

Curriculum Vitae: Domestic Workers

Application for the job position of:	DOMESTIC WORKER
Country of job position:	CYPRUS

Personal Details:

Surname:	LAWATI						
First Name:	MALATI						
Middle Name:							
Father's Name:	LOKMAN LAWATI						
Nationality	NEPALESE						
Age:	22	Sex:	F	Height:	1.58m	Weight:	55 KG
Date of Birth:	22 JUL 1999		Place of Birth:	MORANG			
Home Address:	04 ,KAMAL ,JHAPA						
Issued Date:							
Passport No.:	11405644		Expiry Date:	20 APR 2029			
Marital Status:	UNMARRIED			Religion:	HINDU		



Family:

Spouse Name:			
Age:		Occupation:	
Children Number:			
Ages:		Sex:	
Who will care for your children during your employment abroad?			

Professional Experience:

Experience 1:

Country:		Job Position:	DOMESTIC WORKER	Duration/ Period:	
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Duties: (please check)

Cleaning:	<input checked="" type="checkbox"/>	Ironing:	<input type="checkbox"/>	Cooking:	<input type="checkbox"/>	Babysitting:	<input type="checkbox"/>	Care of elderly:	<input type="checkbox"/>
Taking care of disabled person:	<input type="checkbox"/>	Care of pets:	<input type="checkbox"/>						

Comments:

Experience 2:

Country:		Job Position:		Duration/ Period:	
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Duties: (please check)

Cleaning:	<input type="checkbox"/>	Ironing:	<input type="checkbox"/>	Cooking:	<input type="checkbox"/>	Babysitting:	<input type="checkbox"/>	Care of elderly:	<input type="checkbox"/>
Taking care of disabled person:	<input type="checkbox"/>	Care of pets:	<input type="checkbox"/>						

Comments:

NOW I AM DOING TRAINING IN APPS ENHANCEMENT PVT. LTD.

I AM HONEST, HARDWORKING AND LOYAL.

Other Employment Background:

Job Position 1:		Country:		Period:	
Main Duties:					
Job Position 2:		Country:		Period:	
Main Duties:					
Job Position 3:		Country:		Period:	
Main Duties:					

Educational background:

Educational Organization:		Period:	
Title:	S L C	Certificate Attached:	<input type="checkbox"/>
Educational Organization:		Period:	
Title:		Certificate Attached:	<input type="checkbox"/>
Educational Organization:		Period:	
Title:		Certificate Attached:	<input type="checkbox"/>
Other Certificates:			
English Language Level:			
Very Poor:	<input type="checkbox"/>	Poor:	<input type="checkbox"/>
OK:	<input checked="" type="checkbox"/>	Good:	<input type="checkbox"/>
Very Good:	<input type="checkbox"/>		
Other Languages: (please note)			
Nepali, Hindi			
Have you attended the Apps Group Training Scheme? If yes, select.			
Housekeeping:	<input checked="" type="checkbox"/>	Caregiving:	<input type="checkbox"/>

Personal Questions:

	YES	NO	If yes, please specify:
1. Are you willing to work on Sundays?	√		
3. Do you have any disabilities?		√	
4. Do you suffer from any allergies?		√	
5. Are you comfortable with pets?	√		
6. Are you vegetarian?		√	
7. Is there any food you don't like to cook?		√	No Beef

On-job Questions:

Electrical home appliances:		Elderly/ Disable Care:		Baby/ Child Care:		Householding:	
Washing machine:	√	Bed Bathing:	–	Bathing:	–	Cleaning areas:	√
Dish washing machine:	–	Bathing:	–	Dressing:	–	Cleaning surfaces:	√
Vacuum:	√	Dressing:	–	Diapers:	–	Ironing:	√
Microwave oven:	√	Repositioning:	–	Feeding:	–	Cooking:	√
Electric heaters:	√	Diapers:	–	Sterilizing	–	Gardening:	√
Electric iron:	√	Tube Feeding:	–				
Air-conditioners:	–	Blood Pressure Check:	–				

Declaration:

I hereby affirm that all information above are true.

Date: 31 08 2021

मालती

Applicant's Signature:

राहदानी/
Passport

नेपाल NEPAL

राहदानी नं./ Passport No. 11405644

प/ Type P

स/ Surname LAWATI

स/ Given Names MALATI

राष्ट्र/ Nationality NEPAL/BSB

स/ Date of Birth 27 JUL 1999

लिंग/ Sex F

स/ Date of Issue 21 APR 2019

स/ Date of Expiry 20 APR 2029

स/ Citizenship No. 04-02-74-05403

स/ Place of Birth MORANG

स/ Issuing Authority MOHA, DEPARTMENT OF PASSPORT

स/ Holder's Signature

11405644<5NPL9907272F290420504027405403<<<90

3

राहदानी बाहकलाई रोकतोक नगरी सरासर जान दिन तथा परिआएको बेलामा आवश्यक मद्दत र संरक्षण प्रदान गरिदिन सरोकारवालाहरूसँग नेपाल सरकार, परराष्ट्र मन्त्रालय अनुरोध गर्दछ।

The Ministry of Foreign Affairs, Government of Nepal, requests and requires whom it may concern to allow the holder to pass freely, without let or hindrance and to afford him or her every assistance and protection, which he or she may stand in need of.

Section Officer

Designation:

30 FOREIGN EXCHANGE FOR TRAVELLING EXPENSES

No entries to be made on this page except by authorized Bank or Travel Agency

Date	Serial number of Exchange Control Application Forms	Amount Issued	Seal of Bank or Travel Agent issuing Foreign Exchange

31

पुस्तोका बास गणतन्त्र न. तथा जारी भएको तिति र स्थान/ Old Travel Document No. with Date and Place of Issue

JAMUNA LAWATI

MOTHER

KAMAL, 04 KAMAL, JHAPA

DMK00054227

