

** PLEASE FILL UP

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JOB SCOPE SHEET FOR MIGRANT DOMESTIC WORKER
(LEMBAR LINGKUP PEKERJAAN UNTUK PEKERJA RUMAH TANGGA MIGRAN)

Employer's Full Name (Nama Lengkap Majikan): TAN LI LI

Employer's Address (Alamat majikan): 22 JALAN GIRANG SERANGOON PARK
SINGAPORE 359193

MDW's Full Name and Passport Number: Mandeg Lestar
(Nama Lengkap dan Nomor Paspor PLRT)

HOUSEHOLD DETAILS (RINCIAN RUMAH TANGGA)

Total Household Members (Jumlah Anggota Rumah Tangga): 7

No. of Adults (Jumlah Dewasa): 5

No. of Children (Jumlah Anak): 0

No. of Elderly (Jumlah Orang Tua): 2

Please state the health condition of elderly: ☒ Healthy (Sehat) / ☐ Sick (Sakit)
(Mohon sebutkan kondisi kesehatan orang tua)

House Type (Tipe Rumah): 3-storey Semi-detached (rented)

No. of storey (if applicable) (Jumlah lantai (jika ada)): 3

No. of bedrooms (Jumlah kamar tidur): 6 + 1 (maid)

No. of Toilets (Jumlah kamar mandi): 6 + 1 (maid's toilet)

Any changes in the next 6 months (example shifting of house): Yes / ☒ No
(Setiap perubahan dalam 6 bulan ke depan (contoh pindah rumah))

If yes, please state the change: _____
(Jika ya, sebutkan perubahannya)

CCTV: ☒ Yes / ☐ No

Location of CCTV if yes (Lokasi CCTV jika ya): Common areas

You must not install them in areas that will compromise her privacy or modesty, e.g. where she sleeps, change clothes, or the bathroom area. (Anda tidak boleh memasangnya di area yang akan membahayakan privasi atau kesopanannya, mis. tempat dia tidur, berganti pakaian, atau area kamar mandi.)

Job Scope (Lingkup pekerjaan)

Primary Job Scope (Lingkup Pekerjaan Utama): Cooking, Household Chores

Secondary Job Scope (Lingkup Pekerjaan Sekunder): Assist Employer's mother

Need to work with another MDW in the household: Yes / ☒ No

(Perlu bekerja dengan PRLT lain di rumah tangga)

If yes, what is the nationality of the other MDW? _____
(Jika ya, apa kewarganegaraan PRLT lainnya?)

If yes, what is the main job of the mentioned MDW in this job scope? (Jika ya, apa pekerjaan utama PRLT tersebut dalam lingkup pekerjaan ini?) _____

Any other Remarks (Komentar lainnya): _____

MDW's signature



MANDEG LESTARI-15-2-2023

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General Household chores (Pekerjaan rumah tangga umum)

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Cooking (Masak)

- How many times daily (Berapa kali sehari?): 2 / Lunch / Dinner * Need to prepare breakfast too
- Cooking done alone or assisted (Memasak dilakukan sendiri atau dibantu): Alone (Sendiri) / Assisted (Dibantu)
- Need to plan the menu (Perlu merencanakan menu): Yes / No
- Type of cuisine (Jenis masakan): Chinese (Cina) / Western (Barat) / Indian (India) / Vegetarian / Others (Lainnya)
- If others, please state (Jika yang lain, sebutkan): Western food (Occasional)
- Any other remarks (Komentar lainnya): Maid will be taught how to cook Chinese and Western food
- Marketing (Pemasaran): Yes / No
- If yes, marketing done alone (Jika ya, pemasaran dilakukan sendiri): Yes / No
- If yes, how many times weekly (Jika ya, berapa kali seminggu): mainly

- Any other remarks (Komentar lainnya): Marketing is done by employer unless employer is not freed and she is required to buy items that are in need. The present maid has not done any marketing so far.
- Cleaning of floor (Pembersihan lantai): Vacuum cleaner, mop, rainbow machine cleaning equipment
- Type of equipment used (Jenis peralatan yang digunakan): 1
- How many times daily (Berapa kali sehari): 1
- Any other remarks (Komentar lainnya): Cleaning of ground floor may be twice when guests visit and floor is dirty (Occasional). Maid will be taught how to use the vacuum cleaner and rainbow cleaning equipment.
- Cleaning of toilet (Pembersihan toilet): 6
- No. of toilets (Jumlah toilet): 3 toilets per day
- Frequency of cleaning (daily) (Frekuensi pembersihan (harian)): 3
- Any bathtub (bak mandi apa saja) Yes / No
- If yes, the no. of bathtubs (Jika ya, berapa bak mandi): 2
- Any other remarks (Komentar lainnya): Bathtubs are not in use.

