



DATAFLOW

How to Apply

Dubai Corporation For Ambulance Services

A Step By Step Guide

for Completing Your Application



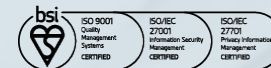
CROSSCHECK



DIGIFLOW



TrueProfile.io



Introduction

This presentation will cover the step-by-step process of submitting your DataFlow Application (Primary Source Verification - PSV). However, before you start, please make sure that you refer to your Client Reference Document to know the exact documentation that **Dubai Corporation For Ambulance Services** requires prior to starting this process.

If you face any issue or need assistance, please connect with us at

<https://support.dataflowgroup.com>

1 Setup your account
i. Registration ii. Account Activation iii. Set your password

2 Application Dashboard

3 Select your licensing authority

4 Select the right package

5 5. Personal Details


6 6. Upload required documents

7 7. Payment

8 8. Track your application

1 Setup your Account | Registration

Visit www.dfgateway.com and enter your email ID to begin



Verify the easy and secure way

You are here because you got a job abroad and one of the last things you need to do is get your documents verified? What a match! We at DataFlow are specialized in verifying documents in the most secure and efficient way.

[More info >](#)

Start by entering your email address

Our system will detect if you are a new or existing user automatically.

Continue

[I need assistance >](#)

Already an Agency/Facility and need help? Ready to sign up as an Agency/Facility to submit on behalf of your applicants?

1 Setup your Account | Registration

Visit <https://www.dfgateway.com> and enter your email ID to begin

Registration Confirmation

We have observed that the email address entered is not registered with us. Click the **Confirm** button to proceed to sign up.

If you are already registered, we suggest click **Close** and confirm the email ID entered.

☒ I agree to the [Terms & Conditions](#)

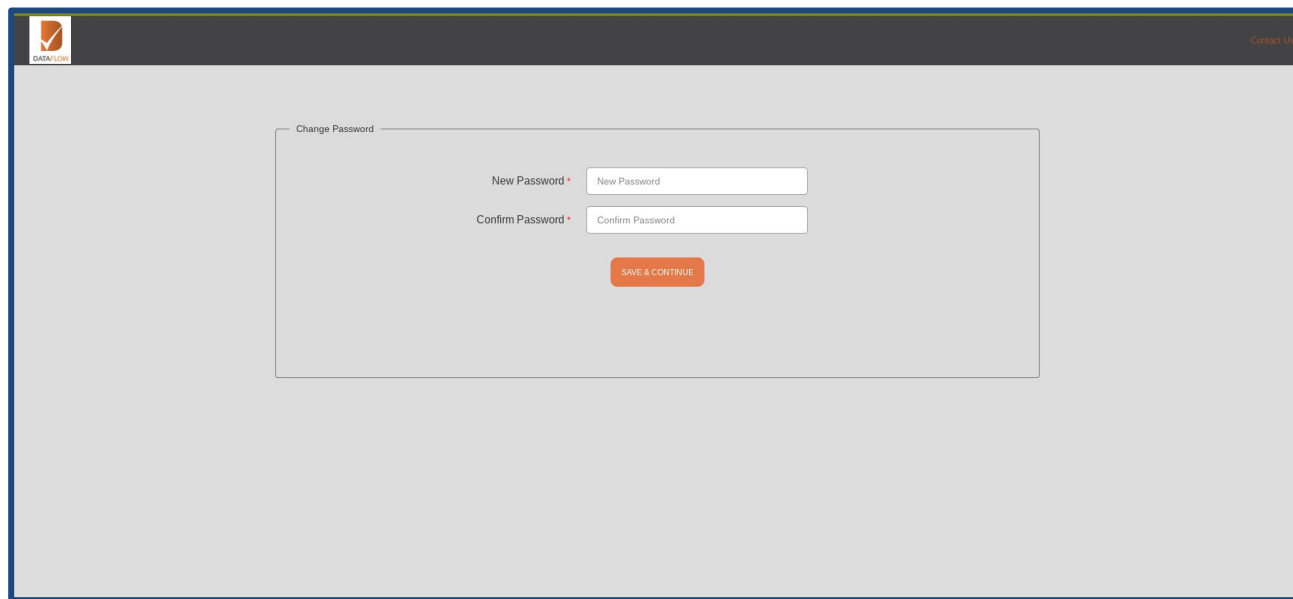
Confirm

Close

If you have registered with the DataFlow Group previously, you will be asked to enter your password on the next screen. If this is your first visit, you will receive an automated email at the registered email ID you shared, containing an activation link. Please click on the activation link to complete your registration and set your password

1 Setup your Account | Registration

Visit <https://www.dfgateway.com> and enter your email ID to begin




The screenshot shows a web browser window with the DFGateway logo in the top left corner and a 'Contact Us' link in the top right. The main content area is titled 'Change Password' and contains a form with two input fields: 'New Password' and 'Confirm Password'. Both fields are marked with a red asterisk, indicating they are required. Below the input fields is an orange button labeled 'SAVE & CONTINUE'.

