



TLC Nursing Services

TLC House

58 Ballykeefe Estate

Dooradoyle

Limerick

## Recruitment Check-Off List

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### Ensure that you give us ALL of the following:

- |    |   |                          |
|----|---|--------------------------|
| 1  | Current Registration Certificate - (Nurses only)  | <input type="checkbox"/> |
| 2  | Professional Qualification Certificates   | <input type="checkbox"/> |
| 3  | Current C.P.R. Certificate  | <input type="checkbox"/> |
| 4  | Current Manual Handling & Patient Lifting Certificate   | <input type="checkbox"/> |
| 5  | Non Violent Intervention Certificate  | <input type="checkbox"/> |
| 6  | Contact details of three (3) Professional Referees - (One being your last employer)                 | <input type="checkbox"/> |
| 7  | Curriculum Vitae (C.V.) - All dates must be accounted for - <b>No Gaps</b>                          | <input type="checkbox"/> |
| 8  | Haemovigilance Certificate - (Nurses Only)  | <input type="checkbox"/> |
| 9  | Hepatitis "B & C" Certificates  | <input type="checkbox"/> |
| 10 | Certificate of Health from your G.P. (within past 6 months stating that you're free from infection) | <input type="checkbox"/> |
| 11 | Signed copy of Contract of Employment   | <input type="checkbox"/> |
| 12 | Completed Bank Details  | <input type="checkbox"/> |
| 13 | Completed Garda Vetting Form & €15.00   | <input type="checkbox"/> |
| 14 | Signed Acknowledgement Form   | <input type="checkbox"/> |
| 15 | Copy of signed Placement Policy Form  | <input type="checkbox"/> |
| 16 | Copy of Current Passport  | <input type="checkbox"/> |
| 17 | Four (4) passport sized photographs   | <input type="checkbox"/> |
| 18 | Verification of service documentation   | <input type="checkbox"/> |
| 19 | Original of Garda Card and Visa   | <input type="checkbox"/> |
| 20 | Copy of Indemnity insurance details   | <input type="checkbox"/> |
| 21 | Mental Health Act 2001 (RPN's only).  | <input type="checkbox"/> |
| 22 | Infection Control Update  | <input type="checkbox"/> |

Signed: \_\_\_\_\_

Date: \_\_\_\_\_