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REQUIRED DOCUMENTATION CHECKLIST

Name: _____ Date: _____

1. Application Materials (forms provided in this application packet)

- Policies for the Nurse Employee
- Physical/Vaccination Document
- OccuScreen Form
- Background Investigation Release
- Medical Release Authorization Form
- Appendix A – Confidentiality Agreement
- Employment Application
- Skills Checklist(s)
- Two Professional References

*Please be sure to complete all of the skills checklists that apply to you. If you do not have the correct skills checklists, please contact MayDay Staffing Solutions or download it at maydayss.com

2. Licenses, Professional Certifications

- Copies of all current nursing licenses and professional certifications
- Copies of all CPR cards
- Copies of all additional resuscitation credentials (ACLS PALS, etc.)
- Copies of your drivers' license
- Copies of your social security card
- Malpractice Insurance

3. Medical Documentation

- A current physical
- Hepatitis B documentation (vaccination series of three titer, booster, or signed declination)
- A TB screen current within 12 months or chest X-ray current within two years
- Proof of immunity to Rubeola, Rubella and Mumps
- Proof of immunity to Varicella (positive titer of Varivax inoculation)
- Tetanus within 10 years, or signed declination

Please note all items must be completed with attached copies before you can be scheduled to work.

Return this sheet with appropriate attachments

Signature

Date