Please set your new password to save and continue

1 Your Account | Account Activation

Once you have activated your account, enter your registered email ID and password on the 'Sign In' page



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[More info >](#)

Start by entering your email address

Our system will detect if you are a new or existing user automatically.

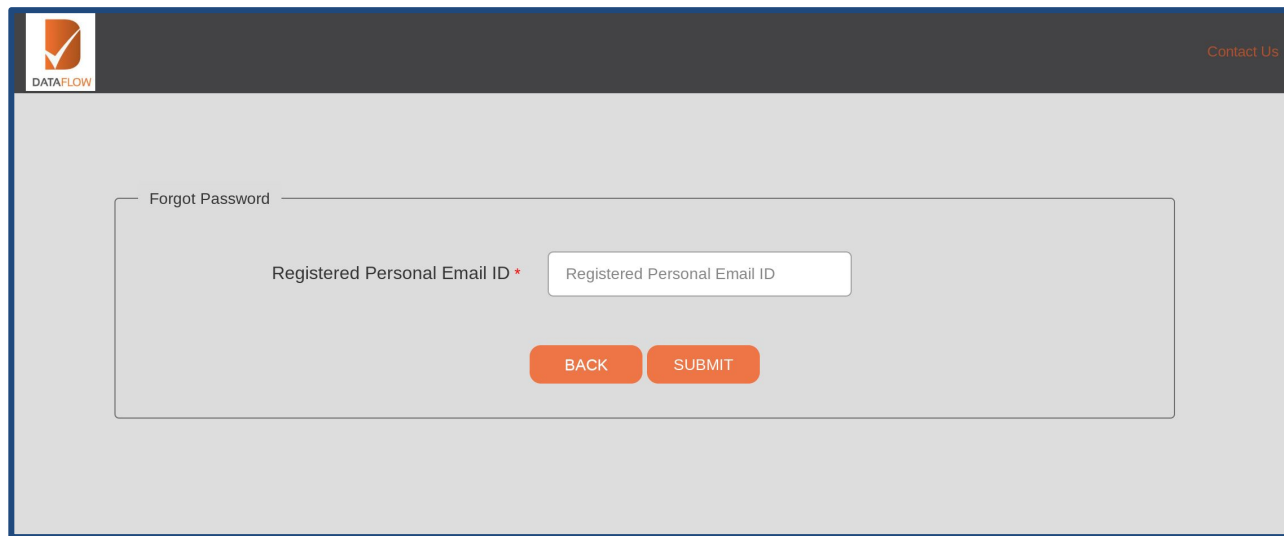
Continue

[I need assistance >](#)

Already an Agency/Facility and need help? Ready to sign up as an Agency/Facility to submit on behalf of your applicants?

1

Setup your Account | Forgot Password



The screenshot shows a web application interface for the 'Forgot Password' process. At the top left is the DATAFLOW logo, and at the top right is a 'Contact Us' link. The main content area is titled 'Forgot Password' and contains a form with the following elements:

- A label 'Registered Personal Email ID *' followed by a text input field containing the placeholder text 'Registered Personal Email ID'.
- Below the input field are two orange buttons: 'BACK' and 'SUBMIT'.

If you forget your password, click **Forgot Password**, enter details, and click **Submit**. You will receive an email at your registered email ID with a link to change your password.

2

Application Dashboard

On the **Dashboard** page, click the **Start Application** button to initiate a new application



You can also track your application by selecting your DataFlow Group Case Reference Number from the **Select Case** dropdown menu or by clicking the **Check Your Status** button

3

Select the right package

From the **Authority Name** drop list select **Dubai Corporation for Ambulance services** the system will prompt you to select the package or documents or pre-determined combination .

Licensing Authority Details

Authority Name: Dubai Corporation For Ambulance Services

Category: New application

Frequently Accessed Licensing Authorities

nhra
National Health Regulatory Authority

Ministry of Health
Saudi Commission for Health Specialization

Package Details

Regular application process. Cases will be processed within 30 working days from the date of the payment for package price.

