



General Information	
Name	I
Age	50 years old
Nationality	Romanian
If non-EU citizen, do you have a valid residence permit?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> N/A
Gender	<input checked="" type="checkbox"/> Female <input type="checkbox"/> Male
Civil status <i>(please select the most appropriate, can be more than 1)</i>	<input type="checkbox"/> Single <input type="checkbox"/> Boyfriend <input type="checkbox"/> Married <input type="checkbox"/> Have children of own <input checked="" type="checkbox"/> Divorced <input type="checkbox"/> Living with parents <input type="checkbox"/> Living on your own <input type="checkbox"/> Living with partner/ boyfriend
	<input type="checkbox"/> If children of own; What are their ages? 29 years old son -----
Driver's license	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes, specify ;
Driving experience	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes, specify ; in Romania and abroad
Willing to drive abroad	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Smoking	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> On occasions only
Do you understand if you are a smoker you are not allowed to smoke near the children nor inside the house?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Do you have any visual piercings or tattoos?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, specify ;
Do you want to take care of pets? <i>(walking, feeding, playing with pets)</i>	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes, specify ; I love animals and I have a dog and a kitty myself
Program that you are interested in: More options	<input checked="" type="checkbox"/> Light household chores <input checked="" type="checkbox"/> Cleaning <i>(light and heavy household chores)</i> <input type="checkbox"/> Elderly Support <input checked="" type="checkbox"/> Childcare <input type="checkbox"/> Children with special needs <input checked="" type="checkbox"/> Personal assistant / house management
Position	<input checked="" type="checkbox"/> Live-in position <input type="checkbox"/> Live-out position
Are you available for 1 year? <i>(1 year is required)</i>	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (I am planning to stay 5 years if all goes well)
Earliest start date	10th June 2018

Education				
Education / course	Name of institute	Start year	End year	Diploma
High School	Romania	1995	1998	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
School of Commerce and Industry Chamber	Romania	1998	2000	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
University Bucharest	Romania	2000	2004	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No



Master "Methods and skills in Economic communication"	Romania	2004	2006	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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Language Skills					
English	<input type="checkbox"/> Native	<input type="checkbox"/> Fluent	<input checked="" type="checkbox"/> Good	<input type="checkbox"/> Moderate	<input type="checkbox"/> Poor
Dutch	<input type="checkbox"/> Native	<input type="checkbox"/> Fluent	<input type="checkbox"/> Good	<input type="checkbox"/> Moderate	<input checked="" type="checkbox"/> Poor
Other: Italian	<input type="checkbox"/> Native	<input type="checkbox"/> Fluent	<input checked="" type="checkbox"/> Good	<input type="checkbox"/> Moderate	<input type="checkbox"/> Poor
Other: Arabic	<input type="checkbox"/> Native	<input type="checkbox"/> Fluent	<input type="checkbox"/> Good	<input checked="" type="checkbox"/> Moderate	<input type="checkbox"/> Poor

Relevant Working experience					
Employer	Job description	Hours per week	Start date	End date	Reference included
Private corp.	Sales agent		1985	1990	<input type="checkbox"/> Yes <input type="checkbox"/> No
Private corp	Administrator houses / villas		1995	1998	<input type="checkbox"/> Yes <input type="checkbox"/> No
Private corp.	depot computer soft		2000	2001	<input type="checkbox"/> Yes <input type="checkbox"/> No
Private corp.	Accountant		2001	2003	<input type="checkbox"/> Yes <input type="checkbox"/> No
Private corp.	Insurance selling agent		2003	2004	<input type="checkbox"/> Yes <input type="checkbox"/> No
Private corp.	Consultant agent		2004	2005	<input type="checkbox"/> Yes <input type="checkbox"/> No
Private corp.	Administrator Travel agency		2005	2007	<input type="checkbox"/> Yes <input type="checkbox"/> No
Private corp.	Chef assurance consulting for life, health in Fermo (FM), Italy, RIU, IVAS recording. Responsibilities: contacting new clients; negotiating new contracts; managing client portofolio (500 customers); monitoring subordinate employee, 2 people		2007	2008	<input type="checkbox"/> Yes <input type="checkbox"/> No
Private corp.	Chef for autonomy sector, " Riccione (RN) agency Italy, RIU, IVAS recording Responsibilities: managing client portofolio (400 customers) ; contacting new clients; negotiating new contracts; personal recruitment; monitoring subordinate employees(3 people); training for collaborators; designing sales strategies; meeting and overcoming goals		2009	2013	<input type="checkbox"/> Yes <input type="checkbox"/> No
Private corp.	Human Resource consultant for Italy, Responsibilities: contacting new clients; negotiating new contracts; personal recruitment; intermediating relationship between company and employee clients; monitoring subordinate employee 6 truck drivers		2013	2015	<input type="checkbox"/> Yes <input type="checkbox"/> No
Private corp.	My own company import - export North Africa, CEO, founder - Responsibilities: designing, implementing and monitoring		2016	2017	<input type="checkbox"/> Yes <input type="checkbox"/> No



