



## Application & Employment Checklist

In order for your recruiter to submit your profile to a client facility, the following items must be completed and on file prior to the submittal:

**Signed Application (2 total pages)**

**Two recent letters of reference or 2 completed reference release forms**

**Skills checklist appropriate for unit of submittal**

**Copies of current nursing/allied health licenses**

- You must provide a copy of your home state (state of permanent residence) license.
- You must provide a copy of your license for the state in which you have been accepted for work. In an instance of walk-through or new licensure, you must provide a copy of work state licensure prior to your assignment start date.

**Copies of current certifications**

- All candidates must provide a copy of a current valid BLS certification.
- You must provide copies of all other certifications (i.e., ACLS, PALS, NRP, TNCC, CEN) as required by the facility and/or unit.
- Letters of participation or certificates of completion will only be accepted for certification documentation for one month after completion. Upon receipt of a wallet card, you must provide a copy for your personnel file.

**Disclosure & Release form for Background Investigation**

**Health Information Privacy & Consent Confidentiality Statement**

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Once accepted for a position, you must complete and return the following items for your personnel file **prior** to any request for travel and/or housing arrangements. Your recruiter will fax, e-mail, or overnight mail all required forms to you upon acceptance. These forms are also accessible on our website [www.healthcare-staffing.com](http://www.healthcare-staffing.com).

**Signed assignment agreement**

**Current physician's statement within the past year that includes physician's signature and contact phone number.**

**Current tuberculosis screening**

- If using PPD to meet this requirement, you must provide documentation of placement and reading current within the past year with signatures.
- If using a chest x-ray to meet this requirement, you must provide documentation of chest x-ray which includes statement that the test was done as tuberculosis screening. Additionally, you must complete the TB Screening Questionnaire form.

**Proof of immunity for Measles, Mumps, and Rubella**

- If using MMR or MR vaccination to meet this requirement, you must provide documentation of the vaccination that includes complete dates (month, date, and year) of immunization. For anyone born after 1957, the record **MUST** include documentation of two injections to meet this requirement.
- If using titers to meet this requirement, you must provide copies of the lab results showing a numerical reading to prove immunity.
- Immunity by history is not acceptable in proving immunity to Rubella, Rubeola or Mumps.

**Proof of immunity for Varicella (chicken pox)**

- If using Varivax vaccination to meet this requirement, you must provide documentation of the vaccination that includes complete date(s) (month, date, and year) of immunization.
- If using a titer to meet this requirement, you must provide a copy of the lab results showing a numerical reading to prove immunity.
- Immunity by history is not acceptable in proving immunity to Varicella.

**Proof of immunity for Hepatitis B or declination of vaccination series**

- If using the vaccination series to meet this requirement, you must provide documentation of the three-step series that includes complete dates (month, date, and year) of the three immunizations.
- If using a titer to meet this requirement, you must provide a copy of the lab results showing a numerical reading to prove immunity.
- If declining the immunization, you must complete, sign, and date the HBV vaccination declination form.

**W-4 form**

**Georgia State tax form**

**Notarized I-9 and copies of appropriate documentation**

**Personnel Data form**

**Direct Deposit Authorization form**

**Permanent Tax Residence Notification form**

**Job Description**

**Handbook Acknowledgement**

**Completed Orientation/Safety Packet**

*Fax completed documentation to 770-991-1557. If you have any questions about the required documentation, please contact our Credentialing Department at 770-991-2515.*