#### Ref. No. NB0502

### **EX-ABROAD SAUDI FINISH CONTRACT**

## **RELEASED PASSPORT ON JANUARY 2031**

# **APPLICANT'S QUALIFICATION HIGHLIGHTS**

| Name :     | RHAZEL ATI | LANO                |                  |     |
|------------|------------|---------------------|------------------|-----|
| Race :     | FILIPINC   | D Religion:         | ROMAN CATHOLIC   |     |
| Health     |            |                     |                  | 195 |
| Age :      | 29         |                     | JANNUARY 8, 1993 |     |
| Height :   | 157.4      | Weight :            | 85KG             |     |
| Educationa | al :       | HIGH SCHOOLGRADUATE |                  |     |
| Attainment |            |                     |                  |     |



## **INTERVIEW APPRAISAL**

|  | POOR | FAIR GOOD EXCELLENT |
|--|------|---------------------|
| Personality<br>Facial Expression<br>Household works  |      |                     |
| Care of Babies<br>Care of young children<br>Care of elderly/disabled   |      |                     |
| Cooking<br>Experience in working<br>as a house maid<br>Spoken English<br>Spoken Cantonese<br>Spoken Mandarin<br>Spoken Teachew |      |                     |
|  |      |                     |

Other Languages

| ADDRESS: SAN NICOLAS BALAS CONCEPCION TARLAC CITY   |                                  |            |  |                               |          | TEL:                                | +639263191521-WHATSSAP NUMBER |                                     |                        |                        |
|---|----------------------------------|------------|--|-------------------------------|----------|-------------------------------------|-------------------------------|-------------------------------------|------------------------|------------------------|
| PLEASE ANSWER IN CHRONOLOGICAL ORDER FROM 1-10  |                                  |            |  |                               |          |                                     |                               |                                     |                        |                        |
| 1 COOKING 10 CARE OF 2 WASHING 3 IRONING 8 CARE OF 6 CARE OF  |                                  |            |  |                               |          |                                     |                               |                                     |                        |                        |
| BABIES YOUNG CHILDREN ELDERLY   |                                  |            |  |                               |          |                                     | ELDERLY<br>CARE OF PETS       |                                     |                        |                        |
| SPECIAL ABILITIES   |                                  |            |  |                               |          |                                     |                               |                                     |                        |                        |
| 1. <u>co</u>  | 1. cooking 2. washing 3. ironing |            |  |                               |          |                                     |                               |                                     |                        |                        |
| PREVIOUS EMPLOYMENT   |                                  |            |  |                               |          |                                     |                               |                                     |                        |                        |
| 1. NAME OF EMPL   | .OYE                             | R          |  | FROM - TO                     |          | SALARY                              |                               | POSITION                            |                        |                        |
| HUSAIN FAMILY   |                                  |            |  | 2019-2020                     |          | 1                                   | 500 DIRHAM                    | DOMESTIC WORKER                     |                        |                        |
| LOCATION OF E   | MPLO<br>UAE                      |            |  | DESCRIPTION OF JOB            |          | TEL. NO.                            |                               | REASON TO LEAVE<br>EMPLOYER PROBLEM |                        |                        |
| 2. NAME OF EMPL   |                                  |            |  | FROM - TO<br><b>2016-2018</b> |          | SALARY<br>1500 RIYAL                |                               | POSITION                            |                        |                        |
| ZAFER SALE  | EHEA                             | AL QATHANI |  |                               |          |                                     |                               | DOMESTIC WORKER                     |                        |                        |
| LOCATION OF EMPLOYER<br>SAUDI   |                                  |            |  | DESCRIPTION OF JOB            |          | TEL. NO.                            |                               | REASON TO LEAVE<br>FINISH CONTRACT  |                        |                        |
| 3. NAME OF EMPLOYER   |                                  |            |  | FROM - TO                     |          | SALARY                              |                               | POSITION                            |                        |                        |
| LOCATION OF EMPLOYER  |                                  |            |  | DESCRIPTION OF JOB            |          | TEL. NO.                            |                               | REASON TO LEAVE                     |                        |                        |
| 4. NAME OF EMPLOYER   |                                  |            |  | FROM - TO SA                  |          | SALARY                              |                               | POSITION                            |                        |                        |
| LOCATION OF EMPLOYER  |                                  |            |  | DESCRIPTION OF JOB TE         |          | TEL. NO.                            |                               | REASON TO LEAVE                     |                        |                        |
| SINGLE  |                                  | MARRIED    |  |                               |          |                                     | SEPARATED                     |                                     |                        | WIDOW                  |
| NAME OF SPOUSE  | E                                | AGES       | С                                      | OCCUPATION                    | NO C     | DF SONS                             | AGES<br>13/9                  | NO OF DAUGHTER                      | S                      | AGES                   |
| NAME OF FATHER  | NAME OF FATHER AGES              |            |  | OCCUPATION<br>CONSTRUCTION    |          | NAME OF MOTHER<br>MA. EMELY ATILANO |                               | AGES<br>49                          |                        | OCCUPATION<br>HOSEWIFE |
| NO OF BROTHER(S   | -                                | 56<br>AGES |  | NO OF SISTER(                 | S)       | AGES                                | I AM THEELDEST                | IN THE FAMILY                       |                        | HOSEWIFE               |
| 1   |                                  | 30         |  |                               |          |                                     |                               |                                     |                        |                        |
|   |                                  |            |  |                               |          |                                     |                               |                                     |                        | FROM TO                |
|   |                                  | DC         | NAME OF INSTITUTE<br>ON PABLO NATIONAL |                               |          |                                     |                               |                                     | FROM - TO<br>2007-2008 |                        |
| HIGH SCHOOL GRADUATE  |                                  |            |  |                               |          |                                     | FROM - TO                     |                                     |                        |                        |
| SPECIAL COURSES   |                                  |            | NAME OF INSTITUTE                      |                               | LOCATION |                                     |                               |                                     | FROM - TO              |                        |
| 2.  |                                  |            |  |                               |          |                                     |                               |                                     |                        |                        |
| 3.  |                                  |            |  |                               |          |                                     |                               |                                     |                        |                        |
| All statements made by me in this application are true and correct, any false information given herein can be considered sufficient cause of termination with |                                  |            |  |                               |          |                                     |                               |                                     |                        |                        |
| DATE OF APPLICATION: APPLICANT'S SIGNAT   |                                  |            | URE APPLICATION TAKEN BY:              |                               |          | NBY:                                |                               |                                     |                        |                        |
| August 30, 2022 RHAZEL ATILANO  |                                  |            |  |                               |          |                                     |                               |                                     |                        |                        |
| REMARK:   |                                  |            |  |                               |          |                                     |                               |                                     |                        |                        |

