



搞得掂僱傭中心

Get It Done Employment Agency Ltd

Code 編號 : EGA 0082

Personal Particular 個人資料

Nationality 國籍	FILIPINO	
Gender 性別	F	
Age 年齡	40	
Date of Birthday 出生日期	1984	
Height 高度	156.5	CM
weight 體重	65.8	KG
Education 教育程度	SENIOR HIGH	
Marital status 婚姻狀況	SINGLE	
Religion 宗教	CATHOLIC	
Ranking by age 家中排行	4	
No. of brother 兄弟數目	4	
No. of sister 姊妹數目	2	
Son No. / Age 兒子數目/年齡	/	
Daughter No. / Age 女兒數目/年齡	1 / 8	

Working Experience 工作經驗

Taking care of new born baby

照顧初生嬰兒(0-1)

Taking care of baby

照顧嬰兒(1-3)

Taking care of children

照顧兒童(3-12)



Taking care of elderly

老人護理

Taking care of disable

照顧傷殘人士

Take care of bedridden

照顧卧床人士

Taking care of pets

照顧寵物

Cooking

烹飪



Household chores

家務



Car washing

洗車

Language Ability 語文能力

	Learning 學習中	Fair 普通	Good 良好
English 英語			
Cantonese 廣東話			
Mandarin 普通話			

Overseas Employment 海外工作經驗

Hong Kong 香港	年	Taiwan 台灣	年
Singapore 新加坡	年	Malaysia 馬來西亞	年
Indonesia 印尼	年	Philippines 菲律賓	年
Middle East 中東	2 YRS 年	Others 其他	年

Remark 備註:

WORKED IN QATAR FINISHED CONTRACT, SHE HAS BLOOD PREASURE MAINTANCE MEDICINE EVEN BEFORE WORKING IN QATAR.

Last Employer 上任僱主

Working Period 工作年期	From MM/YYYY 由	APRIL 2023	To MM/YYYY 至	APRIL 2025
Name of Employer 僱主姓名	WADHA AL MARRI		Nationality 僱主國籍	QATARI
Location 工作地點	QATAR	Salary 工資	BASIC	
Family Members 家庭人數	5	No. of Helper 外僱數目	2	
Reason of Leaving 離職原因	FINISHED			
<input type="checkbox"/>	Taking care of new born baby 照顧初生嬰兒(0-1) _____ months 月		<input type="checkbox"/>	Taking care of pets 照顧寵物
<input type="checkbox"/>	Taking care of baby 照顧嬰兒(1-3) _____ years old 歲		<input type="checkbox"/>	Household chores 家務
<input type="checkbox"/>	Taking care of children 照顧兒童(4-12) _____ 5 years old 歲		<input type="checkbox"/>	Gardening 打理花園
<input type="checkbox"/>	Taking care of elderly 老人護理 _____ years old 歲		<input type="checkbox"/>	Cooking 烹飪
<input type="checkbox"/>	Taking care of disable 照顧殘疾人士 _____		<input type="checkbox"/>	Car washing 洗車
<input type="checkbox"/>	Take care of bedridden 照顧臥床 _____		<input type="checkbox"/>	Driving 駕駛

Previous Employer 前任僱主

Working Period 工作年期	From MM/YYYY 由	To MM/YYYY 至		
Name of Employer 僱主姓名		Nationality 僱主國籍		
Location 工作地點		Salary 工資		
Family Members 家庭人數		No. of Helper 外僱數目		
Reason of Leaving 離職原因				
<input type="checkbox"/>	Taking care of new born baby 照顧初生嬰兒(0-1) _____ months 月		<input type="checkbox"/>	Taking care of pets 照顧寵物
<input type="checkbox"/>	Taking care of baby 照顧嬰兒(1-3) _____ years old 歲		<input type="checkbox"/>	Household chores 家務
<input type="checkbox"/>	Taking care of children 照顧兒童(4-12) _____ years old 歲		<input type="checkbox"/>	Gardening 打理花園
<input type="checkbox"/>	Taking care of elderly 老人護理 _____ years old 歲		<input type="checkbox"/>	Cooking 烹飪
<input type="checkbox"/>	Taking care of disable 照顧殘疾人士 _____		<input type="checkbox"/>	Car washing 洗車
<input type="checkbox"/>	Take care of bedridden 照顧臥床 _____		<input type="checkbox"/>	Driving 駕駛

Previous Employer 前任僱主

Working Period 工作年期	From MM/YYYY 由	To MM/YYYY 至		
Name of Employer 僱主姓名		Nationality 僱主國籍		
Location 工作地點		Salary 工資		
Family Members 家庭人數		No. of Helper 外僱數目		
Reason of Leaving 離職原因				
<input type="checkbox"/>	Taking care of new born baby 照顧初生嬰兒(0-1) _____ months 月		<input type="checkbox"/>	Taking care of pets 照顧寵物
<input type="checkbox"/>	Taking care of baby 照顧嬰兒(1-3) _____ years old 歲		<input type="checkbox"/>	Household chores 家務
<input type="checkbox"/>	Taking care of children 照顧兒童(4-12) _____ years old 歲		<input type="checkbox"/>	Gardening 打理花園
<input type="checkbox"/>	Taking care of elderly 老人護理 _____ years old 歲		<input type="checkbox"/>	Cooking 烹飪
<input type="checkbox"/>	Taking care of disable 照顧殘疾人士 _____		<input type="checkbox"/>	Car washing 洗車
<input type="checkbox"/>	Take care of bedridden 照顧臥床 _____		<input type="checkbox"/>	Driving 駕駛

Other Question 其他問題

Do you eat pork? 你吃豬肉嗎?	<input type="checkbox"/>
Accept Day-off not on Sunday? 接受假日不在星期日?	<input type="checkbox"/>
Sharing a room with babies / children / elder? 你願意和小孩/嬰兒/長者同房嗎?	<input type="checkbox"/>
Are you afraid of dog or cat? 你會害怕狗或貓?	<input type="checkbox"/>
Do you smoke? 你會抽煙嗎?	<input type="checkbox"/>
Do you drink alcohol? 你會喝酒嗎?	<input type="checkbox"/>
Have you any prolonged illnesses / undergone surgery? 你有任何長期的疾病/做過手術嗎?	<input type="checkbox"/>
If Yes, 如有	CESAREAN 2016

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