Select Package: SCAS New Recruitment

Type of Check: Education, No. of Documents: 1

Type of Check: Employment, No. of Documents: 1

Type of Check: Health License, No. of Documents: 1

Type of Check: Database, No. of Documents: 1

Package Cost: 480

Additional Cost: 0

surcharge: 0

Total Cost: 480

* Value Added Tax (VAT) amount will incur an additional 5 % charge

* All amounts are in AED

BACK SAVE NEXT

4

Select the right package

Confirm your selection in **Package Details**:

- Select the right package
- Click on + to add more documents if required
- Confirm to proceed with the application process.

Note: Based on the selected package, your specific component details will be displayed.

Select the number of employment tenures covering the years of employment required for verification as per DCAS's guidelines

Select Package

Type of Check

Education

No. of Documents

1

+

-

Additional documents will be charged extra

Type of Check

Employment

No. of Documents

1

+

-

Please enter the number of Employment applicable for the last 3 Years

Type of Check

License

No. of Documents

1

+

-

Additional documents will be charged extra

Type of Check

Database

No. of Documents

1

+

-

On the **Personal Details** page, click the button **Upload** to upload a clear copy of your passport. The system will scan your passport and fill your details.



Mandatory Documents

Please upload a clear copy of your passport page

UPLOAD

Please upload a clear copy of your visa

UPLOAD

Please upload a clear copy of your personal photo

UPLOAD

Passport upload → Details confirmation → Submit

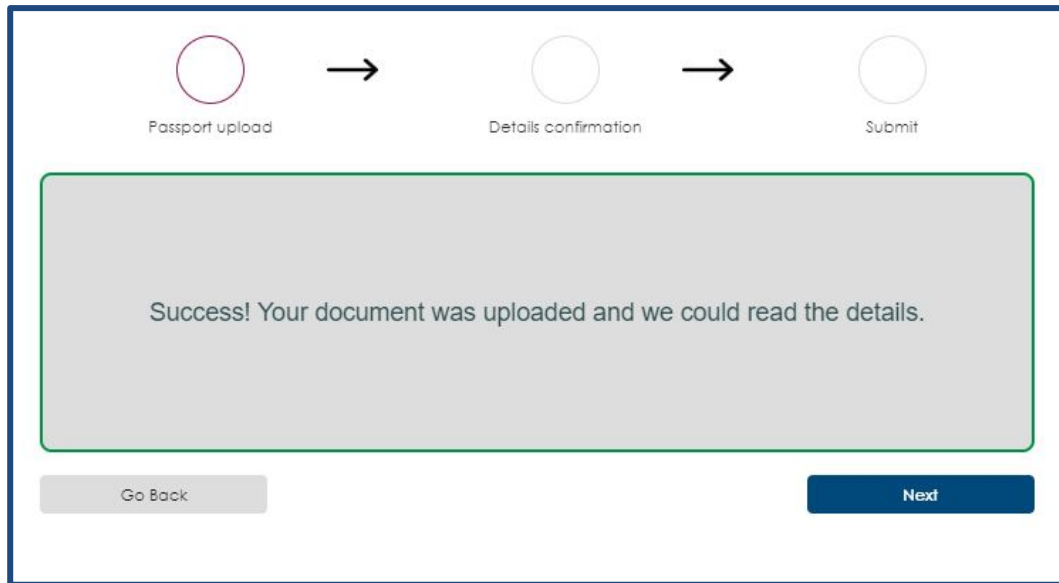
Drag your scanned passport image here

Or click here to upload

Tips that will allow us to read the passport easily:

- Use JPEG(JPG) or PNG format.
- Image size must be a maximum of 4MB.
- The image must be clear and easily read. Make sure that the light is not reflecting off the surface.
- The passport must be flat and in good light when the picture is taken.
- Be careful not to get fingers or other items holding the edges of the passport in to the image.
- DataFlow recommends the use of a scanning App such as Microsoft Lens, Tiny Scanner, Adobe Scan or similar for best results.

Go Back



The system will show a success screen in case it can successfully read your passport

In case the system is not able to read your passport, you shall see the following screen. Please **Try again** and use a clearer scanned passport copy or click on **Enter Manually** to add the details manually

Passport upload → Details confirmation → Submit

Oops! I couldn't read the file that you uploaded.

