

Induction Paperwork Checklist

Name:

Grade:

Specialty:

PACK B

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|------------------------------|--------------------------|------------------------------------|--------------------------|
| Passport | <input type="checkbox"/> | Declaration of Interests | <input type="checkbox"/> |
| CRB Form | <input type="checkbox"/> | Administration of Medicines | <input type="checkbox"/> |
| CRB Disclosure | <input type="checkbox"/> | Prescribing Medicines | <input type="checkbox"/> |
| Occupational Health | <input type="checkbox"/> | ID Card/ Staff Car Parking | <input type="checkbox"/> |
| GMC / GDC Certificate | <input type="checkbox"/> | Lottery | <input type="checkbox"/> |
| <u>FINANCE</u> | | Personal Email (Monitoring) | <input type="checkbox"/> |
| Previous NHS Payslip | <input type="checkbox"/> | | |

FORMS TO SEND TO OTHER DEPARTMENTS

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|----------------------------------|--------------------------|------------------------------------|--------------------------|
| Payroll Form | <input type="checkbox"/> | Foundation Trust Membership | <input type="checkbox"/> |
| Previous NHS Service | <input type="checkbox"/> | Pharmacy Form | <input type="checkbox"/> |
| Tax Form P46 or P45 | <input type="checkbox"/> | Emergency Contact Details | <input type="checkbox"/> |
| SD502 (Pension Opt - Out) | <input type="checkbox"/> | IT Access | <input type="checkbox"/> |
| Doctor's Mess | <input type="checkbox"/> | Accommodation Form | <input type="checkbox"/> |

PACK A

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|----------------------------------------|--------------------------|
| Additional Data Collection Form | <input type="checkbox"/> |
| Statement of Confidentiality | <input type="checkbox"/> |
| Child Protection | <input type="checkbox"/> |
| Declaration Statement | <input type="checkbox"/> |

NOTES:

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