

Work Pass Division Ministry of Manpower 18 Havelock Road Singapore 059764

Telephone: (65) 64385122

Website : http://www.mom.gov.sg Email : mom_wpd@mom.gov.sg

EMPLOYMENT HISTORY OF WORK PERMIT HOLDER

Date printed

: 16/03/2021

Employment Agency

: UNITED CHANNEL SERVICES PTE. LTD. (11C4954)

Worker Details

WP No.

: 0 09044450

Name of Worker

: YATI

DOB of Worker

: 07/05/1981

Sex

: FEMALE

Worker's FIN

: G2952026M

Passport No.

: AT885470

Nationality/Citizenship

: INDONESIAN

Employment History

Results Found: 2				
Employer	Period of Employment		Industry	
	Start Date	End Date		
Employer 2	29/08/2020		General Household	
Employer 1	16/03/2017	14/09/2018	General Household	

No person shall in any way make any additions, modifications, adjustments or alterations to the information, or further disclose the information to any other person(s) unless required by the Ministry of Manpower.

ERHATIAN

stau metakukan cetakan daniatau Republik Indonesia

dan Perwakilan Magara Asing yang akan dikuriya

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PASPORT PASSPORT



REPUBLIK INDONESIA REPUBLIC OF INDONESIA

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MODE NEGARA : ZOURTHY C

IDN

KAMA LENGKAP I FULL HARR

YATI

KEWARGANEGARAAN / NATIONALITY

INDONESIA

TOL LANCE | DATE OF BOTH 07 MAY 1981

01 FEB 2017

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AT885470

SUBANG

01 FEB 2022

DEPOK

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Date:	
To:	
Work Permit Department	
Ministry Of Manpower	
18 Havelock Road	
Singapore 059764	
Siligapore 033704	
502	
Dear Sir / Madam	
Dear Sir / Iviauaiii	
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CONCENT TO TRANSFER FO	DEICNI DOMESTIC WORKER
CONSENT TO TRANSFER FO	KEIGN DOWESTIC WORKER
	yati
FOREIGN DOMESTIC WORKER	yati'
	0 09044450
WORK PERMIT	0 - 1 - 1 - 1 - 1 - 1
DATE OF ARRUGATION	
DATE OF APPLICATION	
. Chong Ah 7/M	of NRIC / Passport No. 5/639666E
(Name of Current Employer)	of NRIC / Passport No
(Name of Current Employer)	
Agree to release my Foreign Domes	tic Worker named above to the prospective employer
Agree to release my roreign bornes	the Worker numed above to the prospective employer
(Name of Prospective Employer	•)
(Manie of Frospective Employer	
Pending the outcome of the applica	ation, I undertake all responsibilities for the employment
	er and will extend her work permit (if necessary).
o o	γ,
If the application is not approved, I	will repatriate this worker.
\wedge	
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Signature of Current Employer	