Laundry (Cucian)

- Handwash (Dicuci dengan tangan) Yes / No
- Machine wash (Dicuci dengan mesin): Yes / No
- Remarks, if any (Komentar, jika ada): Most clothes are machine wash.
- Washing of Car (Pencucian Mobil): Yes / No
- If yes, how many cars (Jika ya, berapa banyak mobil?): _____
- If yes, frequency (weekly) (Jika ya, frekuensi (mingguan)): _____
- Any other remarks (Komentar lainnya): _____

Employer's Signature

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MDW's signature

[Signature]

EA's signature

[Signature]

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Basic Amenities for the MDW (Fasilitas Dasar untuk PLRT):

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Type of basic amenities provided to the MDW (Jenis fasilitas dasar yang disediakan untuk PLRT) :

- ☒ Mattress (kasur) ☒ Pillow (bantal) ☒ Blanket (selimut)
☒ Body Soap (Sabun badan) ☒ Shampoo (sampo) ☐ Hair conditioner (Kondisioner rambut)
☒ Toothbrush (Sikat gigi) ☒ Toothpaste (pasta gigi)

Any other amenities (Fasilitas lainnya) : _____

Accommodation for MDW (Akomodasi untuk PLRT):

- ☒ Separate (tersendiri)

Type of accommodation (Jenis akomodasi) : Room

- ☐ Share with children (Bagikan dengan anak-anak)

If yes, how many children, age and gender (Jika ya, berapa jumlah anak, umur dan jenis kelamin?): _____

- ☒ Share with Elderly (Bagikan dengan orang tua)

If yes, how many elderly, age and gender (Jika ya, berapa jumlah orang tua, umur dan jenis kelamin): _____

Any other remarks (Komentar lainnya): She has a separate room to store her things and make use of before she sleeps. She is needed to sleep with employer's mother in the night.
** You must ensure that her accommodation has adequate space and privacy and sufficiently ventilated. (Anda harus memastikan bahwa akomodasinya memiliki ruang dan privasi yang memadai serta ventilasi yang cukup.)

Salary and off day arrangements of the MDW (Pengaturan gaji dan hari libur PLRT)

Basic salary (gaji pokok) : \$550.00

No. of off days per month (Jumlah hari libur per bulan) : 0

Each off day compensation (Kompensasi setiap hari libur) : \$21.25 Total Salary (Total Gaji) : \$635.00

Off day timing (Waktu libur) : _____

Handphone usage arrangement (Pengaturan penggunaan ponsel)

** No handphone usage during work hours (** Tidak boleh menggunakan handphone selama jam kerja)

Specific timing for handphone usage (Waktu tertentu untuk penggunaan handphone):

Handphone can be used after completion of work

Any other remarks (komentar lainnya): Need to buy her own data

Pet (Hewan peliharaan)

Taking care of pet (Merawat hewan peliharaan) : Yes / No

If yes, what type of pet (Jika ya, jenis hewan peliharaan apa?): _____

If yes, how many pet (Jika ya, berapa banyak hewan peliharaan?): _____

Shower the pet (Mandikan) : Yes / No

If yes, frequency (weekly) (Jika ya, frekuensi (mingguan): _____

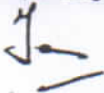
Walk the pet (Berjalan) : Yes / No

If yes : frequency daily (Jika ya : frekuensi setiap hari) : _____

Employer's Signature

MDW's signature

EA's signature

X 





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CHILDCARE (PERAWATAN ANAK)

Not Applicable

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Caregiving for Infant/Children (Pengasuhan untuk Bayi/Anak)

Names, age and gender of the infant / children (Nama, usia dan jenis kelamin bayi/anak)

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____

Share room with infant/children (Berbagi kamar dengan bayi/anak-anak) : Yes / No

If yes, how many and gender of infant/children (Jika ya, berapa banyak dan jenis kelamin bayi/anak?):

Need to wake up at night (Malam perlu bangun) : Yes / No

If yes, how many times (Jika ya, berapa kali) : _____

If yes, for what purpose (Jika ya, untuk tujuan apa?): _____

Need to follow infant/children to relative's house (Perlu mengikuti bayi/anak ke rumah saudara) : Yes / No

If yes, state the relationship of the relative (nyatakan hubungan saudara) : _____

If yes, travel to the relative's house by (pergilah ke rumah saudara dengan) : _____

If yes, state the frequency and duration (sebutkan frekuensi dan lamanya) : _____

If yes, state the address of the relative's house (sebutkan alamat rumah saudara):

Extract from MOM website :

"We understand that employers may need their helpers to take care of their child or parent at a relative's house.

