

## 2023-2024 New Resident Forms Checklist (Form#1)

(Updated: 1-20-2023)

<b>Please have your medical school return the Medical Education Verification form prior to May 12, 2023</b>	<b>Completed</b>
<p>➤ <b>Medical Education Verification Form (Form #2)</b></p> <ul style="list-style-type: none"> <li>✓ Please forward this form to your Medical School to complete and add the school seal.</li> <li>✓ Return the form by emailing it to the email address below or vail mail at the address below: <ul style="list-style-type: none"> <li>❖ <a href="mailto:guidy.amy@marshfieldclinic.org">guidy.amy@marshfieldclinic.org</a> (please make sure the seal is visible if emailing the form)</li> <li>❖ Marshfield Clinic Health System Division of Education-1R6 Amy Guidry 1000 N. Oak Ave Marshfield WI 54449</li> </ul> </li> <li>✓ <b>Please note: This completed form <u>must</u> be received prior to the start of your residency training</b></li> </ul>	<p>Mailed to school on:</p> <p>DOE received form on:</p>
<b>Please complete the following forms &amp; return by April 1, 2022</b>	
➤ <b>Resident and Fellowship Information form (Form #3)</b>	
➤ <b>Background Information Disclosure Form (Form #4)</b>	
➤ <b>Name Documentation form (form # 5)</b>	
➤ <b>Employee Health Information: (forms 7, 8, 9)</b> <ul style="list-style-type: none"> <li>❖ <b>Please indicate the following:</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> I have set up my ReadySet account</li> <li><input type="checkbox"/> I have completed the health surveys in my ReadySet account.</li> <li><input type="checkbox"/> My immunizations are attached to be downloaded into my ReadySet account</li> <li><input type="checkbox"/> I have downloaded my immunizations into my ReadySet account</li> <li><input type="checkbox"/> I do not have copies of my immunizations.</li> </ul> </li> </ul>	
➤ <b>I have scheduled my pre-employment visit for:</b> Date: <a href="#">Click or tap here to enter text.</a> Time: <a href="#">Click or tap here to enter text.</a>	
<b>Please send the following copies by April 7, 2023</b>	
➤ <b>Copy of Medical School Diploma (with translation if applicable)</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> My medical school diploma is attached    <input type="checkbox"/> I currently do not have a copy of my medical diploma, but I will send it by <a href="#">Click or tap here to enter text.</a></li> <li><input type="checkbox"/> I am a Dermatology resident and I have also attached my TY certificate</li> <li><input type="checkbox"/> I had a preliminary year(s) of training and my certificate is attached</li> <li><input type="checkbox"/> I did not have a preliminary year prior to starting my residency training with MCHS</li> </ul>	
➤ <b>Copy of your current/updated CV</b>	
➤ <b>Copy of USMLE Step 3 /COMLEX Level 3 Score Report</b> (reminder: If you are a H1B visa holder, this form is required to start your training) <ul style="list-style-type: none"> <li><input type="checkbox"/> Yes, My Step 3 Score Report or COMLEX Level 3 is attached</li> <li><input type="checkbox"/> No, I have not taken my step 3 or level 3 exam but will on/in <a href="#">Click or tap here to enter text..</a></li> </ul>	
➤ <b>Copy of ECFMG Certificate</b> (Reminder: If you graduated from a foreign medical school, this form is required prior to the start of your residency)	
➤ <b>Yes, I have started the REL process and submitted my application through License on:</b> <a href="#">Click or tap here to enter text.</a>	
➤ <b>Online BLS certification course (for all programs) :</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> Yes, I need to take the online BLS course    <input type="checkbox"/> No, I have my certification &amp; it is attached</li> </ul>	
➤ <input type="checkbox"/> <b>Yes, I have a social security number and I have provided it on the Wisconsin Background Information Disclosure form.</b>	
➤ <input type="checkbox"/> <b>No, I do not have a social security number and I will need to call the social security office prior to my start date.</b>	

Printed Name

Program