**Hand Of Grace Healthcare**

**Required Documents Checklist**

Below is a list of required documents. Please review these items and send in any that you already have with the completed application form and resume.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Companion / Childcare** | **RCA / CNA / PSW** | **Practical Nurse** | **Registered Nurse** |
| **Copy of photo ID** *(e.g. driver’s license)* | **https://lh4.googleusercontent.com/ftahQ4k3KTjgWSOEenX1C0Suu1bw3ix4ug9MOdHgtbBB0kHbX5AcaqFj_caUb3cpVz5p-lJ0oZcROp2sJxAY9a8gYZYtGbZh1_VdacKCBuOWbcPfGQRIqG_dKMoZ_cHdxm3duxq2** | **https://lh4.googleusercontent.com/ftahQ4k3KTjgWSOEenX1C0Suu1bw3ix4ug9MOdHgtbBB0kHbX5AcaqFj_caUb3cpVz5p-lJ0oZcROp2sJxAY9a8gYZYtGbZh1_VdacKCBuOWbcPfGQRIqG_dKMoZ_cHdxm3duxq2** | **https://lh4.googleusercontent.com/ftahQ4k3KTjgWSOEenX1C0Suu1bw3ix4ug9MOdHgtbBB0kHbX5AcaqFj_caUb3cpVz5p-lJ0oZcROp2sJxAY9a8gYZYtGbZh1_VdacKCBuOWbcPfGQRIqG_dKMoZ_cHdxm3duxq2** | **https://lh4.googleusercontent.com/ftahQ4k3KTjgWSOEenX1C0Suu1bw3ix4ug9MOdHgtbBB0kHbX5AcaqFj_caUb3cpVz5p-lJ0oZcROp2sJxAY9a8gYZYtGbZh1_VdacKCBuOWbcPfGQRIqG_dKMoZ_cHdxm3duxq2** |
| **Copy of Social Insurance/Security Card** *(or documents with your SIN/SSN # and name)* | **https://lh4.googleusercontent.com/ftahQ4k3KTjgWSOEenX1C0Suu1bw3ix4ug9MOdHgtbBB0kHbX5AcaqFj_caUb3cpVz5p-lJ0oZcROp2sJxAY9a8gYZYtGbZh1_VdacKCBuOWbcPfGQRIqG_dKMoZ_cHdxm3duxq2** | **https://lh4.googleusercontent.com/ftahQ4k3KTjgWSOEenX1C0Suu1bw3ix4ug9MOdHgtbBB0kHbX5AcaqFj_caUb3cpVz5p-lJ0oZcROp2sJxAY9a8gYZYtGbZh1_VdacKCBuOWbcPfGQRIqG_dKMoZ_cHdxm3duxq2** | **https://lh4.googleusercontent.com/ftahQ4k3KTjgWSOEenX1C0Suu1bw3ix4ug9MOdHgtbBB0kHbX5AcaqFj_caUb3cpVz5p-lJ0oZcROp2sJxAY9a8gYZYtGbZh1_VdacKCBuOWbcPfGQRIqG_dKMoZ_cHdxm3duxq2** | **https://lh4.googleusercontent.com/ftahQ4k3KTjgWSOEenX1C0Suu1bw3ix4ug9MOdHgtbBB0kHbX5AcaqFj_caUb3cpVz5p-lJ0oZcROp2sJxAY9a8gYZYtGbZh1_VdacKCBuOWbcPfGQRIqG_dKMoZ_cHdxm3duxq2** |
| **Two professional references** *(e.g. previous supervisors or co-workers)* | **https://lh4.googleusercontent.com/ftahQ4k3KTjgWSOEenX1C0Suu1bw3ix4ug9MOdHgtbBB0kHbX5AcaqFj_caUb3cpVz5p-lJ0oZcROp2sJxAY9a8gYZYtGbZh1_VdacKCBuOWbcPfGQRIqG_dKMoZ_cHdxm3duxq2** | **https://lh4.googleusercontent.com/ftahQ4k3KTjgWSOEenX1C0Suu1bw3ix4ug9MOdHgtbBB0kHbX5AcaqFj_caUb3cpVz5p-lJ0oZcROp2sJxAY9a8gYZYtGbZh1_VdacKCBuOWbcPfGQRIqG_dKMoZ_cHdxm3duxq2** | **https://lh4.googleusercontent.com/ftahQ4k3KTjgWSOEenX1C0Suu1bw3ix4ug9MOdHgtbBB0kHbX5AcaqFj_caUb3cpVz5p-lJ0oZcROp2sJxAY9a8gYZYtGbZh1_VdacKCBuOWbcPfGQRIqG_dKMoZ_cHdxm3duxq2** | **https://lh4.googleusercontent.com/ftahQ4k3KTjgWSOEenX1C0Suu1bw3ix4ug9MOdHgtbBB0kHbX5AcaqFj_caUb3cpVz5p-lJ0oZcROp2sJxAY9a8gYZYtGbZh1_VdacKCBuOWbcPfGQRIqG_dKMoZ_cHdxm3duxq2** |