Relevant Elderly experience	
Are you willing to work with elderly people? <i>(help in the household, do groceries, prepare food, accompany elderly people, go for a walk)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(if no, please go to "Household Working Experience")</i>
Do you have experience working with elderly people?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Rate yourself on your elderly experience	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10
Rate yourself on how well you perform your tasks for elderly	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10
Rate yourself on how much you enjoy working with elderly people	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10

Household Working Experience	
Do you want to do light household chores? <i>(E.g. washing dishes, tidy kitchen, cooking, keep the kitchen clean and organized, grocery shopping, mopping, washing laundry, hang-up laundry, sort laundry, put the laundry away, iron clothing, arrange the rooms in the house, make the beds, change the beds, organize the bedrooms of the children, hover the rooms of the house, give water to the plants in the house)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Rate yourself on your light household experience	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input checked="" type="checkbox"/> 9 <input type="checkbox"/> 10
Rate yourself on how well you perform the light household chores	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input checked="" type="checkbox"/> 9 <input type="checkbox"/> 10
Rate yourself on how much you enjoy performing light household chores	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input checked="" type="checkbox"/> 9 <input type="checkbox"/> 10
Do you want to do heavy household chores? <i>(E.g. gardening, cleaning the windows, wash and clean the car, clean the whole house incl. bathrooms, re-organize inventory, put the trash outside, recycle paper/ glass/ plastic, help out during parties)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Rate yourself on your heavy household experience	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input checked="" type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10
Rate yourself on how well you perform the heavy household chores	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input checked="" type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10
Rate yourself on how much you enjoy performing heavy household chores	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input checked="" type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10

Cooking	
Are you a vegetarian or vegan?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, specify ;
Rate yourself on your cooking experience	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input checked="" type="checkbox"/> 9 <input type="checkbox"/> 10
Rate yourself on how well you can cook	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input checked="" type="checkbox"/> 9 <input type="checkbox"/> 10
Rate yourself on how much you like to cook	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input checked="" type="checkbox"/> 9 <input type="checkbox"/> 10

Additional Personal Information			
Do you have any special religious faith needs or diet habits that will interfere with your job ?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> None. Specify :		
Do you know anyone/ do you have any relatives who live in the Netherlands? If you do, what is your relation with this person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> None. Specify :		
Please select 6 words that describe characteristics of your personality best	<input checked="" type="checkbox"/> Exploring <input type="checkbox"/> Open to new ideas <input checked="" type="checkbox"/> Practical <input type="checkbox"/> Relaxed	<input checked="" type="checkbox"/> Disciplined <input checked="" type="checkbox"/> Very organized <input type="checkbox"/> Spontaneous <input type="checkbox"/> Impulsive	<input type="checkbox"/> Quite organized <input type="checkbox"/> Compromising <input type="checkbox"/> Not easily distracted <input checked="" type="checkbox"/> Innovative and creative



	<input checked="" type="checkbox"/> Flexible	<input type="checkbox"/> Good in following instructions
Name your interests and hobbies?	1. yoga	2. Discover new cultures
What type of sports do you do?	1. yoga	

Suitability to work abroad	
Have you worked abroad before? If so, in which countries?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes, specify: Italy
Have you ever been in the Netherlands/ Belgium	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes, specify: Vacation
What is the reason you want to work in the Netherlands/ Belgium?	I visit the Netherlands 3-4 times and I love the country and the people
What do you like most about your own country and what do you dislike?	I like the nature, the fact that is reach in natural resources and also the people and some of the traditions I dislike the political situation of my country at the moment; that there is no future perspective for the young generation at the moment
What will you miss most while working abroad?	My family (my son, my mum)
How will you adjust to a new country and new culture?	Very easy; I have done so in Italy and even in Tunisia
Did you ever experience home sickness? If so, how did you overcome the home sickness?	No
What difficulties do you expect to encounter whilst working in the Netherlands/ Belgium?	None
How are you going to spend your free time in the Netherlands/ Belgium?	I would love to learn the language, practice yoga, discover Holland
What are your future plans after finishing this job?	Firstly I would like to give myself 5 years or even more to this job and do some savings for myself. After 5 years I will see for new opportunities