

CANDIDATE REGISTRATION

Please read the following agreement carefully and complete the registration page as truthful as possible.
Please sign all pages and return completed document to Mouldmed Locums International Exchange.
You must submit a copy of your ID/Passport, copies of registrations held and a copy of your CV in order to conclude this agreement.

1) **Introduction**

- i. **The Agency** means the locum agency whose name is reflected above;
- ii. **Client/practice** means the person, practice, hospital, institution or clinic requiring the service of the Agency;
- iii. **Candidate** means the person wishing to do locum work for the Agency at a medical institution;

It is the Agency's discretion and right to choose without explanation to whom certain positions would be offered. Positions are offered to Candidates as they are offered to the Agency and the agency can not be held responsible for the availability of positions. The terms of this agreement will only take affect when the candidates indicates acceptance of a position.

Service as a Candidate

The Candidate agrees that on his/her acceptance of a placement by the Agency, he/she will serve as a Candidate at the selected client for the specified dates and times and shall furthermore comply with any specific requests pertaining to the service to be provided at such a client, within ethical reason.

During the said period, the Candidate shall attend diligently to the medical patients in the practice as expected by the industry standards and the client's expectations.

2) **Attendance:**

Once a Candidate has accepted a placement, whether it is verbally or in writing, and will not be able to render his/her locum service (for whatever reason), he/she is to advise the Agency at least 48 (Forty Eight) hours prior to the commencement of such placement in the case of positions with a time span of less than one week, and one week notice in the case of positions with a duration of more than one week. If the Candidate fails to advise the Agency verbally or in writing in the given period of time, the Agency reserves its right to charge the Candidate for loss of income to the agency. Should the client wish to pursue a loss of income, the action will be between the client and the candidate. The candidate indemnifies the agency from such action. However, if the circumstances are that the Candidate are not able to render his/her services due to whatever reason, but he/she still verbally or in writing gives notice within reasonable time prior to the commencement of such placement, the Agency will attempt to source a new Candidate for that position. The acceptance by or on behalf of the Client for the services of a Candidate or the commencement by an Applicant of services or work for the Client (whichever occurs first) is to be deemed to be acceptance of and agreement to these Conditions on the part of the Candidate.

The candidate is to adhere diligently to the times and dates specified for the placement. Should any deviance from these times be required, the amendments must be noted in writing and agreed upon by both the Candidate and the Client. The agency can not be held responsible for loss of income pertaining to the amendment of hours worked.

The Basic conditions of employment act and other statutory provisions (i.e. Sick Leave or Annual leave) are included in the hourly rate paid.

3) **Notice Period:**

The Candidate will be expected to complete all positions accepted. Should the Candidate not be able to complete the position, a notice period of one week will be required for a position of less than one month and more than one week, and two weeks notice of positions more than one month. For position less than one week, the Candidate will be expected to complete the position.

The exception on the notice period will be considered should the Candidate indicate unethical behavior by the client. Such exception will only be considered if the unethical behavior can be proven.

The same terms of the notice period will be expected from the Client and the Agency including exceptions made due to the conduct of the candidate.

4) **Timekeeping**

It is the responsibility of the Candidate to submit timesheets to the Agency on a regular basis. Timesheets must be faxed to the Agency with a minimum interval of one week or at the end of any placements shorter than one week. All time sheets must indicate clearly the start and end times of the shift, date of the shift and duration of the shift excluding any breaks taken. The timesheet must be signed by the Candidate for each shift worked and also signed by the duly authorized person as identified by the Client.

Should the Candidate not adhere to the procedures of timekeeping as above, delays in the payment of the remuneration of the Candidate will be inevitable.

Please initial here _____

5) Remuneration

The Agency does not release any payments to Candidates before the payment has been received from the client and the Agency has finalized the payroll.

The Candidate may not receive any remuneration from the Client unless specifically agreed upon by the Client and The Agency.