[Try again](#) [Enter manually](#)

Tips that will allow us to read the passport easily:

Use JPEG (JPG) or PNG format.
Image size must be a maximum of 4MB.
The image must be clear and easily read. Make sure that the light is not reflecting off the surface.
The passport must be flat and in good light when the picture is taken.
Be careful not to get fingers or other items holding the edges of the passport in to the image.
DataFlow recommends the use of a scanning App such as Microsoft Lens, Tiny Scanner, Adobe Scan or similar for best results.

[Go Back](#)

Please ensure that all details match your passport. Your case may be delayed or rejected if the details are not accurate.
All fields are mandatory.

Surname

Given names

Passport number

Issuing Country

Date of birth

Sex

Nationality

Passport Expiry Date

[Go Back](#) [Next](#)

Once the system is able to read your passport, your personal details shall be filled, please make corrections to the captured details if required then **Submit** them to move forward

Passport upload → Details confirmation → Submit

Please ensure that all details match your passport. Your case may be delayed or rejected if the details are not accurate.
All fields are mandatory.

Surname

Passport number

Date of birth

Nationality

Given names

Issuing Country

Sex

Passport Expiry Date

[Go Back](#)

Passport upload → Details confirmation → Submit

Congratulations - you're at the final step!
Can we please ask you to double-check one last time that all of the details are correct?

Surname

Passport number

Date of birth

Nationality

Given names

Issuing Country

Sex

Passport Expiry Date

[Go Back](#) [Submit](#)

The page will refresh with the personal information filled and once it shows the passport has been uploaded, please upload Visa Copy & Personal photo & Complete person details

Select your country of residency from the **Country** drop list

- Enter your **Country Code** and **Mobile Number** and click on **Generate OTP**
- You will receive an OTP (one time password) on your mobile
- Enter the **OTP** and click **Validate OTP**

Note:

- In case you don't receive a text message, re-check your number and click 'Re-generate OTP'.
- In case you are unable to receive OTP by SMS click **Get OTP on Call** and you will receive an incoming call with the OTP

As you click on **Issuing Authority Name**, the system will prompt with a pop-up to enter the details of your health/professional License

In the **Issuing Authority Name**, start typing your institutions name and select the correct one from the list

In case of any additional requirements shared by your institution with DataFlow, you will find the instructions on the screen

Please review Pages 24 & 25 in case you cannot find your Issuing Authority Name

Issuing Authority

Issuing Authority Name

ENTER ISSUING AUTHORITY NAME

Issuing Authority City

Issuing Authority State

Issuing Authority Country

SELECT

☐ I have read and understood the Minimum Requirements List and Special Instruction

Submit

Cancel

Reset

[I cannot find my Issuing Authority from the List](#)

- On the **Health/Professional License** page, enter the required details and upload clear uncropped scans of the mandatory documents listed below:
 - Previously issued health / professional license
- Select the type of document uploaded from the dropdown menu

Health License

You are about to fill the details of your Health License document. Please make sure to provide the dates (issue date, start date, end date, conferred date etc.), License Attained and other details **specifically as mentioned in the document to be verified**. Please ensure all data provided is accurate and exactly as mentioned on your submitted document to be verified. Any variance could lead to a delay in processing.

Issuing Authority Name	<input type="text"/>	Issuing Authority Address	<input type="text"/>
Issuing Authority City	<input type="text"/>	Issuing Authority State	<input type="text"/>
Issuing Authority Country	Select	Issuing Authority Phone Type (Cell/Landline)	Select
Issuing Authority Telephone Number	<input type="text"/>	Issuing Authority Email	<input type="text"/>
Issuing Authority Website	<input type="text"/>	License Attained	<input type="text"/>
Applicant's Name as per Document	SALMA ABU MERRI DAMAG	License Type	Select
License Status	Select	Registration/License Number / ID	<input type="text"/>
License Conferred Date	<input type="text"/>	License Expiry Date	<input type="text"/>
Valid From	<input type="text"/>		

Mandatory Documents

Upload copy of original health license to be verified.

UPLOAD

Optional Document / Information

Upload a copy of your renewed Health License (if any).
Upload a copy of the back side of your Health License.

UPLOAD

BACK SAVE RESET

6

Submit your documents | Employment

As you click on **Issuing Authority Name**, the system will prompt with a pop-up to enter the details of your previous employer.

In the **Issuing Authority Name**, start typing your previous employer's name and select the correct one from the list

In case your employer requires any specific information or details, the instructions will reflect on the screen.

