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| **By email to** [**MSO@york.nhs.uk**](mailto:MSO@york.nhs.uk) | **By post to**  **Medical Staffing, Park House, Bridge Lane, York, YO31 8ZZ**  **or**  **Medical Staffing,Trust Headquarters, Scarborough Hospital, Woodlands Drive, Scarborough, YO12 6QL** |
| **Payroll Form**  Includes, HR 1: Notification of Starter Form, HR 1.1 P46, HR 1.2 New starter bank details, HR 1.3 Pensions Questionnaire  *(not applicable for Specialist Registrars who remain employed by another organisation)* | **Occupational Health questionnaire and consent form**, laboratory evidence of Hepatitis B surface antibody, Hepatitis B surface antigen, Hepatitis C (if first ST post) and rubella. **Return directly to occupation health (address at top of OH form)** |
| Scanned copy of your current **DBS Disclosure** (previously known as CRB). **If you do not have a DBS Disclosure dated within 3 years you must contact Medical Staffing immediately** | **Specimen Signature Form** *(please complete all 3 sections)* |
| Scanned copy of 2 forms of **address evidence** dated within the last 3 months *(please refer to the attached pre-employment check standards document for information on accepted forms of address)* | **ID Badge & Car Parking Permit Form**  *(this will be authorised by Medical Staffing and returned to you on your first day, unless you request sooner)* |
| Scanned copy of **Medical Degree Certificate** | **Most recent payslip** |
| Scanned copy of **full** **passport** including, photo page, front cover and any **right to work** visa’s | **Employment Declaration** |
| Scanned copy of your **driving license** photo card and counterpart (if owned) | **Confidentiality Code of Conduct** |
| Scanned copy of your **marriage certificate** *(if you are married and practising under your maiden name)* |  |
| Scanned copy of original **GMC certificate** |  |