

RESIDENT CREDENTIALS CHECKLIST

Name: _____

Department: _____

Campus: _____ PGY _____

Start Date: _____

DOCUMENTS REQUIRED WITH APPLICATION

- _____ TTUHSC Residency Application (or ERAS Application and Addendum)
- _____ Personal Statement
- _____ Curriculum Vitae
- _____ Notarized or Certified copy of Diploma
- _____ Medical Student Performance Evaluation (Dean's Letter)
- _____ Medical School Transcript(s)
- _____ Three Letters of Reference (1. _____ 2. _____ 3. _____)
- _____ USMLE Exam History Report (if not with ERAS application) :
Step 1 _____ Step 2 CS _____ Step 2 CK _____ Step 3 _____
- _____ HouseStaff Guidelines Acknowledgment
- _____ CBC Acknowledgment
- _____ Certificate(s) of Previous Training (if applicable)
- _____ Transfer Verification (if applicable)
- _____ ECFMG Certificate (if applicable)
- _____ Confirmation of ECFMG Certification (if applicable)
- _____ Clinical Clerkship Affidavit (if applicable)

DOCUMENTS REQUIRED FOR EMPLOYMENT

- _____ Original Contract
- _____ Institutional TMB Permit/Texas License, DPS & DEA certificates
- _____ Other State Licenses (if applicable) _____ State
- _____ Current ACLS
- _____ Malpractice Form (PLI)
- _____ NPI Number
- _____ Personnel Action form (PAF)
- _____ Release of Information Form
- _____ Suppression of Information
- _____ Criminal Background Check
- _____ Biographic Data Form
- _____ I-9 Form (w/copies of documents attached) DL _____ Passport _____ Birth Certificate _____ Visa/J1/EAD _____
- _____ Copy of Social Security Card
- _____ W-4 Form
- _____ Employee Crime Victim ID Election
- _____ Confidentiality Form
- _____ Employee Affidavit
- _____ Standards of Conduct for State Employees
- _____ Sexual Harassment Acknowledgment
- _____ Vehicle Registration (UMC)
- _____ Requisition Form-ID Badge/Keys _____ Name Tag Request
- _____ Check out- _____ Final Eval _____ PAF _____ PLI _____ Dept.Ltr _____ Grad.Info _____ Cert _____

Checklist Incoming Form.xls

5/2010