Please review Pages 24 & 25 in case you cannot find your Issuing Authority Name

The screenshot displays a web form titled "Employment". At the top, a message states: "Please ensure all data provided is accurate and exactly as mentioned on your submitted document to be verified. Any variance could lead to rejection." Below this, there are three input fields: "Issuing Authority Name" (with a red asterisk), "Issuing Authority City", and "Issuing Authority Country" (with a red asterisk). The "Issuing Authority Country" field is a dropdown menu currently showing "Select".

Below the main form, a pop-up titled "Issuing Authority" is shown. It contains four input fields: "Issuing Authority Name" (with a placeholder "ENTER ISSUING AUTHORITY NAME"), "Issuing Authority City", "Issuing Authority State", and "Issuing Authority Country" (with a placeholder "SELECT").

Under the pop-up, there is a checkbox labeled "I have read and understood the Minimum Requirements List and Special Instruction". At the bottom of the pop-up are three buttons: "Submit" (dark blue), "Cancel" (grey), and "Reset" (teal).

At the bottom right of the entire form, there is a link: [I cannot find my Issuing Authority from the List](#).

- On the **Employment** page, enter the required details and upload clear uncropped scans of the mandatory documents listed below:
 - Experience certificate, or
 - Relieving certificate
- Select the type of Certificate you uploaded from the dropdown menu

Employment

Please ensure all data provided is accurate and exactly as mentioned on your submitted document to be verified. Any variance could lead to a delay in processing.

Issuing Authority Name Issuing Authority City Issuing Authority Country Issuing Authority Telephone Number Issuing Authority Website Applicant Name as per Document Department Employment Period (From) Managers Name Managers Phone Type (Cell/Landline) Managers State Code Managers Email id Last Remuneration Package Allowances Gross Agency's Name Agency's Telephone Number Was this employee be contacted for a reference now? If you have a break in employment of longer than 60 days during this period, then please explain this gap Performance	Employee Name Issuing Authority City Select Issuing Authority Telephone Number Issuing Authority Website SALARA ABHI WEBSITE (SALARA) Department Employment Period (From) Managers Name Select Managers State Code Managers Email id Select Allowances Gross Agency's Name Agency's Telephone Number If you have a break in employment of longer than 60 days during this period, then please explain this gap Select	Issuing Authority Address Issuing Authority State Issuing Authority Phone Type (Cell/Landline) Issuing Authority Email Last Profile/Designation Employee Code Nature of Employment Employment Period (To/From Date) Managers Designation Managers Country Code Managers Telephone Number Reason for leaving Basic Salary Bonuses Net Amt. Agency's Phone Type (Cell/Landline) Is there an employment overlap Enter the date we can contact them if you have selected "No" in the previous question Any issues pertaining to the employee's Eligibility of roles? Good Standing	Issuing Authority Address Employee State Select Issuing Authority Email Last Profile/Designation Employment - Employee Code Select Employment Period (To/From Date) Managers Designation Managers Country Code Managers Telephone Number Reason for leaving Basic Salary Bonuses Net Select Enter the date we can contact them if you have selected "No" in the previous question Any issues pertaining to the employee's Eligibility of roles? Select
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Mandatory Documents

Please upload a copy of employment certificate.

Upload

To Note:
 1. The employment certificate is related to your work experience, reflecting designation and complete work tenure (Start and End Date) issued by Human Resources or Administration Department only.
 2. In case of self employment, please make sure to submit your Business Registration Certificate.

6 Submit your documents | Education

As you click on **Issuing Authority Name**, the system will prompt with a pop-up to enter the details of the Issuing Authority of your degree.

In the **Issuing Authority Name**, start typing your University/Institute name and select the correct one from the list

In case your Issuing Authority requires any specific information or details, the instructions will reflect on the screen.

Please review Pages 24 & 25 in case you cannot find your Issuing Authority Name

The screenshot shows a web form titled "Education". At the top, a red-bordered box contains the instruction: "Please ensure all data provided is accurate and exactly as mentioned on your submitted document to be verified. Any variance could lead". Below this, there are three input fields: "Issuing Authority Name" (with a red asterisk), "Issuing Authority City", and "Issuing Authority Country" (with a red asterisk). The "Issuing Authority Name" field has a dropdown arrow on its right. Below these fields is a section titled "Issuing Authority" which contains four input fields: "Issuing Authority Name" (with a placeholder "ENTER ISSUING AUTHORITY NAME"), "Issuing Authority City", "Issuing Authority State", and "Issuing Authority Country" (with a placeholder "SELECT"). Below the "Issuing Authority" section is a checkbox labeled "I have read and understood the Minimum Requirements List and Special Instruction". At the bottom of the form are three buttons: "Submit" (dark blue), "Cancel" (grey), and "Reset" (teal). At the very bottom of the form, there is a link: "I cannot find my Issuing Authority from the List".

