

BIO-DATA OF FOREIGN DOMESTIC WORKER (FDW)

*Please ensure that you run through the information within the biodata as it is an important document to help you select a suitable FDW

(A) PROFILE OF FDW

Ref No: PF1605

SUMMARY

Type	Fresh/ Ex-Spore/ Transfer
Salary/	\$550.00
Rest days per month	Weekly
Loan	5 months
Off-in-lieu Allowance	\$ 21.15
Arrival	Anytime
Preference	No preference
Remarks	Available for phone interview



A1 Personal Information

Name	Jasmin R. Turno	Age	32	Nationality	Filipino
Date of Birth	08 May 83	Height	1.57m	Weight	50 kg
Educational Level	High School				
Religion	Christian	Marital Status	Divorced	No. of Children	1
Age	9				
Position in Siblings	2	No of Brothers	-	Age	-
No of Sisters	2	Age	37, 20		
Residential address in home country	Negros Oriental			Place of Birth	Negros Occidental
Name of port/airport to be repatriated to	Manila International Airport			Contact no. in home country	XXXXXXXXXXXX

A2 Medical History/Dietary Restrictions

14. Allergies(if any): Nil known

15. Past and existing illnesses (including chronic ailments and illnesses requiring medication):

	Yes	No		Yes	No
i. Mental illness	<input type="checkbox"/>	<input type="checkbox"/>	vi. Tuberculosis	<input type="checkbox"/>	<input type="checkbox"/>
ii. Epilepsy	<input type="checkbox"/>	<input type="checkbox"/>	vii. Heart disease	<input type="checkbox"/>	<input type="checkbox"/>
iii. Asthma	<input type="checkbox"/>	<input type="checkbox"/>	viii. Malaria	<input type="checkbox"/>	<input type="checkbox"/>
iv. Diabetes	<input type="checkbox"/>	<input type="checkbox"/>	ix. Operations	<input type="checkbox"/>	<input type="checkbox"/>
v. Hypertension	<input type="checkbox"/>	<input type="checkbox"/>	x. Others	<input type="checkbox"/>	<input type="checkbox"/>

16. Physical disabilities: -

17. Dietary restrictions: -

18. Food handling preferences

- <input type="checkbox"/>	No pork	- <input type="checkbox"/>	No beef	- <input type="checkbox"/>	Others: <u>-</u>
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A3 Others

19. Preference for rest day

(See summary section)

20. Any other remarks

(See summary section)

(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
- ☒ Interviewed by Singapore EA or overseas training centre/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	Area of Work	Willing 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) PoorExcellent...N.A 1 2 3 4 5 N.A
1	Care of infants/children Please specify age range: <u>No preference</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <u>2yrs</u> <input type="checkbox"/> No	<div> <input type="checkbox"/> Poor <input type="checkbox"/> Average <input checked="" type="checkbox"/> Excellent <input type="checkbox"/> NA </div> <div> <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> NA </div>
2	Care of elderly	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ <input checked="" type="checkbox"/> No	<div> <input type="checkbox"/> Poor <input type="checkbox"/> Average <input type="checkbox"/> Excellent <input checked="" type="checkbox"/> NA </div> <div> <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> NA </div>
3	Care of disabled	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ <input checked="" type="checkbox"/> No	<div> <input type="checkbox"/> Poor <input type="checkbox"/> Average <input type="checkbox"/> Excellent <input checked="" type="checkbox"/> NA </div> <div> <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> NA </div>
4	General Housework	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <u>2yrs</u> <input type="checkbox"/> No	<div> <input type="checkbox"/> Poor <input type="checkbox"/> Average <input checked="" type="checkbox"/> Excellent <input type="checkbox"/> NA </div> <div> <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> NA </div>
5	Cooking Please specify cuisine: <u>Filipino & Kuwaiti food</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <u>2yrs</u> <input type="checkbox"/> No	<div> <input type="checkbox"/> Poor <input type="checkbox"/> Average <input checked="" type="checkbox"/> Excellent <input type="checkbox"/> NA </div> <div> <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> NA </div>
6	Language abilities (Spoken) Please specify: <u>Tagalog and English</u>	X		<div> <input type="checkbox"/> Poor <input type="checkbox"/> Average <input checked="" type="checkbox"/> Excellent <input type="checkbox"/> NA </div> <div> <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> NA </div>
7	Other skills, if any please specify: <u>simple sewing</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ <input type="checkbox"/> No	<div> <input type="checkbox"/> Poor <input type="checkbox"/> Average <input type="checkbox"/> Excellent <input checked="" type="checkbox"/> NA </div> <div> <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> NA </div>

☐ 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	Area of Work	Willing 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) PoorExcellent...N.A 1 2 3 4 5 N.A
1	Care of infants/children Please specify age range: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ <input type="checkbox"/> No	<div> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Poor Average Excellent NA </div> <div> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 1 2 3 4 5 NA </div>
2	Care of elderly	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ <input type="checkbox"/> No	<div> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Poor Average Excellent NA </div> <div> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 1 2 3 4 5 NA </div>
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5	Cooking Please specify cuisine: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ <input type="checkbox"/> No	<div> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Poor Average Excellent NA </div> <div> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 1 2 3 4 5 NA </div>
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7	Other skills, If any please Specify : _____		<input type="checkbox"/> Yes _____ <input type="checkbox"/> No	<div> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Poor Average Excellent NA </div> <div> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 1 2 3 4 5 NA </div>

(C) Employment History of the FDW**C1 Employment History Overseas**

Date		Country	Employer	Work Duties	Remarks
From	To				
2013-2015		Kuwaiti	Worked for a Kuwaiti family of three (a couple with a four-year-old child). The family lived in a two-storey house.	-Conducted general household chores, i.e. washing, cleaning, ironing, etc; -Took care of the child; & -In-charged of marketing and meal preparations for the family.	

C2 Employment History Singapore

Previous working experience in Singapore ☐ Yes (Work Permit No:) ☐ / ☐ 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:

Feedback	
Employer 1	
Employer 2	

(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

Available for phone interview.

Jasmin R. Turno
FDW Name and Signature
Date: 23 February 2016

Netty Chu Pei Pei (R1108528)
EA Personnel Name and Registration Number
Date: 23 February 2016

I have gone through the 5 pages biodata of this FDW and confirm that I would like to employ her.

Employer Name and NRIC No.
Date:

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.