Checklist for Clinical Access Requests

Name: ____________________________
Gender: ___________ Visitor's Home Country: ______________________
Visa Type: _______________ Expiration Date: ______________________
Faculty Advisor/Supervisor: __________________________
Visitor's Personal Email: ____________________________
Departmental Contact Name: _____________________ HRA#: __________

Checklist for Departmental Contact

☐ Obtain Visitor Request Form, filled out by faculty sponsor (Document A).
☐ Obtain Sponsor Agreement Form, filled out and signed by faculty sponsor (Document B).
☐ Send "Welcome Email" to visitor with attachment (Document C).
☐ Email Immigration Specialist with required attachments.
☐ Immigration Specialist reviews initial documents and initiates invitation to First Advantage.
☐ Draft "Letter of Invitation" and obtain sponsor signature.
☐ Send signed "Letter of Invitation" to Department Chair.
☐ Send "Requirements Email" to visitor with attachments (Documents D, E, F; include G, if applicable).
☐ Email Immigration Specialist to confirm First Advantage clearance.
☐ Routes "Application for Clinical Access - Approval Document" to Chair for review and approval (Document H).
☐ Office of Global Health sends approval email and includes fully approved Document H.
☐ Order white lab coat and/or scrubs for visitor, as appropriate.
☐ Send "Travel Email" at least 1 week prior to arrival, copy Chair and Administrator, others as appropriate.
☐ Send "Application for Clinical Access - Approval Document" to appropriate OR personnel, if applicable.

Documents to Collect:
☐ Visitor Request Form (Document A)
☐ Sponsor Agreement Form (Document B)
☐ Application for Clinical Access Form (Document C)
☐ Curriculum Vitae
☐ Copy of current Passport/Visa
☐ Signed Letter of Invitation (Document D)
☐ Proof of Immunizations, in English
☐ Confidentiality Statement (Document F)
☐ Proof of current insurance with international coverage
☐ HIPAA Questions (Document G) Grade: __________
  (Required grade of 80% or better)

Important Dates:
☐ First Advantage Invitation: ______________
☐ First Advantage Clearance: ______________
☐ Approval granted: ________________________
  (Fully-signed Document H)
☐ Actual Arrival: _________________________
☐ BCI/FBI clearance: ______________________
☐ Actual Departure: _______________________
☐ OGH Notified of Departure