



معادلة الشهادة الألمانية وإجراءاتها المختلفة في المجلس الطبي الأردني
ووزارة الصحة

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استشاري أمراض الدماغ و الجهاز العصبي

الوثائق المطلوبة بشكل أساسي للمعادلة:

- Approbationsurkunde
- Facharzturkunde
- Weiterbildungszeugnis
- Bescheinigung über 3-jährige Tätigkeit nach Facharztanerkennung

Deutschland:

- Notar – Ärztekammer – Bürgerbüro
- Landgericht - Bezirksregierung
- Auswärtiges Amt
- Jordanische Botschaft Berlin

الأردن:

- وزارة الخارجية ؟
- المجلس الطبي و تعبئة طلب المعادلة اونلاين و دفع 50 دينار لحين اجتماع اللجنة، وعند الموافقة على معادلة شهادتك يتم دفع 400 دينار
- الذهاب النقابة الاطباء ل 1. تسديد جميع المستلزمات المالية
- 2. طلب الحصول على شهادة انك مسجل تسجيلاً دائماً كأخصائي في تخصصك، تكلفة الطلب 100 دينار
- عمل شهادة عدم محكومية اونلاين
- التوجه إلى البريد الأردني و تعبئة طلب ترخيص مزاولة مهنة صحية و بعثه لوزارة الصحة، تكلفة الطلب 25 دينار

الموقع الرسمي لتسجيل حساب الأطباء في المجلس الطبي الأردني





اجراءات الداتا فلو



[Home](#) [About Us](#) [Our Solutions](#) [Primary Source Verification Services](#) [Corporate Social Responsibility](#) [Resources](#) [Contact Sales](#)

Jordan Medical Council

[Home](#) » [Primary Source Verification Services](#) » [Healthcare](#) » [Jordan Medical Council](#)



المجلس الطبي الاردني
المملكة الاردنية الهاشمية

Since 2006, the DataFlow Group has partnered with public and private sector clients and entities to provide specialized Primary Source Verification (PSV) solutions, background screening, and immigration compliance services across the Middle East and worldwide.

We are a trusted Primary Source Verification (PSV) partner for the Jordan Medical Council (JMC). Our role involves verifying the education credentials of individuals who submit their applications to the Jordan Medical Council (JMC).

Activate Windows

Go to Settings to activate Windows

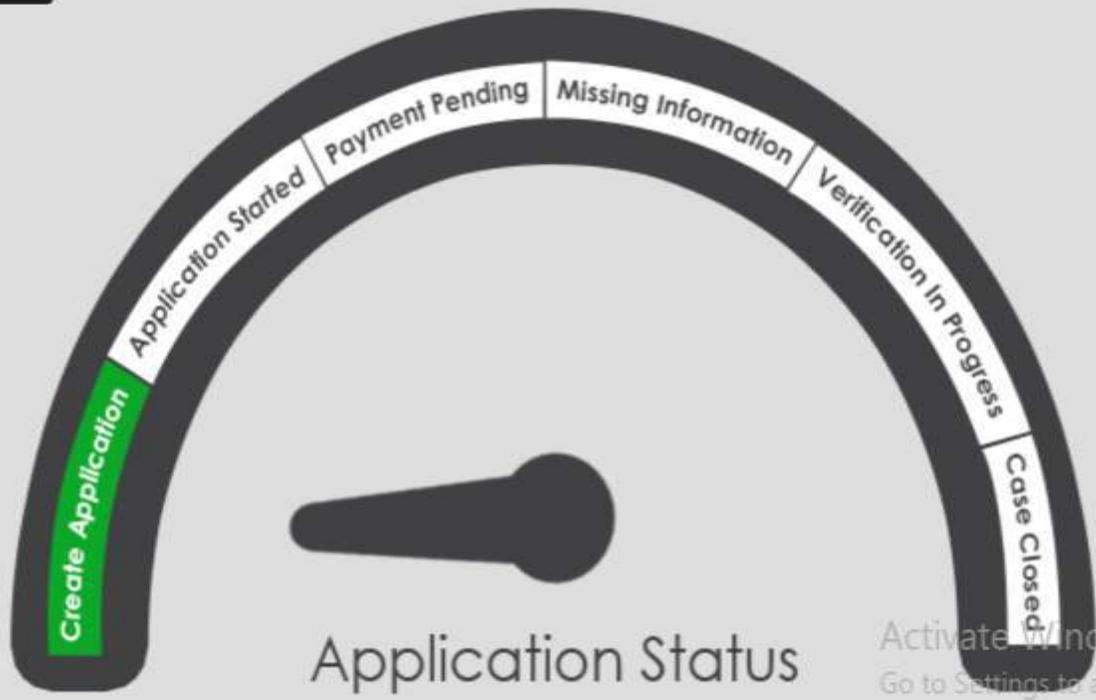


<p>- Jordanian only</p>	<p>JMC Exam Exemption Announcement No. 17</p>	<p>1- Highest Specialty Qualification in the specialization country</p> <p>2- Specialty training certificate</p> <p>3- Specialty License certificate</p> <p>4- One Experience certificate (mandatory tenure is three continuous years)</p> <p>In case of additional experience certificate to be calculated on top of this package</p> <p>5- CrossCheck risk database</p>	<p>295\$</p>
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 Start Application