6 Submit your documents | Education

- On the **Education** page, enter the required details and upload clear uncropped scans of the mandatory documents listed below:
 - Original Education Degree(s)
 - The back page of Education Degree (Applicable for degrees obtained from Afghanistan, India, and Pakistan)
 - Select the type of document uploaded from the dropdown menu
 - Upload any additional documents
 - In case your educational institute has any additional request, our team member will reach out to you for the document or information

The screenshot shows a web form titled "EDUCATION" with a warning message: "Please ensure all data provided is accurate and exactly as mentioned on your submitted document to be verified. Any variance could lead to a delay in processing." The form is divided into two columns of input fields. The left column includes fields for Issuing Authority Name, City, Country (dropdown), Telephone Number, Website, Applicants Name as per Document (SALMANBU MEHRU DARGA), Qualification Type (dropdown), Expected completion Date (if Still Studying), Major Subject, Roll Number/Seat Number/Hall Ticket Number, Period Of Study From, Qualification Conferred Date, and Examination Date. The right column includes fields for Issuing Authority Address, State, Phone Type (dropdown), Email, Qualification Awarded, College/Institution Name, Have You Completed this Degree/Course (dropdown), Mode of Study (dropdown), Minor Subject (if Applicable), Registration / Enrollment Number, Period Of Study To, Document Issue Date, and Diploma Received. At the bottom, there is a section for "Mandatory Documents" with instructions to upload the front page of the qualification document and the relevant back page (Certificate/Diploma/Degree, Transcript of Records (TOR) etc. Applicable). An "UPLOAD" button is located at the bottom right of the form.

6 MANDATORY - Letter of Authorization

After you have entered all certificate details you will need to digitally sign the **letter of Authorization**. This is a mandatory document

- Click on Consent
- Read and scroll down
- Then click Consent

Note: Click on **download PDF** if you would like to save a copy of your consent before you click on **Finish**

The image displays three overlapping screenshots of the DataFlow Letter of Authorization process. The top screenshot shows a document icon labeled 'Letter of Authorization' and a 'Consent' button. The middle screenshot shows a scrollable document titled 'Letter of Authorization' with the DataFlow logo and a 'Consent' button. The bottom screenshot shows the completed document with fields for 'Name' (i Damaj) and 'Sanctioned o' (322), a 'Download PDF' button, and a 'Finish' button.

Letter of Authorization

Consent

Before DataFlow may act on your behalf to verify your information and documents, you first have to consent to the Letter of Authorization. **Please read the complete text below** before you consent with your Given Names and Surname:

Letter of Authorization

I hereby authorize the DataFlow Group, its authorized affiliates, agents and subsidiaries acting on its behalf, to

By clicking on Consent, you are legally signing the above Letter of Authorization.

Given Names * Surname

Consent

Letter of Authorization

This authorization signifies and records a memorandum of legally binding consent via means of legitimate digital consent

Name i Damaj

Sanctioned o 322

Download PDF

Finish

6

Review Application before submission

On the **Application Review** page, carefully review your entered details before submitting.

You can edit your entered information by clicking on the **Edit** tab.

