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| --- | --- | --- | --- |
| **Candidate's Name:**  **RECRUITMENT CHECKLIST FORM** |  | **Position:** |  |
| **Nationality:** |  | **Date:** |  |
| **Recruitment Checklist - to be completed during Recruitment Process & before on-boarding** | | | |
| **(Hard Copy on Personal File & Soft Copy in N Drive)** | | | |
| **Received (** Checkmark with solid fill **)** | **Documents must be completed before the Recruitment Processes** | **Doc. Ref. No.** | **Remarks** |
|  | DOH Licensing Induction Checklist (for clinicians only) | HRF108 |  |
|  | EMT-B Application Form | HRF102 | For EMT-B only |
|  | EMT-A Application Form (if applicable) | HRF109 | For EMT-A only |
|  | Vacancy Application - Candidate Summary | HRF101 | For local hire only |
|  | Employment Approval Form (PSG Pre Submission Form) | HRF538 |  |
|  | Vacancy Questionnaire | HRF532 | For EMT-A & Medical Doctor only |
|  | CV / Resume |  |  |
|  | Passport |  |  |
|  | Residence Visa |  |  |
|  | Emirates ID |  |  |
|  | Home Country Driving License (if any/applicable) |  |  |
|  | UAE Driving License (if any & applicable) |  |  |
|  | Photo |  |  |
|  | Diploma (attested/authenticated) |  |  |
|  | Transcript of Records (attested/authenticated) |  |  |
|  | High School Certificate |  |  |
|  | Employment Certificate |  |  |
|  | License to Practice (if applicable) |  |  |
|  | Letter of Good Standing from the licensing Authority (if applicable) |  |  |
|  | Dataflow Report (if any & for clinicians only) |  |  |
|  | CMEs / Training Certificate (if applicable) |  |  |
|  | Police Clearance (if applicable) |  |  |
|  | **Others** (please specify): |  |  |
| **Completed (** Checkmark with solid fill **)** | **Recruitment Processes (reports & documents must be on file)** | **Doc. Ref. No.** | **Remarks** |
|  | Clinical Assessment Result (for clinicians only) |  |  |
|  | Interview Questions (HR Interview) |  |  |
|  | Pre-employment Screening Test Results |  | c/o Occupational Health |
|  | Employee Health General Questionnaire | CGF175 | Approved by Medical Director |
|  | PSG Approval |  |  |
|  | Healthcare Recruitment Approval Form | HRF110 |  |
|  | Recruitment Non-Health Professional Approval Form | HRF111 |  |
|  | Letter of Offer (LoO) with Confirmation Acceptance |  |  |
|  | Reference Check Form | HRF104 |  |
| **Arranged (** Checkmark with solid fill **)** | **To be completed before the on-boarding** | **Doc. Ref. No.** | **Remarks** |
|  | Availability Confirmation |  |  |
|  | Visa Cancellation/ Entry Permit / Work Permit |  |  |
|  | Insurance Continuity Certificate (if applicable) |  |  |
|  | Flight Information - for the ticket entitlement |  |  |
|  | Flight Booking (if applicable) |  |  |
|  | NOC (if applicable) |  |  |
|  | Uniforms (if applicable) |  |  |
|  | Employee Number |  |  |
|  | Email Announcement |  |  |
|  | Welcome Packs |  |  |
| **(**Checkmark with solid fill**)** | **Filing / Personal Files** |  | **Remarks** |
|  | Scanned Copies on N Drive |  |  |
|  | Hard Copy - Personal Files |  |  |
| Remarks/Notes:  Checked by (name & signature): | | | |