## **ANSWER SHEET**

Please answer by YES or NO below to sho which of the following duties you are willing to undertake and which you have had experience at

|   |              |                            | WILLING          |          | EXPERIENCED |
|---|--------------|----------------------------|------------------|----------|-------------|
| 1. Care of Babies aged 0-3 months                   |              |                            | YES              |          | YES         |
| 2. Care of Babies aged 3-12 months                  |              | -                          | YES              | _        | YES         |
| 3. Change nappies                                   |              |                            | YES              |          | YES         |
| 4. Feed baby  |              | _                          | YES              | _        | YES         |
| 5. Care of Children aged 1-5 years                  |              | _                          | YES              | _        | YES         |
| 6. Care of Children aged 5-10 years                 |              |                            | YES              |          | YES         |
| 7. Care of Children over 10 years                   |              |                            | YES              |          | YES         |
| 8. General Housework                                |              |                            | YES              |          | YES         |
| 9. Operate Washing Machine                          |              |                            | YES              |          | YES         |
| 10. Operate carpet cleaner                          |              |                            | YES              |          | YES         |
| 11. Operate drier                                   |              | _                          | YES              |          | YES         |
| 12. Do personal laudry by hand                      |              |                            | YES              |          | YES         |
| 13. Sewing BY HAND                                  |              |                            | YES              |          | YES         |
| 14. Ironing   |              |                            | YES              |          | YES         |
| 15. Do plain cooking                                |              |                            | YES              |          | YES         |
| 16. Look after semi-invalid person                  |              |                            | YES              |          | NO          |
| 17. Look after invalid person                       |              | _                          | NO               |          | NO          |
| 18. Look after elderly person                       |              |                            | YES              |          | NO          |
| 19. Play with children                              |              | _                          | YES              |          | YES         |
| 20. Drive private vehicle                           |              | -                          | NO               | _        | NO          |
| Have you worked abroad before?:                     | YES          | if so, where?              |                  | SAUDI    |             |
| Name of employer?:                                  |              | ZAFER SA                   | LEHHEAL AL QATHA | NI       |             |
| Reason for Leaving?:                                | ISH CONTRACT |                            |                  |          |             |
| Do you have any complain to other agenc             | y in past?   | NO                         |                  |          |             |
| o you have any repeat issue before?                 |              | NO                         |                  |          |             |
| Please state in few sentences why you wa<br>TO SUPP |              | road:<br>ILY NEEDS AND SEM | ND MY CHILDREN T | O SCHOOL |             |
|   |              |                            |                  |          |             |
|   |              |                            |                  |          |             |

