

## FILIPINO MAID BIODATA

Name: MYLENE BUWAC

Code: IN-MM-449

### Personal Particulars

Age : 40  
 Date of birth : 01-09-1985  
 Height (cm) : 150  
 Weight (kg) : 50  
 Religion : Christian (Born Again)  
 Education level : High School Level  
 Marital status : Single Mother (w/ live-in)  
 No. of children : 2  
 Age of children : 18 & 20 Y/O  
 Husband/Live-in status : Live-in only  
 Husband/Live-in job : CONSTRUCTION  
 No. of siblings : 9  
 Position in family : 9th  
 Provincial city : ALFONSO LISTA, IFUGAO  
 Current living city : IFUGAO

### Experience status

☐ First timer ☒ Ex-abroad

### Personal Preference for Work Categories

(1 = most preferred 4 = least preferred)

- 1 Housework + Infants/toddlers care  
 2 Housework + Children care  
 3 Housework + Elderly/disable care  
 4 Housework + Bedridden care

### Employment History in Origin Country

- City/Province: HONG KONG  
 How many: 2 year 0 months  
 From what: 2020 year to 2022 year  
 Work details: General housework, cooking, elderly care (86 y/o)
- City/Province: HONG KONG  
 How many: 0 year 8 months  
 From what: 2019 year to 2019 year  
 Work details: General housework, cooking, elderly care (96 y/o)

### Employment History in Overseas

- Country/City: HONG KONG  
 How many: 2 year 0 months  
 From what: 2017 year to 2019 year  
 Finish contract: ☒ Yes ☐ No  
 Work details: General housework, cooking, elderly care (86 y/o), carwash, marketing
- Country/City: HONG KONG  
 How many: 2 year 2 months  
 From what: 2015 year to 2017 year  
 Finish contract: ☒ Yes ☐ No  
 Work details: General housework, cooking, marketing, elderly care (60 y/o (able)), carwash
- Country/City: KUWAIT  
 How many: 2 year 7 months  
 From what: 2012 year to 2015 year  
 Finish contract: ☒ Yes ☐ No  
 Work details: General housework, cooking, children care (6 y/o twins)



**Specific Working Experience & Preference**

TYPE OF WORK	DO YOU HAVE EXPERIENCE ? (experience in your country or overseas)	ARE YOU WILLING ?
General Cleaning	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Ironing	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Cooking	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Care for newborn	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Care for toddlers (1-3yo)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Care for children (<10yo)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Care for special child	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Tutoring children	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Care for elderly/disable	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Care for bedridden	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Care for pets (dogs/cats)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Laundry - handwash	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Car wash	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Gardening	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**Cooking**

Do you cook in your family in your country?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Are you willing to do cooking for the family of your employer?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Are you willing to learn if the employer want you to learn to cook their food?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
How much do you like cooking? (please answer VERY MUCH, AVERAGE or LITTLE)	<input type="text" value="Average"/>

**Pets**

Are you willing to take care of pets (dogs/cats) if your employer has pets in the house?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Are you afraid of dogs? Are you afraid of big dogs?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**Day Off**

Are you willing to work during your rest-day and employer will pay you overtime?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Are you willing to respect your employer's decision if they want you to take your rest day at home and not going out alone?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Are you ok if you do not go to church when you are working for your employer?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**Cellphone**

Do you promise that you will only use your cellphone after you finish all the work for the day?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Are you willing to following the employer's rules about the daily usage of your cellphone?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**Personal Commitments**

Are you aware that the contract is 2 years and promise to finish the 2 years contract?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Are you ok to work for your employer if they don't have the same religion with you?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Will you have enough patience if your employer is very strict?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Do you promise that you will honest and loyal to your employer?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Did your husband/parents allow you to work in Malaysia as a domestic helper?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Are you ready to separate with your family for the 2 years contract, without going back to your country?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Who will take care of your children when you work in Malaysia?	<input type="text" value="SISTER"/>
If you feel homesick when you work in Malaysia, what are you going to do?	<input type="text" value="I WILL MAKE MY SELF BUSY AND PRAY"/>

## Health Declarations / Dietary Restrictions

Past & existing illness, including chronic ailments and illness requiring medication:

Diabetes (FBS)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Asthma	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Depression	<input type="checkbox"/> Yes <input type="checkbox"/> No
High Blood Pressure	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Anemia (low red blood)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Heart disease	<input type="checkbox"/> Yes <input type="checkbox"/> No
Gastric	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Pneumonia (lung infection)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Epilepsy (seizures)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Migraine	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Dysmenorrhea (period pain)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Malaria	<input type="checkbox"/> Yes <input type="checkbox"/> No

Are you allergic to any food or medications?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If YES, pls specify	
Are you currently taking any medications	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If YES, pls specify	ORAL CONTRACEPTIVES
Have you undergone any surgery in the past?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If YES, pls specify	year
Have you had any accident or injuries before?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If YES, pls specify	year

## Language proficiency

	Good	Average	Poor	No
1 English	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2 Bahasa Malaysia	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3 Chinese	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4 Arabic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

## Special Skills

	Example: caregiver, other cuisine, baking, sewing, etc.
1	ELDERLY CARE
2	

## Additional Courses Attended

Course name	Duration
Example: caregiver, baking, cooking, etc.	e.g. 6 months
1	
2	

## Personal Habits

Habits	Past	Present
Smoking	<input type="checkbox"/>	<input type="checkbox"/>
Vaping	<input type="checkbox"/>	<input type="checkbox"/>
Drinking alcohol (beer, etc.)	<input type="checkbox"/>	<input type="checkbox"/>
Tattoo (show photo is any)	<input type="checkbox"/>	<input type="checkbox"/>

## Hobbies

	Example: cooking, baking, gardening, reading, etc.
1	WATCHING TV
2	

## Personal Statement to Future Employer

< Write something that you wish to tell your future employer about yourself >

HELLO MAAM AND SIR,  
CHOOSE ME AS YOUR HELPER BECAUSE I AM  
HONEST, OBEDIENT AND TRUSTWORTHY.

## APPLICANT DECLARATIONS

My name is **MYLENE BUWAC** (passport no. **P0120546B**) I hereby confirm that all information and details given on this document is, to the best of my knowledge, true and complete. I acknowledge that I have not withheld any information which might preclude me from working abroad in Malaysia.

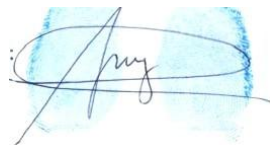
I have given the above information at my own will and I hereby granting my full consent to

**Agensi Pekerjaan Innovedge Sdn Bhd** as my agency in my country and also to

as my agency in Malaysia, to display my personal information and photos/interview video in their website (and other relevant platforms) to facilitate in getting a job and finding an employer for me in Malaysia.

I wish to testify and confirm that I want to work in Malaysia as a domestic helper. I further affirm that I shall, to the best of my abilities to complete my TWO(2) YEARS contract with my employer.

Signature & thumb print :  
of applicant



Date: August 18-2025

## Additional Photos

