

Code 編號 EG 6617

Applicants Information Sheet 申請人資料

Name 姓名	MERYLL GUSTILO OGAHAYON	Age 年齡	29 ROOSTER LEO 雞獅子座
Nationality 國籍	FILIPINO	Date of Birth 出生日期	1993-08-17
Gender 性別	F	Marital Status 婚姻狀況	SOLO
Education 學歷	SENIOR HIGH	Height 身高	150 CM
Religion 宗教	CATHOLIC	Weight 體重	55 KG
In the Family No. 在家排行	1	Son / Age 兒子數目/年齡	/
Brother / Sister 兄弟姊妹	1 / 1	Daughter / Age 女兒數目/年齡	/
Address 地址	PHASE 1 PKG 4 BLK 56 LOT 10 BAGONG SILANG		

Working Experience 工作經驗

Care of Babies	照顧嬰兒	
Care of Toddler	照顧幼兒 (1-3)	✓
Care of Children	照顧小孩 (4-12)	
Care of Elderly	照顧長者	
Care of Disabled	照顧殘疾人士	
Care of Bedridden	照顧卧床人士	
Care of Pets	照顧寵物	
Household Works	家務	✓
Car Washing	洗車	
Gardening	打理花園	
Cooking	烹飪	✓
Driving	駕駛	

Overseas Experience 海外工作經驗

Hong Kong	香港	
Singapore	新加坡	
Taiwan	台灣	
Malaysia	馬來西亞	2 YEARS
Middle East	中東	
Macau	澳門	
Other	其他	
Home Country	原住地	

Language Skills 語言能力

	Learning 學習中	Fair 平	Good 好
國語 Mandarin	_____	_____	_____
廣東話 Cantonese	_____	_____	_____
英語 English	_____	_____	_____✓_____



Remark 備註

MERYLL IS A GREAT CHOICE SINCE SHE ALREADY HAS WORKED IN MALAYSIA FOR 2 YEARS FINISHED CONTRACT FOR 1 EMPLOYER. THERE, SHE SERVED A TYPICAL FAMILY WITH ONE KID WHO WAS 2 YEARS OLD . SHE PERFORMED ALL AROUND HOUSEHOLD CHORES INCLUDING CARING OF PETS, AND COOKING SOME BASIC CHINESE FOOD. SHE IS CONFIDENT THAT WITH HER EXPERIENCE IN MALAYSIA, IT HAD EQUIP HER WELL TO FACE THE WORK EXPECTATIONS OF

Previous Duties 過往工作 1			
Country 工作地點	SARAWAK MALAYSIA		Salary 工資
Duration 工作期間	JULY 8 2018 to JULY 10 2020		No. to Serve 總服務人數
Reason to Leave 離職原因			
FINISHED CONTRACT			

<input type="checkbox"/>	Care of Babies	照顧嬰兒	Mths 月	<input checked="" type="checkbox"/>	Care of Toddler	照顧幼兒 (1-3)	2 YRS	Yrs 歲
<input type="checkbox"/>	Care of Children	照顧小孩 (4-12)	Yrs 歲	<input type="checkbox"/>	Care of Elderly	照顧長者		Yrs 歲
<input type="checkbox"/>	Care of Disabled	照顧殘疾人士	Yrs 歲	<input type="checkbox"/>	Care of Bedridden	照顧卧床人士		
<input checked="" type="checkbox"/>	Care of Pets	照顧寵物		<input checked="" type="checkbox"/>	Household Works	家務		
<input type="checkbox"/>	Car Washing	洗車		<input type="checkbox"/>	Gardening	打理花園		
<input checked="" type="checkbox"/>	Cooking	烹飪		<input type="checkbox"/>	Driving	駕駛		

Previous Duties 過往工作 2			
Country 工作地點			Salary 工資
Duration 工作期間	to		No. to Serve 總服務人數
Reason to Leave 離職原因			

<input type="checkbox"/>	Care of Babies	照顧嬰兒	Mths 月	<input type="checkbox"/>	Care of Toddler	照顧幼兒 (1-3)	Yrs 歲
<input type="checkbox"/>	Care of Children	照顧小孩 (4-12)	Yrs 歲	<input type="checkbox"/>	Care of Elderly	照顧長者	Yrs 歲
<input type="checkbox"/>	Care of Disabled	照顧殘疾人士	Yrs 歲	<input type="checkbox"/>	Care of Bedridden	照顧卧床人士	
<input type="checkbox"/>	Care of Pets	照顧寵物		<input type="checkbox"/>	Household Works	家務	
<input type="checkbox"/>	Car Washing	洗車		<input type="checkbox"/>	Gardening	打理花園	
<input type="checkbox"/>	Cooking	烹飪		<input type="checkbox"/>	Driving	駕駛	

Previous Duties 過往工作 3			
Country 工作地點			Salary 工資
Duration 工作期間	to		No. to Serve 總服務人數
Reason to Leave 離職原因			

<input type="checkbox"/>	Care of Babies	照顧嬰兒	Mths 月	<input type="checkbox"/>	Care of Toddler	照顧幼兒 (1-3)	Yrs 歲
<input type="checkbox"/>	Care of Children	照顧小孩 (4-12)	Yrs 歲	<input type="checkbox"/>	Care of Elderly	照顧長者	Yrs 歲
<input type="checkbox"/>	Care of Disabled	照顧殘疾人士	Yrs 歲	<input type="checkbox"/>	Care of Bedridden	照顧卧床人士	
<input type="checkbox"/>	Care of Pets	照顧寵物		<input type="checkbox"/>	Household Works	家務	
<input type="checkbox"/>	Car Washing	洗車		<input type="checkbox"/>	Gardening	打理花園	
<input type="checkbox"/>	Cooking	烹飪		<input type="checkbox"/>	Driving	駕駛	

Other Question 其他問題		
	Yes 是	No 否
1. Do you eat pork? 你會否食豬肉?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Accept Day-off not on Sunday? 接受假日不在星期日?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Sharing a room with babies / children / elder? 你願意和小孩/嬰兒/長者同房嗎?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Are you afraid of dog or cat? 你會害怕狗或貓?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Do you smoke? 你會抽煙嗎?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6. Do you drink alcohol? 你會喝酒嗎?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7. Have you any prolonged illnesses / undergone surgery? 你有任何長期的疾病/做過手術嗎?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If Yes 如有:		

Declaration by Applicant

I agree and will be responsible for any publication of above information. I hereby confirm that all information and answer give to me is to the best of my knowledge.

"The applicant gives all information with No responsibility holding by our company." "以上資料由申請者提供, 任何法律責任與本公司無關。"