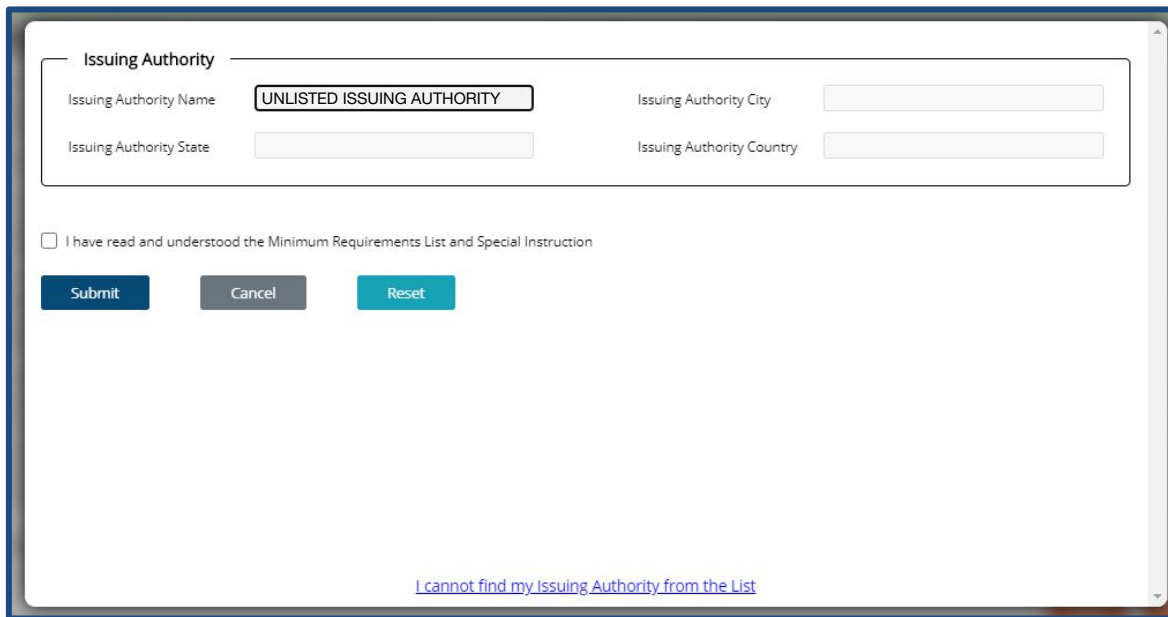
The screenshot displays the 'Application Review' page, which is organized into several sections for reviewing application details. Each section contains a list of fields on the left and a corresponding form area on the right.

- Personal Details:** Includes fields for Name, Address, Date of Birth, and Contact Information.
- Employment Details:** Includes fields for Employer Name, Address, and Contact Information.
- Education:** Includes fields for Institution Name, Address, and Contact Information.
- Financials:** Includes fields for Income, Expenses, and Assets.
- Health:** Includes fields for Medical History, Current Health, and Insurance.
- References:** Includes fields for Referee Name, Address, and Contact Information.
- Comments:** A section for providing additional information or comments.

At the bottom of the page, there are buttons for 'Save', 'Cancel', and 'Submit'.

6 a In case your Issuing Authority is not listed

Please type the name of your Issuing Authority, and in case it is not listed click on **I cannot find my Issuing Authority from the list**



The screenshot shows a web form titled "Issuing Authority". It contains four input fields: "Issuing Authority Name" (with the text "UNLISTED ISSUING AUTHORITY" entered), "Issuing Authority City", "Issuing Authority State", and "Issuing Authority Country". Below these fields is a checkbox labeled "I have read and understood the Minimum Requirements List and Special Instruction". At the bottom of the form are three buttons: "Submit" (dark blue), "Cancel" (grey), and "Reset" (teal). A link at the bottom right of the form reads "[I cannot find my Issuing Authority from the List](#)".

Issuing Authority

Issuing Authority Name UNLISTED ISSUING AUTHORITY Issuing Authority City

Issuing Authority State Issuing Authority Country

☐ I have read and understood the Minimum Requirements List and Special Instruction

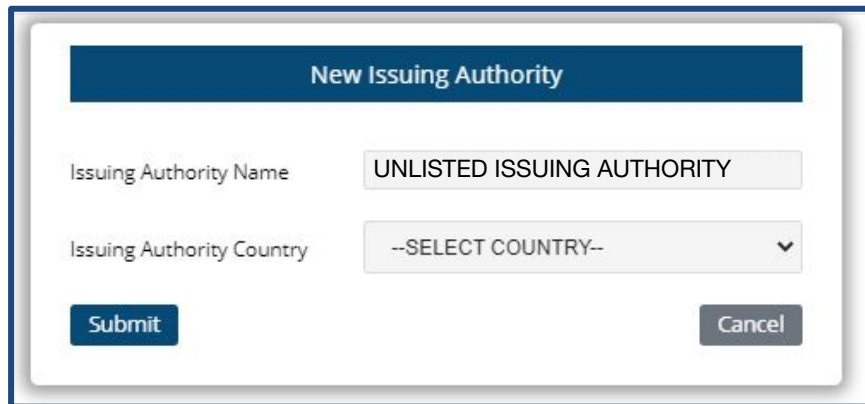
Submit Cancel Reset

[I cannot find my Issuing Authority from the List](#)

