

Other Questions

	Yes	No
Able to Handle Pork ?	<input type="checkbox"/>	<input type="checkbox"/>
Able to Eat Pork ?	<input type="checkbox"/>	<input type="checkbox"/>
Able to Handle Beef ?	<input type="checkbox"/>	<input type="checkbox"/>
Able to Care for Dog/Cat	<input type="checkbox"/>	<input type="checkbox"/>
Willing to do Gardening Work ?	<input type="checkbox"/>	<input type="checkbox"/>
Able to do simple Sewing ?	<input type="checkbox"/>	<input type="checkbox"/>
Willing to Wash Car ?	<input type="checkbox"/>	<input type="checkbox"/>
Preferred Number of Days Off per Month		

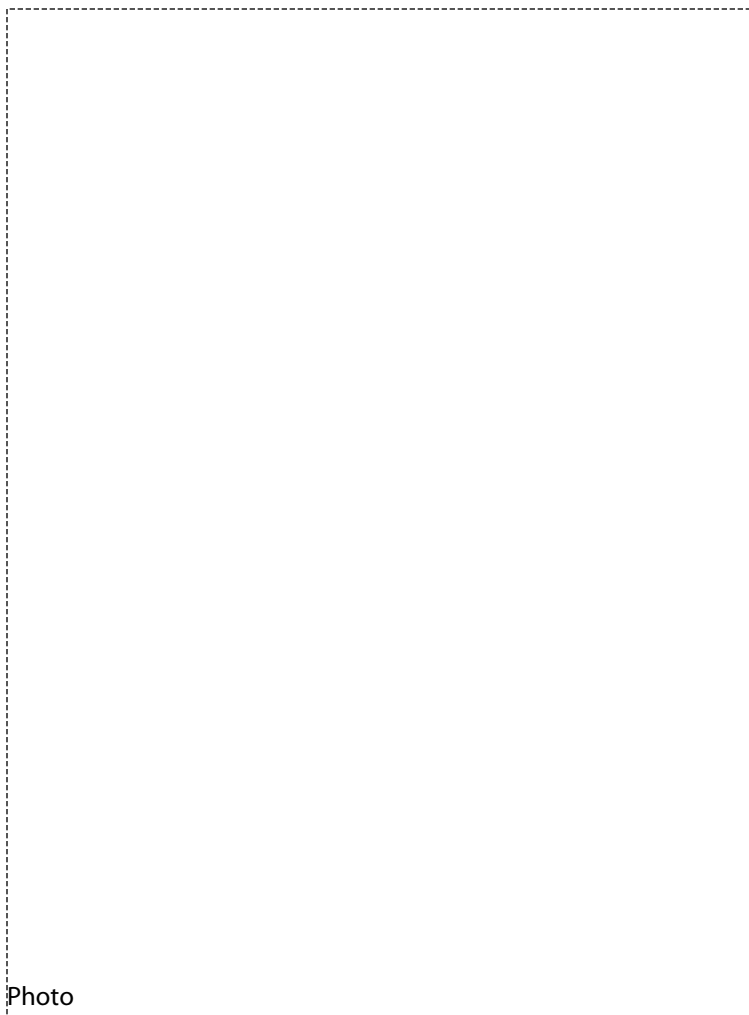
Work Experiences

From (month/year)	To (month/year)	Country	Employer	Describe Job	Remarks

Self Introduction

Introduce Yourself:

Your Full-size Photograph



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