

EMPLOYEE RECORDS CHECKLIST

SECTION 1 - RECRUITMENT

Employee Name/ID:				Job Title:			
Nationality:				Actual Joining Date:			
RECRUITMENT	Yes	N/A	HRA	RECRUITMENT (Cont)	Yes	N/A	HRA
<u>Source Candidates</u>				CME's - BLS, PALS, PHTLS, ACTLS			
Sponsored Students	<input type="checkbox"/>	<input type="checkbox"/>		Police Clearance	<input type="checkbox"/>	<input type="checkbox"/>	
Direct	<input type="checkbox"/>	<input type="checkbox"/>		CGF175 Employee Health General Questionnaire	<input type="checkbox"/>	<input type="checkbox"/>	
Career Portal - NA Website	<input type="checkbox"/>	<input type="checkbox"/>		Family Book - Emirati Only	<input type="checkbox"/>	<input type="checkbox"/>	
Career Portal - LinkedIn	<input type="checkbox"/>	<input type="checkbox"/>		Clinical Assessment Result	<input type="checkbox"/>	<input type="checkbox"/>	
Recruitment Agency	<input type="checkbox"/>	<input type="checkbox"/>		HR Interview	<input type="checkbox"/>	<input type="checkbox"/>	
Govt. to Govt. Recruitment	<input type="checkbox"/>	<input type="checkbox"/>		Psychometric	<input type="checkbox"/>	<input type="checkbox"/>	
<u>Pre-Employment</u>				PSG Approval			
HRF543 Recruitment Application Form	<input type="checkbox"/>	<input type="checkbox"/>		Pre-Employment	<input type="checkbox"/>	<input type="checkbox"/>	
HRF108 DOH Licensing Induction Checklist	<input type="checkbox"/>	<input type="checkbox"/>		Certificate of Fitness	<input type="checkbox"/>	<input type="checkbox"/>	
HRF538 Employment Approval Form	<input type="checkbox"/>	<input type="checkbox"/>		HRF110 Healthcare Recruitment Approval Form	<input type="checkbox"/>	<input type="checkbox"/>	
CV/Resume	<input type="checkbox"/>	<input type="checkbox"/>		HRF111 Non-Healthcare Recruitment Approval Form	<input type="checkbox"/>	<input type="checkbox"/>	
Passport	<input type="checkbox"/>	<input type="checkbox"/>		Letter of Intent	<input type="checkbox"/>	<input type="checkbox"/>	
Photo (colored in white background)	<input type="checkbox"/>	<input type="checkbox"/>		Letter of Offer	<input type="checkbox"/>	<input type="checkbox"/>	
UAE Residence Visa/Visit Visa	<input type="checkbox"/>	<input type="checkbox"/>		HRF104 Reference Check Form	<input type="checkbox"/>	<input type="checkbox"/>	
UAE Emirates ID	<input type="checkbox"/>	<input type="checkbox"/>		Availability Confirmation - Joining Date	<input type="checkbox"/>	<input type="checkbox"/>	
Home Country Driving License	<input type="checkbox"/>	<input type="checkbox"/>		Visa Cancellation	<input type="checkbox"/>	<input type="checkbox"/>	
UAE Driving License	<input type="checkbox"/>	<input type="checkbox"/>		Entry Permit	<input type="checkbox"/>	<input type="checkbox"/>	
Diploma / BS / MBA (attested)	<input type="checkbox"/>	<input type="checkbox"/>		Insurance Continuity Certificate (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	
Transcript of Records (attested)	<input type="checkbox"/>	<input type="checkbox"/>		No Objection Certificate (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	
High School Certificate	<input type="checkbox"/>	<input type="checkbox"/>		Employee Number Issuance Confirmation	<input type="checkbox"/>	<input type="checkbox"/>	
Employment Certificate / Experience Letter	<input type="checkbox"/>	<input type="checkbox"/>		Pre-Employment Handbook: Introduction to UAE	<input type="checkbox"/>	<input type="checkbox"/>	
License to Practice	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
Health License ID from home country/last country of exp	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
Letter of Good Standing (from licensing authority NLT 6mos)	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
DataFlow Report	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
Checked by:				Date:			
Verified by: NOUF ABDULLA				Date:			
HR & Corporate Services Manager/Head of Emiratisation Program							



