## EUROPEANBIZ

## REGISTRATION DOCUMENTS

## Registration Form completed and signed <br> Terms Of Engagement, signed <br> Handbook Declaration Form, signed <br> ID Badge issued

48 Hrs Opt Out Agreement signed
$\square$ GDPR Consent, signed
$\square$ Health Assessment Form completed and signed Interview completed and signed

## IDENTITY CHECK AND RIGHT TO WORK

$\left(\begin{array}{|cclcc|}* \text { Original Passport together with appropriate visa/biometric card } & \square & \text { Passport expiry date } & \\ \text { Type of Visa } & \text { Visa expiry date } & \text { One passport size photo } & \square \\ \text { *Two proofs of address not older than 3 months } & \square & \text { *Proof of NI (NI card or payslip) } & \square \\ \hline\end{array}\right.$

## EMPLOYMENT HISTORY \& REFERENCES

CV detailing continuous employment history and all gaps explained in months/years
Three referee details, two of which must be the most current and they must support the speciality you wish to work at.


QUALIFICATIONS \& PROFESSIONAL REGISTRATION
*Original GMC/GDC certificate $\quad \square \quad$ *Original IELTS certificate $\square$ *Medical Diploma
Latest GMC/GDC Check
Copy of Professional Indemnity certificate
REVALIDATION \& APPRAISALS

| Most recent appraisal <br> Revalidation Body | $\square$ | Date of the appraisal |  | Appraiser GMC Number |
| :--- | :--- | :--- | :--- | :--- |

## OCCUPATIONAL HEALTH REOUIREMENTS

Varicella $\square$ TB immunity $\square$ Rubella $\square$ Measles $\square$ Hep B results titre level>100mIU/mL
FTWC Type NEPP EPPHepatitis B Surface Antigen $\square$ Hepatitis C $\square$ HIV $\square$ FTWC issue date $\square$

## DISCLOSURE AND BARRING SERVICE

Original DBS certificate if subscribed with the Update Service $\quad \square$
DBS certificate number Update Service Check date:

DBS certificate issue date
If new to the UK, Police check from your country of origin issued within the last three months

## TRAINING



Please note that the documents (marked with*)must be verified as original seen. Sign off Date
Manager's Name:
Sign Off Signature:

