Restrictions: No
18. Food Handling Preferences:  No Pork  No Beef  Others: \_\_\_\_\_

**A3. Others**

19. Preference for rest day: 2 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
  - 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:			
2	Care of elderly			
3	Care of disabled			
4	General housework			
5	Cooking Please specify cuisines:			
6	Language abilities Please specify: _____			
7	Other skills, if any _____			

Interviewed by overseas training centre / EA

State if the third party is certified (e.g. ISO9001) or audited periodically by the EA: Bee Lee Maid (15C7728)

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. if no evaluation was done) Poor .....Excellent...N.A 1 2 3 4 5 N.A
1	Care of infants/children Please specify age range:	Yes	Yes	3
2	Care of elderly	Yes	Yes	3
3	Care of disabled	Yes	No	3
4	General housework	Yes	Yes	3
5	Cooking Please specify cuisines:	Yes	Yes	3
6	Language abilities Please specify: _____			
7	Other skills, if any _____	No	No	

**(C) EMPLOYMENT HISTORY OF THE FDW**

**C1. Employment History Overseas**

Date		Country(including FDW's home country)	Employer	Work duties	Remarks
From	To				
Aug 2016	Jun 2017	Singapore	CHINESE	Care of elderly, Care of disabled, General housework, Cooking	TAKING CARE AHKONG 90 YO BEDRIDDEN, COOKING AND DO GENERAL HOUSE WORK
Jul 2017	Feb 2018	Singapore	MALAYU	Cooking, Care of infants/children, General housework	DO GENERAL HOUSE WORK, COOKING ABD TAKING CARE 3 CHILDREN 7,9,10 YO

**C2. Employment History in Singapore**

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
Employer 1	AHKONG PASS AWAY
Employer 2	NO PAY SALARY

**(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**

I have never committed any offenses in any country including my country of origin / saya tidak pernah melakukan pelanggaran di negara manapun termasuk negara saya sendiri sebelumnya / hindi ako lumabag sa kahit anong batas ng ibang bansa at ng republika ng pilipinas

ကျွန်မသည်မည်သည့်ပြစ်မှုကိုမှမိမိ၏နိုင်ငံအပါအဝင်တခြားမည်သည့်နိုင်ငံတွင်မှကျူးလွန်ခဲ့ခြင်းမရှိပါ။

I declare that my experiences stated above are true and accurate / saya menyatakan bahwa pengalaman saya tertulis diatas benar / pinahahayag ko na ang lahat ng detalye tungkol sa aking karanasang pang trabaho ay tama

အထက်ဖော်ပြပါကျွန်မ၏လုပ်ငန်းအတွေ့အကြုံများသည်မှန်ကန်တိကျကြောင်းဝန်ခံပါသည်။

I hereby declare that the statement given above is true and accurate / saya memberikan pernyataan tersebut di atas benar dan nyata / pinatutunayan ko na lahat ng impormasyon na aking inilalahad ay totoo

အထက်ဖော်ပြပါအထောက်အထားအချက်အလက်အားလုံးသည်မှန်ကန်တိကျကြောင်းဝန်ခံတော်ပြုပါသည်။

\_\_\_\_\_  
FDW Name and Signature  
Date:

\_\_\_\_\_  
EA Personnel Name: Bee Lee Maid  
EA Registration Number:  
Date:

I have gone through the page bio-data of this FDW and confirm that I would like to employ her

\_\_\_\_\_  
Employer Name and NRIC 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 house hold 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.