SECTION 2 - ONBOARDING

Employee Name/ID:				Job Title:			
Nationality:				Actual Joining Date:			
ONBOARDING	Yes	N/A	HRA	ONBOARDING	Yes	N/A	HRA
HRF405 New Employee Induction Checklist	<input type="checkbox"/>	<input type="checkbox"/>		HRP306 Dress Code Policy and Procedures	<input type="checkbox"/>	<input type="checkbox"/>	
HRF535 OnBoarding Acknowledgement Form	<input type="checkbox"/>	<input type="checkbox"/>		INDUCTION	Yes	N/A	HRA
HRF307 Keys and Cards Acknowledgement Receipt	<input type="checkbox"/>	<input type="checkbox"/>		Conflict of Interest Declaration	<input type="checkbox"/>	<input type="checkbox"/>	
HRF202 Mobile & Sim Acknowledgement (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>		Declaration/Undertaking from the student	<input type="checkbox"/>	<input type="checkbox"/>	
Pension Form (GCC National)	<input type="checkbox"/>	<input type="checkbox"/>		<u>Employment</u>			
HRF203 Employment Contract	<input type="checkbox"/>	<input type="checkbox"/>		Employment - Medical Test	<input type="checkbox"/>	<input type="checkbox"/>	
Position Description	<input type="checkbox"/>	<input type="checkbox"/>		Emirates ID Application/Biometrics Scanning (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	
COP202 Code of Conduct Professional and Work Ethics Conduct	<input type="checkbox"/>	<input type="checkbox"/>		Health Insurance Application	<input type="checkbox"/>	<input type="checkbox"/>	
COP403 General Confidentiality Policy and Procedure	<input type="checkbox"/>	<input type="checkbox"/>		Visa Processing (Residence Visa & EID)	<input type="checkbox"/>	<input type="checkbox"/>	
COF310 Employee Non-Disclosure Agreement (NDA)	<input type="checkbox"/>	<input type="checkbox"/>		Biometrics Registration	<input type="checkbox"/>	<input type="checkbox"/>	
CGF180 Patient Care Record Folder Confidentiality Agreement (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>		Kronos Registration	<input type="checkbox"/>	<input type="checkbox"/>	
HRF539 Professional Appearance Undertaking Acknowledgement	<input type="checkbox"/>	<input type="checkbox"/>		Photo	<input type="checkbox"/>	<input type="checkbox"/>	
HRF522 Email Address Acknowledgement	<input type="checkbox"/>	<input type="checkbox"/>					
HRF507 Acknowledgement of Status (expat - unaccompanied)	<input type="checkbox"/>	<input type="checkbox"/>					
HRF530 Uniform Acknowledgement	<input type="checkbox"/>	<input type="checkbox"/>					
HRF506 Personal Details Form	<input type="checkbox"/>	<input type="checkbox"/>					
HRF515 ERP Data Form	<input type="checkbox"/>	<input type="checkbox"/>					
HRF304 Payroll Details Form	<input type="checkbox"/>	<input type="checkbox"/>					
HRF519 EMT-B UAE Driving License Requirement Form (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>					
HRF534 Salary Advance Acknowledgement (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>					
COP405 Attendance Policy and Procedure	<input type="checkbox"/>	<input type="checkbox"/>					
Checked by:				Date:			
Verified by: NOUF ABDULLA HR & Corporate Services Manager/Head of Emiratization Program				Date:			