If you will work in abroad (Malaysia) and you feel home sickness what would you do?

I WILL DO MY WORK AND PRAY ONLY

\_\_\_\_\_

| 1. Are you prepared to eat Chinese food only?  | Yes No     |
|--|------------|
| 2. Are you prepared to eat Western food only?  | Yes 🗌 No   |
| 3. Are you prepared to work for Chinese family?  | Yes 🗌 No   |
| 4. Are you prepared to work for a Western family?  | Yes 🗌 No   |
| 5. Are you prepared to use the telephone only with employer's permission?                                      | Yes 🗌 No   |
| 6. Are you prepared to take your day off set by your employer?   | Yes No     |
| 7. Are you prepared to give up some of your day off to earn more in addition to you basic salary               | Yes No     |
| 8. On you day off, are you prepared to finish the morning chores before going out?                             | Yes 🗌 No   |
| 9. Are you prepared to return home not later than 7:00 P.M. during you day off?                                | Yes 🗌 No   |
| 10. Can you promise not to ask salary advance from your employer no matter what the circumstances may be?      | Yes 🗌 No   |
| 11. Are you prepared to follow the code of discipline drawn up by your agency?                                 | Yes 🗌 No   |
| 12. Are you prepared to shoulder your own return airfare if you do not finish your 2 years contract?           | Yes 🗌 No   |
| 13. Are you ready to follow your employer if they emigrate to other country?                                   | Yes 🗌 No   |
| 14. Can you promise not to invite your friends to your employer's residence without his/her consent?           | Yes 🗌 No   |
| 15. Can you promise not to use make-up while at work?  | Yes 🗌 No   |
| 16. If only member of your family becomes seriously ill, would you want to go home at your own expense?        | Yes 🗌 No   |
| 17. If any immediate member of your family should die while abroad would you like to go home at your expenses? | Yes 🗌 No   |
| 18. Are you ready to extend your contract after 2 years?   | 🗌 Yes 📕 No |
| 19. Do you smoke?  | 🗌 Yes 📕 No |
| 20. Do you drink alcohol?  | 🗌 Yes 📕 No |
| 21. Are you afraid of dogs? Other pets?  | Yes No     |
| 22. Are you afraid of being left alone in the house at night?  | 🗌 Yes 📕 No |
| 23. Do you have any physical defect?   | 🗌 Yes 📕 No |
| 24. Do you suffer from any allergy? If so, what?   | 🗌 Yes 📕 No |
| 25. Have you suffered from any serious illness before?   | 🗌 Yes 📕 No |
| 26. Have you undergone any operation over the lasr 12 months? Cesarian Section                                 | 🗌 Yes 📕 No |
| 27. Do you suffer from any skin diseased?  | 🗌 Yes 📕 No |
| 28. Must you attend church weekly?   | 🗌 Yes 📕 No |
|  |            |

**DECLARATION:** I hereby confirm that the information and answer given on this application are true and accurate to the best of my knowledge and belief, and realize that any falsification or misrepresentation of this may result in my being repatriated to the place of my origin at my own expense. I further declare that I fully understood at the details given by the agency about employment abroad, contents of working contract, including terms and conditions offered by prospective employer.