

Confirmation of Pre –Employment Checks Completed

Applicant Full Name:		
Applicant E-mail:		Applicant Mobile:
Applicant NI Number:	Applicant Date of Birth:	Date Documents Checked:
Name of the HR Officer who Verifies Employment Checks:		
E-mail address for the HR Officer who Verifies Employment Checks:		
Name of the Organisation Providing Confirmation of the Employment checks:		
Date Employment Checks Were Originally Undertaken:		

Please confirm the following employment check standards have been undertaken:

NHS Employment Check Standard	Undertaken	Details
Identity Check (Please state what <u>3 documents were seen</u> ; 1 ID and 2 proofs of address or 2IDs and 1 proof of address. (If driving licence used please provide the full name, card number, registration date and address on it)		Documents Seen: 1. 2. 3.
Proof of Address		Document Issuer: Address: Date of Issue:
Right to Work Check		Full Name on the Passport (if different than on the application please provide the reason): Passport Number: Nationality: Issue date: Country of Issue: Expiry date:

<p>For non EU/EEA applicants only: Right to Work Check – Visa Details</p> <p>Please provide Biometric Residence Card details</p>		<p>BRP Visa Type:</p> <p>BRP Card Number:</p> <p>Issue Date:</p> <p>Expiry Date:</p>
<p>DBS Check</p> <p>If applicant is previously from overseas, please confirm Certificate of Good Standing details (i.e. country, date of issue and whether it has any disclosure)</p>		<p>DBS Type:</p> <p>Issue Date:</p> <p>Unique Ref No.:</p>
<p>Occupational Health Check</p> <p>Please state what level of clearance was conducted (no requirement/access to patients/Exposure Prone Procedure)</p>		<p>Clearance Date:</p> <p>Clearance Type i.e. EPP or non EPP/other:</p>
<p>Professional Registration Check</p>		<p>GMC Number:</p> <p>Expiry Date:</p>

Additional Information: