

**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 405**

Name : LENA AGUS DWI JAYANTI Date of Birth : 14 - 08 - 1986  
Age : 38 YEARS OLD Place of Birth : GEDUNG TATAKAN  
Sex : FEMALE Height / Weight : 152 CM / 50 KG  
Religion : MUSLIM Education : SENIOR HIGHT SCHOOL  
Address : Dsn. KALIASIN III, DS. KALISARI RT 012, RW 000, KEC. NATAR. LAMP SELATAN

Marital Status ☐ Single ☒ Married ☐ Divorced ☐ Widowed

Name of Father : WAGIMIN Age : 70 Y.O. Occupation : FARMER  
Name of Mother : SUKAENI Age : PASS WAY Occupation : -  
No. of Brother/Sister : 7 PERSON Your order in family : 6  
Name of Spouse : DWI SAPTA Age : 44 Y.O. Occupation : DRIVER  
KRIDA  
No. Of Children : 3 PERSON Sons : 2 PERSON Daughter : 1 PERSON  
( 10 Y.O, 2 Y.O ) ( 16 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 APPRAISAL :**

	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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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 : LAMPUNG  
Name of Employer : MRS. ANA  
Period : 2021 - 2024  
Experience : TAKE CARE CHILDREN 10 Y.O AND 7 Y.O ( FEEDING, GIVE A BATH, ACCOMPANY THEM )  
CLEAN THE HOUSE, WASH, IRON THE CLOTHES , COOKING.

2. Experience in :  
Name of Employer :  
Period :  
Experience :