**GUIDELINES FOR VOLUNTEERS**

**DOCTORS**

**First Time**

* Short-Term Volunteer Forms

Notarized copy of Basic Degree Certificate – the one that says “Doctor of Medicine”

* Notarized copy of Current License
* Names and Addresses of 2 Medical References
* Work Permit Exemption Application Form
* 2 photographs

If doctor was trained at an Offshore Medical School and has a Board Certificate he/she needs to submit this.

**Returning**

* Short-Term Volunteer Form
* Form A
* Notarized copy of Current License
* Work Permit Exemption Application Form
* 1 photograph

**NURSES**

**First Time**

* Short-Term Volunteer Form
* Blue Form
* Curriculum Vitae (Resume)
* Notarized copy of Birth Certificate
* Notarized copy Marriage Certificate (if applicable)
* Notarized copy of Certificate/Diploma from School of Nursing
* Notarized Copy of Current License
* Two written references from Nursing Supervisors
* Work Permit Exemption Application Form
* 2 photographs

**Returning Nurses and Jamaican Trained Nurses**

* Short-Term Volunteer Form
* Updated Curriculum Vitae (Resume)
* Notarized Copy of Current License
* Two written references from Nursing Supervisors
* Work Permit Exemption Application Form
* 1 photograph

**DENTISTS/DENTAL HYGIENISTS**

**First Time**

* Short Term Volunteer Form
* Form A – Dental Act
* Work Permit Exemption Application Form
* Degree Certificate (Doctor of Dental Surgery)
* Current License
* 3 professional references
* 2 photographs

**Returning**

* Short Term Volunteer Form
* Current License
* Work Permit Exemption Application Form
* 1 photograph

**OPTOMETRISTS**

**First Time**

* Short Term Volunteer Form
* Degree Certificate (Doctor of Optometry)
* Current License
* 2 professional references
* Work Permit Exemption Application Form
* 2 photographs

**Returning**

* Short Term Volunteer Form
* Current License
* Work Permit Exemption Application Form
* 1 photograph

**PHARMACISTS**

**First Time**

* Short Term Volunteer Form
* Degree Certificate
* Current License
* 3 professional references
* Work Permit Exemption Application Form
* 2 photographs

**Returning**

* Short Term Volunteer Form
* Current License
* Work Permit Exemption Application Form
* 1 photograph

**STUDENTS**

* Short Term Volunteer Form
* Work Permit Exemption Application Form
* 2 passport sized photographs
* A letter from the University verifying status of student(s)

**SUPPORT STAFF**

* Short Term Volunteer Form
* Work Permit Exemption Application Form
* 1 passport sized photograph

**AUDIOLOGISTS, DEITITIAN, RADIOGRAPHER, MEDICAL TECHNOLOGISTS, THERAPISTS PHYSIOTHERAPIST (SPEECH, OCCUPATIONAL & PHYSICAL)**

* Short Term Volunteer Form
* Completed Form A – The Professions Supplementary to Medicine Act, 1965
* Notarized Copy of Diploma/Degree
* Transcript
* Notarized Copy of current license
* Two letters of reference – one from a member of your profession and one character reference
* Work Permit Exemption Application Form
* 2 photographs

**Returning**

* Short-Term Volunteer Form
* Form A
* Notarized copy of Current License
* Work Permit Exemption Application Form
* 1 photograph

**FEES**

**Registration**

* Doctors – $10.00 each
* Nurses – $ US 50.00
* Jamaican Trained – $ J 2000.00
* Dentists – $50.00 each
* Dental Hygienists – $30.00 each
* Optometrists – US$25.00 or the Jamaican Equivalent
* Pharmacists – US$50.00 or the Jamaican Equivalent
* Dieticians Audiologists, etc. – $4,000.00 each