JOB OFFER MEMO

To: DUROTI MURYAKIN Fr Branch: Tsuen Wan			SA No.:	C-TW23020024	
			Sales :	Hillary and Jessica	
Please Inform that this applica	ant has been hire	ed and detail infor	mation of employmer	nt as follows :	
Date of Hiring:			Expect to HK:		
Name of applications :	2023-02-26 DUROTI MURYAKIN		. ' Local agt ref no.:(T1687)	
· · · <u> · · · · · · · · · · · · · · ·</u>	1,730.00			,	
· · · · · · · · · · · · · · · · · · ·)Fix Weekday ()Arrange by Employ	er , ()Money in stead day o	
A) EMPLOYRE'S INFORMATION	,	in Woonday , (, arango by Employ	or , ()money in aloue day o	
Name of Employers			T .4.1	Manuel	
No. of Adults :	CHAN SAM MAU		I otai	Members: ppl	
No. of Children :	<u>' </u>	Jan. 5) / A a.	ad batusan 5 10 \		
_	(Aged bei	low 5)(Ag	ed between 5 - 18)		
No. of Expecting Baby :		lo.of Elderly: 1			
No. of Constant Care : Sleeping Arrangment : [Own Room	• —	n		
House Area :	Sq feet wi		<u>'</u>		
B) DOMESTIC DUTIES (The fo			sks that helpers will i	perform)	
V General Household	.		thes by Hand/Machine	•	
V Cooking		V Regular mar	•		
V Accompany kids to and from	n school	V Gardening			
V Car washing		V Taking care	of Kids		
V Taking cares of Pets		V Taking care	of Sickness and Disabl	e	
V Ironing		V Learning Ca	ntonese		
Others (please specify) :					
C) CHARACTER REQUESTS	(Please tick the a	appropriate boxes	1		
v sincerely love all of the fami	•	V Do not be stu			
V Be an obedient helper	,	V Do not argue			
V accept life as a housemaid			ntle and honest person	I	
		V Don't open th	V Don't open the door for strangers and your friends		
V Do not use the telephone or	V Be easy to teach				
D) SPECIAL REQUEST / FRO	M EMPLOYER :				
1)Holiday is arrange by employe				ney.	
2)Helper MUST NOT make pers				and a second state of the	
3)Helper MUST NOT disclose e 4)Helper MUST NOT borrow mo				nas or neignbours.	
5)	moy norm arry mile	andial company of p	oopio.		
6)					
7)					
8) Please Provide the following of	detaile ae (Baran	gay/Town/City/Pro	vince/Region)		
Full residence address :	-		-		
ruii residence address :					
Emergency contact Person na					
Mother Name:	· · · · · · · · · · · · · · · · · · ·	/Husband Name: _		Tel:	
By signing below I consent that					

Confirmed by Employer

Confirmed by Helper

Company Chop