



R & R FOREIGN EMPLOYMENT AGENCY

Address : No. 14 2/1, Station Road, Negombo

Tel : 031-2235112

Mob : 077-8197695

E-mail : rnr2639@gmail.com / rnr2639@yahoo.com

SLBFE NO: 2639

APPLICATION OF CANDIDATE

Ref no. - RRF 537
 Post Applied For - CARE GIVER - ISRAEL
 Name with Initials - J. M. D. D. N. K. JAYAMANNA
 Name in Full - JAYAMANNA MOHOTTIGE DON DULANJALI
 NIMESHA KUMARI JAYAMANNA
 Date of Birth - 13/05/1992 Age: 28
 Permanent Address - NO. 214/A, CANEL ROAD, HENDALA, WATTALA
 Gender - FEMALE
 NIC No. - 199263400182
 Religion - ROMAN CATHOLIC
 Civil Status - SINGLE
 Height - 160 cm
 Weight - 60 kg
 Passport Number - N6899541
 Place of Issue - COLOMBO
 Date of Issue - 16/12/2016
 Date of Expiry - 16/12/2026
 Previous Passport No. - ~~NO~~
 Driving License - B3585139
 Education Qualification - UP TO G.C.E. A/L
 Knowledge of Language - ENGLISH, SINHALA, HEBREW



Family Details

Father's Name - JAYAMANNA MOHOTTIGE DON PATRICK
 Father's Date of Birth - 08/03/1948
 Father's Passport no. - PASSED AWAY
 Mother's Name - SUBASINGHA ARACHCHIGE MARY HARIET
 Mother's Date of Birth - 19/11/1951
 Mother's Passport no. - NO
 Spouse's Name - NO
 Spouse's Date of Birth - NO
 Spouse's Passport no. - NO

Knowledge In		
	Yes	No
Cleaning	✓	
Cooking	✓	
Washing	✓	
Ironing	✓	
Gardening	✓	
Care of Children	✓	
Care of Old and Disabled People	✓	
Dipper Changing	✓	
Sick People	✓	
First Aid	✓	
Care Taken	✓	
Wheel Chair handling	✓	
Emergency Technic	✓	
Medication	✓	
Driving	✓	

Family Details

Brothers/Sisters - 2 SISTERS
Brothers/Sisters in Israel - NO
Children - NO
Children(More Than 18 Years) - NO

Working Experience/s

Country	Duration	Job Description

Training Courses

Course	Training Center	Duration
CAREGIVING COURSE	SLBFE RATHNAPURA TRAINING CENTER	45 DAYS
CAREGIVING COURSE	RNR CAMPUS	30 DAYS
ENGLISH COURSE	RNR CAMPUS	30 DAYS

I hear by declare that the particulars furnished by me are true and accurate to the best of my knowledge.

A. L. M. Shifan

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Interviewed by

A. L. M. SHIFAN
Design Engineer &
Interior Architect
R & R Campus

Deleget Jajamanna

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Signature of Applicant

Passport Copy attached



