

Please check, verify all proof and documentation provided by the applicant.

## Personal Details

First Name

Last Name

Position Applied for

DOB:

## Completed Forms, Docs and Evidence

Application Form

CV

NMC PIN

Photograph (Verified)

Bank Details Forms

Working Time Regulation

Skills Check

Employment History and any Gaps Discussed and Documented

## Interview Notes

## Identification (Proof of Right to Work)

Photo ID:

Passport

Driving License

Residence Permit

Marriage Certificate

Birth Certificate

Visa Work Permit

**Proof of Address:**

Bank Statement

Utility Bill

Other

*(Issued within the last 3 months)*

Proof of NI – P45/46/CARD

DBS Certificate

## Qualifications

Degree

Diploma Certificates

Statement of Entry (NMC)

NMC Registration Status (Nurses)

Indemnity Insurance (RCN/Unison)

## Reference:

Reference 1

Reference 2

## Occupation Health

Immunisation Report: (NMR)

Hepatitis B

Varicella

BCG

Medical Questionnaire Form

Fitness to work

Mandatory Training:	Expiry Date	
Basic Life Support		
Manual Handling		
Information Governance (Inc Record keeping & Caldicott Protocols, Data Protection]		
Infection Control – Coshh – Riddor		
Equality, Diversity & Inclusion		
Fire Safety		
Food Hygiene		
Handling Medication		
Handling Violence Aggression & Complaints (Conflict Resolution)		
Health & Safety (Inc First Aid Awareness & Falls Prevention)		
Soca Level 2		
SOVA		
Mental Capacity Act 2005		
Reotrant Training (RMN only)		

**Company Information issued**

- Employment Number
- Badge
- Uniform
- Handbook
- Induction
- Company Policies

Notes

Final Admin Check

Manager Check

Date

Date

Name

Name

Signature

Signature