



Walmer Enterprise Village Unit 25 & 26
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Walmer

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PLEASE COMPLETE THE INFORMATION BELOW AND RETURN FAX TO **BEST PLACEMENT**. MANY THANKS.

CLIENT INFORMATION FORM

REFERRED : H : F : KX : TD : NET : W/A : WOM:

POSITION: DOMESTIC

PERSONAL DETAILS

DATE _____

NAME: _____ TELEPHONE: _____

ADDRESS: _____

SALARY OFFERED: _____ TRANSPORT: _____

REQUIREMENTS

PLEASE TICK OR CROSS THE RELEVANT REQUIREMENT

FULL TIME: IN: _____ OUT: _____

CHAR: M _____ T: _____ W: _____ TH: _____ F: _____ S: _____

AGE: _____ RELIGION: _____ SIZE: _____ OTHER: _____

LANGUAGE PREFERRED: ENGLISH _____ AFRIKAANS: _____ BILINGUAL: _____

WRITE: _____ READ: _____

DUTIES AND SKILLS REQUIRED

COOK: _____ CHILDREN: _____ DINNER: _____ PREPARE: _____

TYPE OF MEALS: _____

CHILDREN & AGE: _____

AM: _____ PM: _____ NIGHT: _____

SPECIAL REQUESTS: _____

CLEANING: _____

WASHING: _____ IRONING: _____

SPECIAL REQUESTS: _____

SPECIAL QUALITIES REQUIRED: _____

ANIMAL FRIENDLY _____ INTERVIEW TIME: _____

OFFICE USE ONLY

DATE BPA WORKER DETAILS T S/I R TEMPORARY WORKERS CONFIRMED TELE:

INTERVIEW DATE: _____