The Candidate also accepts that the Agency is compelled by law to deduct any and all taxes and levies as required by the South African Revenue Service.

The Agency will mail a pay slip to the Candidate once all payments have been made pertaining to the specified pay slip. The IRP 5 document will be mailed to the Candidate at the end of the financial year.

6) Payment Procedure

1) The Agency has a monthly Payroll.

2) Month: from 26th to 25th of following month. E.g. 26 July 2005 to 25 August 2005

3) The Payroll is closed off at the end of each month. E.g. 31 August 2005

4) After completion of the Payroll for the month (e.g. 31 August 2005), all the fees received during the applicable month (e.g. August) is transferred to the Candidate. The Agency uses Cash focus to pay the Candidate. The money only reflects in the account of the Candidate after 24 hours.

5) The remainder of the fees after the completion of the payroll gets paid over to the Candidate as soon as the Agency receives the fees from the Client (e.g. during September).

6) On final payment to the locum, the Agency posts the pay slip and timesheet to the Candidate.

7) PAYE & UIF

PAYE – 25%

(If the Candidate has a Tax Directive issued to the Agency by SARS, The Agency will deduct tax according to the rate shown on the Directive)

U I F – 1%

(U I F is deducted if the Candidate works more than 24 hours per month)

7) Liability

Both the Agency and the Client acknowledge that they are jointly and severally liable for contraventions of relevant minimum standards referred to in Section 198 of the Labour Relation Act, No 66 of 1995. The Client recognizes that many aspects of the relationship it will enjoy with the Agency's Applicant fall directly or indirectly under its control.

8) Agreement:

I _____ Valerie Manda _____ hereby agree as follow:

- I. To carry out the position within the expected standards
- II. To indemnify the agency from any claims or losses resulting from negligence or willful misconduct arising from actions taken or the lack thereof, by myself or the client or any of its affiliates.
- III. Any monies owed to the agency resultant of this agreement may be offset against any monies owed for other positions successfully completed.
- IV. To inform the agency when an introduced client approaches the Candidate for further positions or permanent employment.
- V. All required registration for all applicable boards are up to date. The candidate will inform the agency immediately should there be any change in the registration status.
- VI. I will submit a copy of my ID/Passport and copies of registrations held, as well as a copy of my complete CV before this agreement can be concluded

I have read and understand the contents of this agreement, and fully accept the terms and conditions of this agreement

Signature

Date

PERSONAL DETAILS

Title	DR	Surname	MANDA																										
Full Names	VALERIE THANDI																												
Specialization	MEDICAL MICROBIOLOGY																												
Tel:															Fax:														
Cell phone	0	7	1	1	3	9	7	0	2	2																			
E-mail	V*****1@mac.com																												
Marital Status	Single																												
Physical address	*** EDENRUS										Postal Address																		
	**** HAMILTON STREET																												
	ARCADIA																												
	PRETORIA																												
															Code	0	0	8	3										
Date of Birth	2	6	0	2	1	9	6	6	Nationality	South African																			
Identity number (Please attach copy)											6	6	0	2	2	*	*	*	*	*	*	*	*	9					
Passport number																													

QUALIFICATIONS OBTAINED

Qualification	Institution	Year			
MBChB	UNIVERSITY OF ZAMBIA	1	9	9	1
MMED (MICROBIOLOGY)	MEDUNSA	1	9	9	8

MEDICAL REGISTRATIONS HELD

Registration Body	Country	Registration Number																											
HPCSA	RSA	MP	0	3	9	2	5	6	1																				
Malpractice insurance Company																													
Malpractice insurance Number																													

BANKING DETAILS

Bank	NEDBANK										Account	SAVINGS															
Account Name	VALERIE MANDA																										
Account number	2	*	*	*	0	*	*	1	0	0	Branch code	1	*	*	*	*	5										

I hereby confirm that the above mentioned information is true and correct.

VALERIE MANDA

Candidate

Date

Date