| **Copy of negative TB test results** *(done within 2 years)* | **https://lh4.googleusercontent.com/ftahQ4k3KTjgWSOEenX1C0Suu1bw3ix4ug9MOdHgtbBB0kHbX5AcaqFj_caUb3cpVz5p-lJ0oZcROp2sJxAY9a8gYZYtGbZh1_VdacKCBuOWbcPfGQRIqG_dKMoZ_cHdxm3duxq2** | **https://lh4.googleusercontent.com/ftahQ4k3KTjgWSOEenX1C0Suu1bw3ix4ug9MOdHgtbBB0kHbX5AcaqFj_caUb3cpVz5p-lJ0oZcROp2sJxAY9a8gYZYtGbZh1_VdacKCBuOWbcPfGQRIqG_dKMoZ_cHdxm3duxq2** | **https://lh4.googleusercontent.com/ftahQ4k3KTjgWSOEenX1C0Suu1bw3ix4ug9MOdHgtbBB0kHbX5AcaqFj_caUb3cpVz5p-lJ0oZcROp2sJxAY9a8gYZYtGbZh1_VdacKCBuOWbcPfGQRIqG_dKMoZ_cHdxm3duxq2** | **https://lh4.googleusercontent.com/ftahQ4k3KTjgWSOEenX1C0Suu1bw3ix4ug9MOdHgtbBB0kHbX5AcaqFj_caUb3cpVz5p-lJ0oZcROp2sJxAY9a8gYZYtGbZh1_VdacKCBuOWbcPfGQRIqG_dKMoZ_cHdxm3duxq2** |
| **Copy of a clear criminal record check** *(done within 1 year)* | **https://lh4.googleusercontent.com/ftahQ4k3KTjgWSOEenX1C0Suu1bw3ix4ug9MOdHgtbBB0kHbX5AcaqFj_caUb3cpVz5p-lJ0oZcROp2sJxAY9a8gYZYtGbZh1_VdacKCBuOWbcPfGQRIqG_dKMoZ_cHdxm3duxq2** | **https://lh4.googleusercontent.com/ftahQ4k3KTjgWSOEenX1C0Suu1bw3ix4ug9MOdHgtbBB0kHbX5AcaqFj_caUb3cpVz5p-lJ0oZcROp2sJxAY9a8gYZYtGbZh1_VdacKCBuOWbcPfGQRIqG_dKMoZ_cHdxm3duxq2** | **https://lh4.googleusercontent.com/ftahQ4k3KTjgWSOEenX1C0Suu1bw3ix4ug9MOdHgtbBB0kHbX5AcaqFj_caUb3cpVz5p-lJ0oZcROp2sJxAY9a8gYZYtGbZh1_VdacKCBuOWbcPfGQRIqG_dKMoZ_cHdxm3duxq2** | **https://lh4.googleusercontent.com/ftahQ4k3KTjgWSOEenX1C0Suu1bw3ix4ug9MOdHgtbBB0kHbX5AcaqFj_caUb3cpVz5p-lJ0oZcROp2sJxAY9a8gYZYtGbZh1_VdacKCBuOWbcPfGQRIqG_dKMoZ_cHdxm3duxq2** |
| **Copy of Current Emergency or Level 1 First Aid & CPR Certificate** | **https://lh4.googleusercontent.com/ftahQ4k3KTjgWSOEenX1C0Suu1bw3ix4ug9MOdHgtbBB0kHbX5AcaqFj_caUb3cpVz5p-lJ0oZcROp2sJxAY9a8gYZYtGbZh1_VdacKCBuOWbcPfGQRIqG_dKMoZ_cHdxm3duxq2** | **https://lh4.googleusercontent.com/ftahQ4k3KTjgWSOEenX1C0Suu1bw3ix4ug9MOdHgtbBB0kHbX5AcaqFj_caUb3cpVz5p-lJ0oZcROp2sJxAY9a8gYZYtGbZh1_VdacKCBuOWbcPfGQRIqG_dKMoZ_cHdxm3duxq2** | **https://lh4.googleusercontent.com/ftahQ4k3KTjgWSOEenX1C0Suu1bw3ix4ug9MOdHgtbBB0kHbX5AcaqFj_caUb3cpVz5p-lJ0oZcROp2sJxAY9a8gYZYtGbZh1_VdacKCBuOWbcPfGQRIqG_dKMoZ_cHdxm3duxq2** | **https://lh4.googleusercontent.com/ftahQ4k3KTjgWSOEenX1C0Suu1bw3ix4ug9MOdHgtbBB0kHbX5AcaqFj_caUb3cpVz5p-lJ0oZcROp2sJxAY9a8gYZYtGbZh1_VdacKCBuOWbcPfGQRIqG_dKMoZ_cHdxm3duxq2** |
| **Copy of RCA/CNA/PSW certificate and BC Registry status Print Out** | **–** | **https://lh4.googleusercontent.com/ftahQ4k3KTjgWSOEenX1C0Suu1bw3ix4ug9MOdHgtbBB0kHbX5AcaqFj_caUb3cpVz5p-lJ0oZcROp2sJxAY9a8gYZYtGbZh1_VdacKCBuOWbcPfGQRIqG_dKMoZ_cHdxm3duxq2** | **–** | **–** |
| **Copy of Practical Nursing License** | **–** | **–** | **https://lh4.googleusercontent.com/ftahQ4k3KTjgWSOEenX1C0Suu1bw3ix4ug9MOdHgtbBB0kHbX5AcaqFj_caUb3cpVz5p-lJ0oZcROp2sJxAY9a8gYZYtGbZh1_VdacKCBuOWbcPfGQRIqG_dKMoZ_cHdxm3duxq2** | **–** |
| **Copy of Registered Nursing License** | **–** | **–** | **–** | **https://lh4.googleusercontent.com/ftahQ4k3KTjgWSOEenX1C0Suu1bw3ix4ug9MOdHgtbBB0kHbX5AcaqFj_caUb3cpVz5p-lJ0oZcROp2sJxAY9a8gYZYtGbZh1_VdacKCBuOWbcPfGQRIqG_dKMoZ_cHdxm3duxq2** |
| **Proof of COVID-19 vaccination** |  |  |  |  |