Employee Records Checklist  
July 2022

HRF541  
Version 2

Employee Name/ID:				Job Title:			
Nationality:				Actual Joining Date:			
PROBATION	Yes	N/A	HRA	EMPLOYEE RELATION	Yes	N/A	HRA
HRF302 Probation Assessment	<input type="checkbox"/>	<input type="checkbox"/>		Notice Letter	<input type="checkbox"/>	<input type="checkbox"/>	
Completion of Probation Letter	<input type="checkbox"/>	<input type="checkbox"/>		Written Warning	<input type="checkbox"/>	<input type="checkbox"/>	
TRANSFER	Yes	N/A	HRA	Record Conversation	<input type="checkbox"/>	<input type="checkbox"/>	
HRF518 Transfer Request Form	<input type="checkbox"/>	<input type="checkbox"/>		Light Duties - Loss of Entitlement	<input type="checkbox"/>	<input type="checkbox"/>	
PERFORMANCE ASSESSMENT FORM	Yes	N/A	HRA	ADP - new	<input type="checkbox"/>	<input type="checkbox"/>	
COF308 Performance Review Form: NE EMT-B	<input type="checkbox"/>	<input type="checkbox"/>		ADP - renewal	<input type="checkbox"/>	<input type="checkbox"/>	
COF307 Performance Review Form: NE Area Lead	<input type="checkbox"/>	<input type="checkbox"/>		MOPA / ADAC Security Pass	<input type="checkbox"/>	<input type="checkbox"/>	
COF306 Performance Review Form: AD Operation Staff	<input type="checkbox"/>	<input type="checkbox"/>		DOH license	<input type="checkbox"/>	<input type="checkbox"/>	
COF309 Performance Review Form: Abu Dhabi Operations Doctor	<input type="checkbox"/>	<input type="checkbox"/>		MOH / MOHAP License	<input type="checkbox"/>	<input type="checkbox"/>	
COF204 Performance Review Form	<input type="checkbox"/>	<input type="checkbox"/>		Failure to Obtain License	<input type="checkbox"/>	<input type="checkbox"/>	
HRF502 Individual Performance Action Plan	<input type="checkbox"/>	<input type="checkbox"/>		Change Position	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>		Change of Entitlement	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>		Change of Project	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>		Amendment Letter	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>		HRF505 Employment Contract Review Form	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>		Collision Letters	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>		DA - undertaking	<input type="checkbox"/>	<input type="checkbox"/>	
Checked by:				Date:			
Verified by: NOUF ABDULLA HR & Corporate Services Manager/Head of Emiratization Program				Date:			

SECTION 4 - OFFBOARDING

Employee Name/ID:				Job Title:			
Actual Joining Date:				Leaving Date:			
OFFBOARDING	Yes	N/A	HRA	OFFBOARDING	Yes	N/A	HRA
HRF401 Resignation Form	<input type="checkbox"/>	<input type="checkbox"/>		Vehicle/Outstanding Traffic Fines (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	
Resignation Acceptance Letter	<input type="checkbox"/>	<input type="checkbox"/>		Deactivation of Email Address	<input type="checkbox"/>	<input type="checkbox"/>	
HRF403 Exit Interview Questionnaire	<input type="checkbox"/>	<input type="checkbox"/>		Deactivation of Biometrics	<input type="checkbox"/>	<input type="checkbox"/>	
HRF404 Termination of Employment Checklist	<input type="checkbox"/>	<input type="checkbox"/>		Deactivation of SMS Broadcast	<input type="checkbox"/>	<input type="checkbox"/>	
HRF531 Employee Clearance Form	<input type="checkbox"/>	<input type="checkbox"/>		Submission of Laptop (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	
Overtime/Extra Duty Detail/Tardiness (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>		Submission of Mobile Phone / Simcard (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	
Leave Balance	<input type="checkbox"/>	<input type="checkbox"/>		Deactivation of intranet / Web Mail	<input type="checkbox"/>	<input type="checkbox"/>	
HRF529 Legal Undertaking	<input type="checkbox"/>	<input type="checkbox"/>		Deactivation of OPIQ Account	<input type="checkbox"/>	<input type="checkbox"/>	
HRF407 Final Settlement and Visa Cancellation Acknowledgement Form	<input type="checkbox"/>	<input type="checkbox"/>		Removal from Global List	<input type="checkbox"/>	<input type="checkbox"/>	
Residence Visa Cancellation	<input type="checkbox"/>	<input type="checkbox"/>		HAAD/DOH License Cancellation	<input type="checkbox"/>	<input type="checkbox"/>	
HRF536 Offboarding Acknowledgement	<input type="checkbox"/>	<input type="checkbox"/>		Collection of Passes	<input type="checkbox"/>	<input type="checkbox"/>	
Employment Certificate	<input type="checkbox"/>	<input type="checkbox"/>		CME/Training Certificates	<input type="checkbox"/>	<input type="checkbox"/>	
Bank Notificaion (Letter)	<input type="checkbox"/>	<input type="checkbox"/>		Deactivation of LMS	<input type="checkbox"/>	<input type="checkbox"/>	
NOC (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>		Cancellation of Access Card	<input type="checkbox"/>	<input type="checkbox"/>	
Health Insurance Card Cancellation (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>		Cancellation of Parking Card	<input type="checkbox"/>	<input type="checkbox"/>	
Repatriation Ticket (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>		Final Payment bank transfer confirmation	<input type="checkbox"/>	<input type="checkbox"/>	
Request for Payment	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
Fazaa Card Cancellation	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
NA ID Cancellation	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
Uniform Submission (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
Medical Equipment's Submission (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
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	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
Checked by:				Date:			
Verified by: NOUF ABDULLA				Date:			
HR & Corporate Services Manager/Head of Emiratization Program							

