Publication: January 10th, 20

# APPLICATION FORM for doctors, pharmacists, nurses & other health professional

1

( Please, WhatsApp name of your Region & District to: +31 617 851 399 and your Registration Number will be pro

**Your Registration Number is:** . 

**Your Personal eMail Address is:** @medicalbrokers.de
(your Registration Number)

**First Name:** **Surname:**

**Other Name(s):**

**Date & Place of Birth** d d m m y y y y

**Residential Address:**

**P O Box:** **CellPhone:**

**Marital Status:** **Married:** Yes No Div **With** **Children**

## Next of Kin

**Name:**

**Address:**

**CellPhone:** **CellPhone:**

## Working Record

**Working Record** **Employed since:** d d m m y y y y **Unemployed at present:**

**Number of Certificates attached** **Note: write your Registration Number on EACH page in right top corner**

**Forms Presentation**

By presenting this application form -(trustfully completed and duly signed)- you confirm your interest in employment in The Netherlands and particiation in the Language Courses. You confirm also that you have taken good notice of the content of the website and that your personal questions have been published and correctly answered. You confirm also to sign a Non-Circumvention Agreement with MedicalBrokers/ Dutch Technology.

**Participation Fee**

The presented Application Form with attached Cerificates will be processed only when the required fee (see Cost Calculation) has been paid in EUROs into: ***ECObank*** account **0011 0144 0210 8702** of Dutch Technology which is MedicalBrokers' mothercompany. Please do not forget to add your Registration Number on the Bank Instruction Order.

**Additional training**

After arrival in The Netherlands and as soon as you have started your job, employers will offer many new options for additional courses to upgrade your present level of training and as a result a continuous rise of your salary.
By signing this Application Form you confirm that you will hold yourselve available for participation in follow-up courses and other training trajectories that are offered by your employer and/or the initiators of this project: Dutch Technology Centre, Accra Ghana.

**Well Read and-**
**Fully Understood**

**Date:**
d d m m y y y y

Signature Applicant

**After completion, present this Application Form and Certificates to your Lecturer who invited you for intake interview. Before him you will sign this document for "Well Read and Fully Understood". Thank you.**