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| S.No. | Name of Document | Remarks |
| 1. | Joining Form |  |
| 2. | Confidentiality Form |  |
| 3. | Antecedent Check Form |  |
| 4. | Offer letter with terms & conditions of the Hospital |  |
| 5. | Annual medical examination form & report |  |
| 6. | Job Description |  |
| 7. | Resume/CV |  |
| 8. | Copy of ID Proof |  |
| 9. | Copy of 10th mark sheet passing certificate |  |
| 10. | Copy of 12th mark sheet passing certificate |  |
| 11. | Copy of grad/post grad. Mark sheet |  |
| 12. | 2 Passport size Photos |  |
| 13. | Training Record |  |
| 14. | Physical Fitness Certificate |  |
| 15. | Declaration for Vaccinations |  |

**HR Checklist**

Checked by: ……………………………………………………………………………SING:…..……..……………………………………