## **JOB OFFER MEMO**

<b>To:</b> DINI SRI MULYATI			SA No.:	C-TP23040008	
Fr Branch: Tai Po			Sales :	SUSANA CHAN	*
Please Inform that this applica	int has been hire	d and detail informa	tion of employment	as follows :	
Date of Hiring:			Expect to HK :		
NI	023-04-20 INI SRI MULYATI	i	_ ocal agt ref no.: ( <sup>T1</sup> -		)
	730.00				87 X
5 5		)Fix Weekday , (	Arrange by Employer	, ( ►)Money i	n stead day off
A) EMPLOYRE'S INFORMATION	5 5 5 5				
Name of Employers			Total M	embers: 2	ppl
No. of Adults :	AW YUN HEI		Total W	embers.	— РРІ
No. of Children:	( Aged belo	w 5) (Aged	between 5 - 18)	70	
No. of Expecting Baby :			(5)		
No. of Constant Care :		o.of Elderly : 2			
	] Own Room		BEDARREMA HTIWLEFFICE	.D LADY	
House Area:  B) DOMESTIC DUTIES (The fo		Room	that halners will no	rform)	
V General Household	nowing duties ar		s by Hand/Machines	nonn)	
V Cooking		V Regular marketi			
Accompany kids to and from	school	Gardening			
Car washing		Taking care of k			
Taking cares of Pets			Sickness and Disable		
V Ironing		V Learning Canton	nese		
Others (please specify):				-,,	
C) CHARACTER REQUESTS (F	Please tick the ar	propriate boxes)			
v sincerely love all of the family		V Do not be stubbe	orn		
V Be an obedient helper		V Do not argue wit	h anyone		
V accept life as a housemaid		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Be a nice gentle and honest person		
V Do not give personal problems to employer V Do not use the telephone or mobile phone		1.50	Don't open the door for strangers and your friends Be easy to teach		
Do not use the telephone of h	lobile priorie	be easy to teach	I		
D) SPECIAL REQUEST / FROM	EMPLOYER:				
1)Holiday is arrange by employer.				<u>'-</u>	
2)Helper MUST NOT make perso 3)Helper MUST NOT disclose em	(A)		- 157 H 201 1	s or neighbours	
4)Helper MUST NOT borrow mon	ey from any finan	cial company or peop	le	of cal	. ()
3)Helper MUST NOT disclose em 4)Helper MUST NOT borrow mon 5) Sometimes employer so 6) cat dinner togethe 7)	ns, daugther	and grandchild	ven will come t	DY Q VISIT	and will
o) cat dinner togethe	χ,				
8)					
Please Provide the following de		•		83	
Full residence address :					
Emergency contact Person name & Relationship:					
Mother Name:	/Husband Name:		Tel:		
By signing below I consent that I f	ully understand ar	nd accept the above j	ob details and condition	ons.	
			( Standard	20	
				5) 5	
			Was and a second	8 9	
Confirmed by Helper	Confirme	ed by Employer	Company Chop		