



AGENSI PEKERJAAN ASAHI (M) SDN. BHD.

NO 38A LORONG SENTOSA 4 TAMAN BAYU TINGGI 41200 KLANG

TEL: 03 3325 5959/ 5858 FAX: 033324 3843 License No. JTKSM 280C

PERSONAL DATA **Reference : SMU 366**

Name	: RISNA PRIYANTI	Date of Birth	: 07-08-1995
Age	: 29 YEARS OLD	Place of Birth	: CIREBON
Sex	: FEMALE	Height / Weight	: 152 CM/ 60 KG
Religion	: MOESLEM	Education	: SENIOR HIGHT SCHOOL
Address	: DS. GERSIK BLOK KAUM KEC. TENGAH TANI, KAB. CIREBON		

Marital Status Single Married Divorced Widowed

Name of Father	: SUNASAH	Age	: PASS WAY	Occupation	:
Name of Mother	: ROKANAH	Age	: 50 Y.O	Occupation	: -
No.of Brother/Sister	: PERSON	Your order in family	:		1
Name of Spouse	: ABDUL ROHMAN	Age	: 29 Y.O	Occupation	:
No. Of Children	: 4 PERSON	Sons	: 2 PERSON	Daughter	: 2 PERSON
		(4 Y.O - 5 Y.O)		(8 Y.O , 2 Y.O)	

- | | | |
|--|---|--|
| 1. Are you afraid of dog and others pets ? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 2. Are you prepared to work for any nationality? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. Are you willing to handle, cut and cook pork? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. Do you feel dizzy when you are in a moving car? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 5. Do you smoke and consume alcohol? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| 6. Have you ever had a major surgery ? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

INTERVIEW APRAISAL :

	Poor	Fair	Good
Apperance & Personality	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Spoken English	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Household chores	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooking	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Care of Newborn Baby	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Care Children	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Care Elderly Person	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Care Disabled	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



WORKING EXPERIENCE :

1. Experience in : JAKARTA
 Name of Employer : MR AYONG
 Period : 2014-2016
 Experience : TAKE CARE NEW BORN BABY, GIVE A BATH , CHANGE DIAPERS, FEEDING CARYING , LULLING, WASH & IRON THE CLOTH AND CLEAN THE HOUSE.

1. Experience in
 Name of Employer
 Period
 Experience