JOB OFFER MEMO

To: MUSTOFIAH	SA No.:	C-TW23020006
Fr Branch: Tsuen Wan	Sales :	Jessica Yang
Please Inform that this applicant has been hi	red and detail information of employme	nt as follows :
Date of Hiring:	Expect to HK:	2023-06-02
Name of applications : MUSTOFIAH	Local agt ref no.: (K4152)
Monthly Salary: 4,730.00		/
Official Day Off: ()Every Sunday , ()Fix Weekday $$, ($$ $\!$)Arrange by Employ	ver ,($ec{ee}$)Money in stead day of
A) EMPLOYRE'S INFORMATION		
Name of Employer: WANG XING	Total	Members: ppl
No. of Adults:		
No. of Children: 1 (Aged be	elow 5)(Aged between 5 - 18)	
No. of Expecting Baby :		
Fig. 1 Company of the	No.of Elderly : 0	
Sleeping Arrangment : $[\ \ \ \]$ Own Room House Area : $[\ \ \ \]$ Own Room	[] Sharing with vith 5 Room	
B) DOMESTIC DUTIES (The following duties		perform)
V General Household	Washing Clothes by Hand/Machine	
V Cooking	V Regular marketing	
V Accompany kids to and from school	Gardening	
V Car washing	V Taking care of Kids	8
Taking cares of Pets V Ironing	Taking care of Sickness and Disabl V Learning Cantonese	е
0 91		
Others (please specify): Koof top C	eaning.	
C) CHARACTER REQUESTS (Please tick the	appropriate boxes)	
sincerely love all of the family members	V Do not be stubborn	
V Be an obedient helper	V Do not argue with anyone	
V accept life as a housemaid	V Be a nice gentle and honest person	
Do not give personal problems to employer	V Don't open the door for strangers ar	nd your friends
Do not use the telephone or mobile phone	V Be easy to teach	
D) SPECIAL REQUEST / FROM EMPLOYER:		
1)Holiday is arrange by employer. If no holiday is		ey.
2)Helper MUST NOT make personal phone calls or text msgs during working hours. 3)Helper MUST NOT disclose employer's privacy include address & contact numbers to friends or neighbours.		
4)Helper MUST NOT disclose employer's privacy	rinclude address & contact numbers to triel ancial company or people.	nds or neighbours.
5)	эт разры	
6)		
7) 8)		
Please Provide the following details as (Baran	igay/Town/City/Province/Region)	
Full residence address :		
Emergency contact Person name & Relationsl	nip:contact	
Mother Name:		
By signing below I consent that I fully understand and accept the above job details and conditions.		

Confirmed by Employer

Company Chop

Confirmed by Helper