

## BIO-DATA OF FOREIGN DOMESTIC WORKER (FDW)

\*Please ensure that you run through the information within the biodata as it is an important document to help you select a suitable FDW

### (A) PROFILE OF FDW

#### A1 Personal Information

1. Name: \_\_\_\_\_

2. Date of birth: d d m m y y Age:

3. Place of birth: \_\_\_\_\_

4. Height & weight: cm kg

5. Nationality: \_\_\_\_\_

6. Residential address in home country: \_\_\_\_\_  
\_\_\_\_\_

7. Name of port / airport to be repatriated to: \_\_\_\_\_

8. Contact number in home country: \_\_\_\_\_

9. Religion: \_\_\_\_\_

10. Education level: \_\_\_\_\_

11. Number of siblings: \_\_\_\_\_

12. Marital status: \_\_\_\_\_

13. Number of children: \_\_\_\_\_

- Age(s) of children (if any): \_\_\_\_\_

PHOTO  
(half/full bodied and coloured)

#### A2 Medical History/Dietary Restrictions

14. Allergies (if any): \_\_\_\_\_

15. Past and existing illnesses (including chronic ailments and illnesses requiring medication):

	Yes	No		Yes	No
i. Mental illness	<input type="checkbox"/>	<input type="checkbox"/>	vi. Tuberculosis	<input type="checkbox"/>	<input type="checkbox"/>
ii. Epilepsy	<input type="checkbox"/>	<input type="checkbox"/>	vii. Heart disease	<input type="checkbox"/>	<input type="checkbox"/>
iii. Asthma	<input type="checkbox"/>	<input type="checkbox"/>	viii. Malaria	<input type="checkbox"/>	<input type="checkbox"/>
iv. Diabetes	<input type="checkbox"/>	<input type="checkbox"/>	ix. Operations	<input type="checkbox"/>	<input type="checkbox"/>
v. Hypertension	<input type="checkbox"/>	<input type="checkbox"/>	x. Others: _____		

16. Physical disabilities: \_\_\_\_\_

17. Dietary restrictions: \_\_\_\_\_

18. Food handling preferences: ☐ No pork ☐ No beef ☐ Others: \_\_\_\_\_

**A3 Others**

19. Preference for rest day: \_\_\_\_\_ rest day(s) per month.

20. Any other remarks: \_\_\_\_\_

**(B) SKILLS OF FDW****B1 Method of Evaluation of Skills**

Please indicate the method(s) used to evaluate the FDW's skills (can tick more than one):

☐ Based on FDW's declaration, no evaluation/observation by Singapore EA or overseas training centre/EA

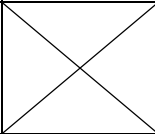
☐ Interviewed by Singapore EA

☐ Interviewed via telephone/teleconference

☐ Interviewed via videoconference

☐ Interviewed in person

☐ Interviewed in person and also made observation of FDW in the areas of work listed in table

S/No	Areas of Work	Willingness Yes/No	Experience Yes/No If yes, state the no. of years	Assessment/Observation						
				Please state qualitative observations of FDW and/or rate the FDW (indicate N.A. if no evaluation was done)						
				Poor .....	Excellent...	N.A				
				1	2	3	4	5	N.A	
1.	Care of infants/children  Please specify age range: _____									
2.	Care of elderly									
3.	Care of disabled									
4.	General housework									
5.	Cooking  Please specify cuisines:									
6.	Language abilities (spoken)  Please specify: _____									
7.	Other skills, if any  Please specify: _____									

- ☐ Interviewed by overseas training centre / EA (Please state name of foreign training centre / EA: \_\_\_\_\_)  
 State if the third party is certified (e.g. ISO9001) or audited periodically by the EA: \_\_\_\_\_
- ☐ Interviewed via telephone/teleconference  
☐ Interviewed via videoconference  
☐ Interviewed in person  
☐ Interviewed in person and also made observation of FDW in the areas of work listed in table

S/No	Areas of Work	Willingness Yes/No	Experience Yes/No If yes, state the no. of years	Assessment/Observation						
				Please state qualitative observations of FDW and/or rate the FDW (indicate N.A. of no evaluation was done)						
				Poor .....Excellent...N.A 1 2 3 4 5 N.A						
1.	Care of infants/children  Please specify age range: _____									
2.	Care of elderly									
3.	Care of disabled									
4.	General housework									
5.	Cooking  Please specify cuisines:									
6.	Language abilities (spoken)  Please specify: _____	X								
7.	Other skills, if any  Please specify: _____									

**(C) EMPLOYMENT HISTORY OF THE FDW**

**C1 Employment History Overseas**

Date		Country (including FDW's home country)	Employer	Work Duties	Remarks
From	To				

**C2 Employment History in Singapore**

Previous working experience in Singapore

☐ Yes☐ No

(The EA is required to obtain the FDW's employment history from MOM and furnish the employer with the employment history of the FDW. The employer may also verify the FDW's employment history in Singapore through WPOL using SingPass)

**C3 Feedback from previous employers in Singapore**

Feedback was/was not obtained by the EA from the previous employers. If feedback was obtained (attach testimonial if possible), please indicate the feedback in the table below:

	Feedback
Employer 1	
Employer 2	

**(D) AVAILABILITY OF FDW TO BE INTERVIEWED BY PROSPECTIVE EMPLOYER**

- ☐ FDW is not available for interview
- ☐ FDW can be interviewed by phone
- ☐ FDW can be interviewed by video-conference
- ☐ FDW can be interviewed in person

**(E) OTHER REMARKS**

FDW Name and Signature

Date:

EA Personnel Name and Registration Number

Date:

I have gone through the 4 page biodata of this FDW and confirm that I would like to employ her

Employer Name and NRIC No.

Date:

\*\*\*\*\*

**IMPORTANT NOTES FOR EMPLOYERS WHEN USING THE SERVICES OF AN EA**

- Do consider asking for an FDW who is able to communicate in a language you require, and interview her (in person/phone/videoconference) to ensure that she can communicate adequately.
- Do consider requesting for an FDW who has a proven ability to perform the chores you require, for example, performing household chores (especially if she is required to hang laundry from a high-rise unit), cooking and caring for young children or the elderly.
- Do work together with the EA to ensure that a suitable FDW is matched to you according to your needs and requirements.
- You may wish to pay special attention to your prospective FDW's employment history and feedback from the FDW's previous employer(s) before employing her.