

## **Max Rady College of Medicine Postgraduate Medical Education**

## Registration Checklists International Dental Fellowship

| PGME Checklist |                   |   |  |  |  |  |
|----------------|-------------------|---|--|--|--|--|
| Check<br>Mark  | Manual<br>Section | Tasks   | Submit to/Deadline   |  |  |  |
|                | Α                 | Review, sign & return your Letter of Offer (LOO)                            | Electronic copy: submit to <a href="mailto:regpgme@umanitoba.ca">regpgme@umanitoba.ca</a> (all pages and in a clear pdf format) <a href="mailto:one-week">one-week</a> after receipt of your LOO   |  |  |  |
|                | В                 | Complete & return Trainee Information Form                                  | Electronic copy: submit to regpgme@umanitoba.ca one week after receipt of your LOO   |  |  |  |
|                | С                 | Activate your UMNetID and Email Account                                     | https://signum.umanitoba.ca/ within one week after receiving the Welcome Email   |  |  |  |
|                | К                 | COVID-19 Proof of Vaccination   | Please submit your COVID-19 proof of vaccination to an OESH Office at oesh@wrha.mb.ca  |  |  |  |
|                | D                 | Activate Aurora Student and Personal Identification Number (PIN)            | Aurora Student within one week of receiving the Welcome Email  |  |  |  |
|                | Р                 | Licensure   | Trainees are required to obtain the appropriate licensure  |  |  |  |
|                | Q                 | Liability   | Post PhD Trainees are required to provide proof of appropriate liability insurance to their home program   |  |  |  |
|                | U                 | Respond to University of Manitoba Photo ID Card<br>request from PGME Office | There will be a University of Manitoba Photo ID Card Pop-up Booth that will be set up at the Bannatyne Campus. Once this has been determined further details will be forwarded.  If you are unable to come to the Pop-up Booth, please order your student ID card at aurora, under personal information. |  |  |  |

|               |                   |  | Personal Information  Personal Information  |
|---------------|-------------------|--|---|
|               |                   |  | reisonal information  |
|               |                   |  | Important Student Email information:  |
|               |                   |  | Please note, your UM Student Email account is used for all un   |
|               |                   |  | Don't have an account yet? Learn more about the student em:   |
|               |                   |  | Declare Canadian Indigenous Ancestry Change Security Question View/Update Addresses and Phones View/Update E-mail Addresses View/Update Emergency Contacts Name Change Information Change your PIN Need to update your PIN? Change it here. Emergency Notification System Register here for Emergency Text (SMS) Notifications Set Preferred Name Verify My SIN Review or Record your Social Insurance Number. Order ID Card Name Change Change Residency Status  To obtain 24/7 access to the Brodie/Buhler and Basic Medical Sciences Building, please bring your Photo ID Card to Colin Wootton in the Physical Plant Office, Room S-013 Medical Services Building, Bannatyne Campus. If you already have a UM student card but would like a new one, please bring a completed Photo ID Card |
|               |                   |  | Request Form to U of M Photo ID Card Pop-up Booth.  |
|               |                   | ared Health/Employer) Checklist  |   |
| Check<br>Mark | Manual<br>Section | Tasks  | Submit to/Deadline  |
|               | G                 | Submit one copy of Police Information Check/Criminal Record Check (with Vulnerable Sector Search included) which must be dated no earlier than 6 months prior to the start date –  Website Link IMPORTANT: Please email a "PDF" or photo only – do not forward emails requiring passwords to access the report | As soon as you have received your Letter of Offer, apply for these checks and have them sent to:  Pmao residents@sharedhealthmb.ca or   |
|               |                   | Submit one copy of Manitoba Adult Abuse registry   | Provincial Medical Administration Office (PMAO)   |
|               | Н                 | Check (required regardless of whether or not you've  | 1502 – 155 Carlton St., Winnipeg, MB R3C 3H8  |
|               |                   | ever resided in Manitoba). – Website Link  |   |
|               | ı                 | Submit one copy of Manitoba Child Abuse Registry<br>Check (required regardless of whether or not you've<br>ever resided in Manitoba) – Website Link  | <u>Please Note:</u> A Winnipeg address is required for Criminal Record Check applications   |
|               | J                 | Residents must respond to the onboarding package by submitting all payroll and benefit forms by the deadline dates as per instructions   |   |

|   | К                 | Complete Immunization & N95 Fit Testing<br>Requirements – <u>Website Link</u> | <ul> <li>As soon as you have received your Letter of Offer, Trainees must contact one of the Occupational Health Units to schedule an appointment within a minimum of 2 months prior to commencement of training.</li> <li>Complete &amp; submit forms directly to an OESH Office at oesh@wrha.mb.ca or at other OESH site</li> </ul>  |  |  |  |
|---|-------------------|---|--|--|--|--|
|   | L                 | Benefits  | Please refer to your Fellowship Agreement  |  |  |  |
| 0   | М                 | Create SOGICA Vault Account   | After receiving employee number from healthcarecareers@mb.ca and completing onboarding package, create a SOGICA Vault account.  • Create Your Account and Log In   |  |  |  |
|   | N                 | Digital Health Account  | https://healthcareersmanitoba.ca/forms/shared-<br>health-pgme-residents/   |  |  |  |
| Final Tasks Prior to Commencement of Training |                   |   |  |  |  |  |
| Check<br>Mark                                 | Manual<br>Section | Tasks   | Submit to/Deadline   |  |  |  |
|   | Т                 | Receive Requisition Form for HSC Facility Access<br>Card                      | <ul> <li>We require a clear digital colour photo with a solid coloured neutral background in a "jpeg" format two weeks from today which will be added to your Entrada profile and submitted to HSC Security for your HSC ID card.</li> <li>Please print out Requisition Form for HSC Facility Access Card and take it to: Security Services, MS245 Building (2<sup>nd</sup> Floor Orange zone) Health Sciences Centre</li> </ul> |  |  |  |
|   | Х                 | Complete Personal Health Information Act (PHIA)                               | Online through UM Learn  |  |  |  |

It is imperative that the trainees <u>submit the required documents on time</u>, to avoid any delays in the commencement of training or payment.