

## Good Standing Certificate

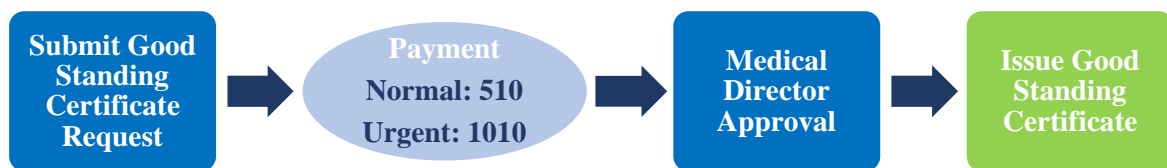
### Requirements:

- No requirements

### Fees:

- Normal Application: AED 510
- Urgent Application: AED 1010

### Process map:



### Timeframe

- Normal Application: 15 working days after medical director approval
- Urgent Application: 5 working days after medical director approval

### Note:

1. In order to prevent any delay in the application, applicant must make sure that facility medical director have approve the good standing application.
2. In full time license, during the process have been cancelled, the good standing application will be cancelled too, accordingly applicant need to re-apply and if payment was done then he/she will be exempted from good standing application fees.
3. If the current facility refused to approve good standing application, then applicant needs to contact health regulation department customer service and they will do the needful
4. Good standing certificate is valid only for six month
5. Once good standing certificate is issued, applicant don't need to come and collect it from health regulation department, the certificate will reach applicant by email that is registered in Sheryan system.

## **Submit Good Standing Certificate Request**

### **Steps:**

1. From Professional Home Page Click on **Good Standing Certificate**

**PROFESSIONAL HOME**

- Professional License**
  - Renew Professional License
  - Add/Upgrade Professional Titles
  - Transfer Professional License
  - Cancel Professional License
  - Professional Details
- Part Time License**
  - New/Renew Part Time Professional License
  - Cancel Part time License
- Help & Support**
  - User Manual
- Fine and Payments**
  - Payment of Fines
  - View Payment Receipts
- Certificates**
  - [Good Standing Certificate](#)
  - Print Duplicate Professional License
  - Sick Leave Attestation
  - Verify Good Standing Certificate
- Inbox**
  - Application Enquiry
- Assessment**
  - Professional Assessment Schedule
- Medical Report**
  - Medical Report Attestation
  - Re Print Medical Report

2. Click on **Add** button to select the facility

**GOOD STANDING CERTIFICATE**

1  
FGSC  
Application  
Form

Good Standing Certificate Application

\* Facility

Dear Applicant, Kindly note that the normal transaction for issuing Good Standing Certificate will take up to 15 working days while the urgent request will take 5 working days from the date of receiving approval from your facility's medical director. The Certificate will be sent directly to your email address available in Sheryan.

Add

3. Select is your request **Urgent or Not**

\* Urgent Request  Yes  No

4. Write your comments if you have any and then Click **Submit** button

Comments

Note :Your Facility Medical Director/Health Facility in charge need to approve the application in order to start processing your application after submitting

Submit

5. Once complete the process successfully a **reference number** will be generated for your request

**Confirmation Page**

Confirmation Page

Confirmation Page

Your reference number is: DHA/LS/952011/1743

6. Go to your inbox and you will have a pending task and click **open**

**Professional User Inbox**

Pending Actions



Search:  Step

Step	Process	Created On	Initiated By	Ref Number	
Payment	Good Standing Certificate	15/08/2011 15:56:21	Mark Brown T	DHA/LS/1582011/172994	Open

7. Review your payment fees and click **Pay** button to proceed payment

Transaction Payments		
<b>Mandatory Payments:</b>		
Fee Name	Amount	Fee Name (Arabic)
Prof Good Standing Fee Normal - Doctor	500.000	Prof Good Standing Fee Normal - Doctor Ar
Knowledge Dirham	10.000	Knowledge Dirham Ar
<b>Total Payment:</b>		
Total:	510	
<b>Pay</b>		

8. Fill the payment page with the needed information

# ePay

MIDDLE EAST  
LEADING GATEWAY


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**Transaction Information**


Service Provider : Dubai Health Authority  
 Service : Health Regulation System  
 SP Transaction No : 586154  
 Amount : 60.00 AED

**Payment Method**

  
Credit Card

  
EdinhamG2

  
Direct Debit

  
OneClick Pay

**Contact Information**

Email Address :

Mobile Number :

لقد قرأت **التحذير** وفهمت عواقبه  
 I have read the **warning** and understood the consequences

**Total Amount: 60.00 AED**

9. Review your transaction details and then Click **Print Receipt** button

Receipt		
<b>Service Provider Name:</b>	Dubai Health Authority	
<b>Service Provider Transaction No.:</b>	15045	
<b>DEG Transaction No.:</b>	00000001250582	
<b>Transaction Date:</b>	15/08/2011 12:06:29	
<b>Transaction Status:</b>	SUCCESS	
<b>Service Name</b>	<b>Payment Method</b>	<b>Amount</b>
Licensing Service	Credit Card	510
<b>Total</b>		<b>Dhs 510</b>
<a href="#">Print Receipt</a>		