You must notify MOM before you can proceed with this arrangement. To notify MOM, you must first ensure all of the following:

You have already obtained your helper's written agreement to take care of your child or parent at the relative's house.

Your helper does not perform the full load of housework in both households.

If the helper needs to stay overnight to take care of your child or parent at your relative's house, her accommodation meets the requirements."

Any changes in the next 6 months (for example, newborn baby) (Setiap perubahan dalam 6 bulan ke depan (misalnya, bayi baru lahir)) : Yes / No

If yes, please state the change (tolong sebutkan perubahannya) : _____

Any other remarks (Komentar lainnya) : _____

Employer's Signature

x 

MDW's signature



EA's signature



MANDECESTAR 15-02-2023

Elderly care

Relationship to the employer (Hubungan dengan majikan): Mother

Name (Nama): Kwek Lan Fung Age and Gender (Usia dan Jenis Kelamin): 86 years old Female

Name (Nama): _____ Age and Gender (Usia dan Jenis Kelamin): _____

Share room (Berbagi kamar) ☒ Yes / No If yes, how many (berapa): 2 Maid and employer's mother

Need to wake up at night (Perlu bangun di malam hari) : Yes ☒ No

If yes, how many times daily (berapa kali sehari?): _____

A) Nature of sickness (Keadaan penyakit):

- ☐ Stroke (Mati Rasal/badan)
 - ☐ Lower part of body (badan bawa)
 - ☐ Right side of body (Kanan badan)
 - ☐ Left side of body (Kiri badan)
 - ☐ Whole body (semua badan)

- ☒ Heart disease (Penyakit jantung)
- ☐ Diabetics (Kencing Manis)
- ☐ Dementia (Pikun)
- ☒ High Blood Pressure (Darah Tinggi)
- ☐ Parkinson Disease (Penyakit Parkinson)
- ☐ Handicap (Cacat anggota tubuh)
- ☐ Kidney infection (Ginjal infectsi)
- ☐ Autism (autism)
- ☐ Down syndrome (sindrom Down)

☒ Other Conditions (Tambahan): Dizzy Spells


B) Job scope (Perkerjaan)

- ☒ Shower (Mandi)
- ☐ Massage (Pijit)
- ☐ Feed Medicine (Memberi Makan Obat)
- ☐ Change pampers (ganti popok)
- ☐ Wheelchair (Dorong kursi roda)
- ☐ Suck out the phlegm (Membuang dahak)
- ☐ Injection (Suntik)
- ☐ Cleaning up urine/faeces (Membersihkan kotoran)
- ☐ Turn the body sideways and pat (Membalik badan meneuk punggung)
- ☐ Carrying the patient from bed and to bed (Memindahkan pasien (ranjang))
- ☐ Accompany the patient (Menemani pasien)
- ☐ Tube-feeding (pakai salang)
- ☐ Measure blood pressure (cek darah tinggi)
- ☐ Check glucose (cucuk gula manis)
- ☐ Bring patient for kidney dialysis (Bawah ke cuci darah)
- ☐ Bring patient for checkup / hospital (Bawah ke rumah sakit / cekup)

Additional remarks (Tambahan): Accompany her for walks if required.

Watch over her when she bathes so that she does not slip and fall.
Wear clothes for her as she cannot bend.

Employer's Signature

X 

MDW's signature



EA's signature



MANDEZ LESTAR 15-2-2023

Employer's mother at present wakes up on her own to visit the toilet. The present maid has not assisted her so far. However, should she feels unwell in the night, maid will be required to watch over her when she visits the toilet in the night. Rest time will be provided on the next day. Maid's present duty is to sleep with her and alert employer should she feel unwell ~~and~~ ^{or} require medical attention. In the event that employer's mother's health conditions change and needs more close supervision employer will revise job scope.