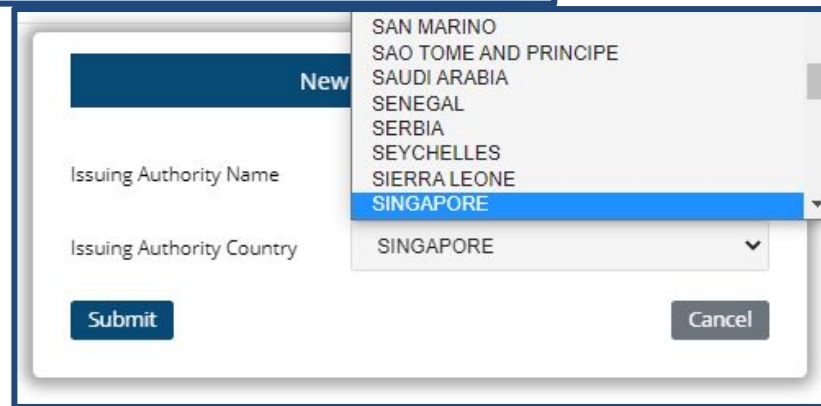
6 a In case your Issuing Authority is not listed

A new popup will open to allow you to enter the name and country of your issuing authority.

Enter the details and click on **Submit**



The image shows a 'New Issuing Authority' form. It has a title bar at the top. Below it, there are two input fields: 'Issuing Authority Name' with the text 'UNLISTED ISSUING AUTHORITY' and 'Issuing Authority Country' with a dropdown menu showing '--SELECT COUNTRY--'. At the bottom, there are two buttons: 'Submit' and 'Cancel'.



The image shows the same 'New Issuing Authority' form, but with the 'Issuing Authority Country' dropdown menu open. The dropdown list shows a scrollable list of countries: SAN MARINO, SAO TOME AND PRINCIPE, SAUDI ARABIA, SENEGAL, SERBIA, SEYCHELLES, SIERRA LEONE, and SINGAPORE. The 'SINGAPORE' option is highlighted in blue. The 'Submit' and 'Cancel' buttons are still visible at the bottom.


On the **Payment** page - based on the package selected, you will view the overall fee in the **Total Amount** field.

Click on **Submit Application** and you will be redirected to the payment gateway.

Once you click the "SUBMIT APPLICATION" button you will be redirected to Payment Gateway. To Note: Changes cannot be made to the application once you make the payment.

Payment

☐ I agree to receiving SMS updates from The DataFlow Group related to the status of my cases and am willing to pay an additional charge of AED 9.54 for this service.

Package Amount	<input type="text"/>	surcharge	<input type="text"/>	Premium Services	<input type="text"/>
VAT (Value Added Tax) Amount	<input type="text"/>	Total Amount	<input type="text"/>	Payment Method	Credit Card 

*Amount in AED
*VAT (Value Added Tax) percentage of 5 %

BACK SUBMIT APPLICATION

Once you have completed your payment you will receive a receipt by email and the the Primary Source Verification process will start.

DataFlow Services FZ LLC
P.O. Box 73743
Dubai
United Arab Emirates

Tax registration number 100241353000003



TAX INVOICE



Receipt number: 180702-300645

Payment method: Credit Card

Name: Taylor, Garry

Date: 4 July 2019

Email: gtaylor@dataflowgroup.com

Passport no. 1234567890

	Service	Currency	Net amt.	VAT rate	VAT	Total
1	Premium Services - SMS updates	AED	XXX	X%	XXX	XXX
2	Premium Services - Express processing	AED	XXX	X%	XXX	XXX
3	Premium Services - VIP processing	AED	XXX	X%	XXX	XXX
4	Primary Source Verification CASE NUMBER: TC99-1901-000001 CASE TYPE: New/Renew CLIENT NAME: Test Customer CLIENT REF NUMBER: T2019010100001 PACKAGE DETAILS: Professional 1/Professional 2/Etc. EDUCATION 1: University EDUCATION 2: University EMPLOYMENT 1: FZ LLC EMPLOYMENT 2: FZ LLC LICENSE 1: Hospital	AED	XXX	X%	XXX	XXX
	Total	AED	XXX	X%	XXX	XXX

NOTES:


1. Primary Source Verification payments may be cancelled and refunded up to 48 hours of the payment being made. After 48 hours, refunds will not be accepted.

* Note: The above receipt is a sample

8

Track your Application

Visit www.dataflowstatus.com to track the status of your application and download a copy of the report once ready.



DATAFLOW

Check verification status and download report

Search by DataFlow Case Number ? Search by Reference Number ?

DataFlow Case Number Passport Number

Enter the DataFlow Case Number and Enter the Passport Number

Check Status



Thank You

www.dataflowgroup.com