

On Approval of evaluation by DHP, the applicant will receive an SMS and email for their evaluation status - applicant can perform the below requests.

- A. Apply for Temporary License
- B. Change Place of Work.
- C. Apply for Licensing

A. <u>Temporary License User manual</u>

On Approval of evaluation by DHP, the applicant can apply for temporary license.

Enter Applicant DHP account Username and password on login Tab.

Login/Sign In	Register/Sign Up	Guidelines
Login		
Username		
Please enter	your User Name	
Password		
Please enter	your Password	
Sign In 🐧	4	
Forgot Password	2	



1. After Successful login, kindly choose Apply for Temporary license.

Department of Healthcare Professions

										User 🔑 Rese
Create and Submit Requests	Welcome:	DHP Test -	You may	perform the followin	ng acti	ons:				
Apply for Evaluation			-	-	-					
Apply for Additional Place of Work	View & track	status of my	/ requests							
Apply for Temporary License	Search									~
Apply for Licensing	Request Typ	pe:		Request Status:		Request Date From	m:	Request Date	To:	
😝 Print	Select		•	Select	•		曲			苗
Contact Information		-		Applicant Submission Date	Date of	submission to QCHP	Date of Completion	Current Status	Remove	Comments

2. Please read through the below points and click on the highlighted points

Personal Declaration	Apply Temporary License
Personal Declaration	
I hereby declare the information and documents I provide to QCHP are true and verific discrepancies in the presented particulars.	iable to the best of my knowledge and I bear responsibility for any
I undertake that I must inform QCHP of any past or current criminal charges or convic jeopardize my ability to provide quality health care. I also undertake that as long as I a aforementioned.	
I further authorize the release of my license details and information shared with QCHI legitimate need for the information and release QCHP from all liability for the release	
l hereby declare the above mentioned statements.	
Save Save and Close X Close C Reset	 ← →



1. Please fill out all the information as per the highlighted asterisks

Personal Declaration				Apply Temporary License	e	
mporary License Requirements						
Personal Information						
First Name on Passport*	Middle Name(s) on Passport			Last Name on Passport*		
John				Doe		
irst Name on Passport - Arabic*	Middle Name(s) on Passport - A	rabic		Last Name on Passport -	Arabic*	
ج ون				دى		
Gender*	Date of Birth*			Nationality*		
Male 👻	25/01/1986		苗	QATAR		•
Passport Number*	Passport Expiry Date*					
A12356	04/04/2022		曲			
Passport Scanned Copy & Personal Photo						
Please select a file						
Maximum File Size is : 2 MB. Allowed file extensions are .PDF, .JPG, .	DOC/.DOCX, .PNG & .GIF					
Attachments		De	scription		Remove	
Employer account-Passport-207684,pdf					Û	
Personal Photo:						
Please upload a passport sized photo with white background						
Circular (04-2014) - Required Specifications of the Personal Photograp	ph for Medical License Cards					
Please select a file						
Maximum File Size is : 2 MB						
Photo1-Photo-1023361.JPG				A i		



Search						*
Do you have a Qatar National ID (QID)? ⊛ Yes ⊖ No						
Qatar ID Number*	QID Expiry Date*					
28635605506	08/12/2022		曲			
QID Scanned Copy						
Please select a file				•		
Maximum File Size is : 2 MB						
CM1-QID-207664.jpg						
Undertaking Letter						
Please attach the practitioner undertaking letter for the temporary liv	cense.					
G Circular (9-2018) - Updates on Temporary License Policy						
Undertaking Letter						
Please select a file		File Description				
Maximum File Size is : 2 MB. Allowed file extensions are .PDF, .JPG, .	DOC/.DOCX, .PNG & .GIF					
Attachments		Description			Remove	
Photo-EmploymentLetter-1023361.JPG		Undertaking letter			圓	
Save and Close X Close C Reset					🔶 Sub	mit Ĵ

After Successful submission the request status will show as under process with DHP.

Welcome: Test Account - You may perform the following actions:

Search									
Request Type:		Request Status:	Request Status:		Request Date From:		Request Date To:		
Select 🗸		Select	Select 🗸 🗸						
Q Search									
	Request Type	Applicant Submission Date	Date of submission	n to QCHP	Date of Completion	Current S	tatus	Remove	Comments
Q Search Request No.	Request Type Apply for Evaluation	Applicant Submission Date 07/02/2016	Date of submission	n to QCHP	Date of Completion 20/03/2019		tatus on Completed	Remove	Comments

For	help	please	contac	t qchph	elpdes	sk@mop	h.gov.	.qa +(9	74) 44	070279
	Сору	right ©	2021	Ministry	of Pul	olic Hea	lth. Al	l riahts	reserv	ed.

On completion of the temporary license process by DHP, an email and SMS will be sent.

You can do the following according to the evaluation decisions mentioned below

- 1. Send back: Click on "Apply for Temporary license" and provide missing information according to the comments mentioned by DHP.
- 2. *Rejected*: Contact your employer representative.
- 3. Approved: Click on "Temporary license" and Print license.

If you face any technical issues, please send an email to our technical support helpdesk: <u>DHPHelpDesk@moph.gov.qa</u>