 Check Your Status

Select Case



Application Status

Activate Windows
Go to Settings to activate Windows

1

Licensing Details

2

Personal Details

3

Verification Details

4

Letter of
Authorisation

Licensing Authority Details

Authority Name

Jordan Medical Council



I want to verify my documents without selecting a specific authority

Select Category 1

Select Category 2

Select Category 3

Select



Select



Select



Frequently Accessed Licensing Authorities



الهيئة الوطنية لتنظيم المهن والخدمات الصحية
NATIONAL HEALTH REGULATORY AUTHORITY



الهيئة السعودية للتخصصات الصحية
Saudi Commission for Health Specialties



Ministry of Public Health



Welcome Drmohammadiyah@Gmail.Com

English ▼



[Home](#) | [Change Password](#) | [Contact Us](#) | [Log Out](#)



Licensing Authority Details

Authority Name Jordan Medical Council ▼

I want to verify my documents without selecting a specific authority

Select Category 1

Jordanian Citizen ▼

Select Category 2

JMC Exam Exemption An ▼

Select Category 3

Select ▼

Frequently Accessed Licensing Authorities



الهيئة الوطنية لتنظيم المهن والخدمات الصحية
NATIONAL HEALTH REGULATORY AUTHORITY



الهيئة السعودية للتخصصات الصحية
Saudi Commission for Health Specialties



Ministry of Public Health

Activate Windows
Go to Settings to activate Windows

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Licensing Details

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Personal Details

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Verification Details

4
Letter of
Authorisation

Licensing Authority Details

Authority Name

Jordan Medical Council

I want to verify my documents without selecting a specific authority

Select Category 1

Jordanian Citizen

Select Category 2

JMC Exam Exemption An

Select Category 3

Regular Service

Frequently Accessed Licensing Authorities



Ministry of Public Health

Select Category 1

Jordanian Citizen

Select

JMC E

Frequently Accessed Licensing Authorities



الصحة
Saudi Com

Package Details

Message to Proceed

Based on your input you have selected the following :

Authority Name: **Jordan Medical Council**

Select Category 1: **Jordanian Citizen**

Select Category 2: **JMC Exam Exemption Announcement No. 17**

Select Category 3: **Regular Service**

Package: **Jordanian with JMC Exam Exemption Announcement No. 17**

Package Amount: **USD 295**

Click 'Confirm' to proceed with the application process. However, you can still amend the selected package by clicking on Change at any time.

NOTE: Incorrect information may lead to delays and additional costs.

CONFIRM

CHANGE

Select Package
 Jordanian with JMC Exam Exe

Type of Check/Document	No. of Checks/Documents	Type of Check/Document	No. of Checks/Documents
Database	1	Training Certificat	1

Additional checks/documents will be charged extra

Additional checks/documents will be charged extra

Type of Check/Document	No. of Checks/Documents	Type of Check/Document	No. of Checks/Documents
Education	1	Employment	1

Additional checks/documents will be charged extra

Additional checks/documents will be charged extra

Type of Check/Document	No. of Checks/Documents
Professional Licer	1

Additional checks/documents will be charged extra

Package Cost : 295
 Additional Cost : 0
 surcharge : 0
Total Cost : 295

* VAT(Value Added Tax) amount will incur an additional 5 % charge
 * All amounts are in USD

loading data.. please wait..

1

Licensing Details

2

Personal Details

3

Verification Details

4

Letter of
Authorisation

Mandatory Documents

Please upload a clear copy of your passport page

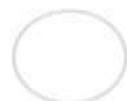
UPLOAD



Please enter all details in ENGLISH language only.



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.
- Maximum of 4MB.
- The image must be of the passport details page only. Do not include additional pages.
- The image must be clear and easily read.
- The passport must be flat, in good light with no reflections.

Activate Windows
Go to Settings to activate Win



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?

Personal Details

First Name

Middle Name

Last/Family Name

Gender

Passport Number

Previous DataFlow Case Reference Number for Report Transfer (if applicable)

Date of Birth

Country

Country Code

Telephone Number

Personal Email ID

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- املأ الفراغات المطلوبة باللغة الانجليزية - حمل الوثائق المطلوبة بلغتها الأم



Please enter all details in ENGLISH language only.

Education

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.

University /
College Name *

University /
College Country *

Applicant's Name
as per Document *

Qualification
Attained *

Degree/Course is
completed *

Mode of Study *

Conferred Date *



Activate Windows

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Please upload the documents to be verified (such as degree, transcript/mark sheets, experience letter, etc) along with the mandatory requirements, if any, mentioned in the section below.

Note: If multiple documents are required, please utilize the same upload option to submit all documents.

UPLOAD

BACK

SAVE

NEXT

Activate Windows

ماذا أفعل عند عدم العثور على المشفى المطلوب؟

Issuing Authority

Issuing Authority Name	<input type="text"/>	Issuing Authority City	<input type="text"/>
Issuing Authority State	<input type="text" value="I cannot find my Issuing Authority from the List"/>	Issuing Authority Country	<input type="text" value="SELECT"/>

Please note **"I cannot find my Issuing Authority"** link available at the bottom of the drop-down list displayed for Issuing Authority

I have read and understood the Minimum Requirements List and Special Instructions and I understand that my issuing authority may charge additional fees for verification processing that will be passed through to my total bill at the checkout stage. I also understand that in case my issuing authority increases or adds fees that DataFlow is currently not aware of, DataFlow will contact me for the payment of an additional fee. **I confirm correct information is submitted to avoid any delays in processing my application.**

Employment

Employment 1 NEW IA

Check Is In Validation



خطوة الداتاقلو تجاه المشفى الجديد

Um unseren Verifizierungsprozess zu optimieren, bitten wir Sie um die folgenden Informationen:

Name des autorisierten Prüfers:

Abteilung:

Bezeichnung:

E-Mail-ID:

Handynummer:

Instituts-/Hochschulakkreditierung: Ja/Nein

Art des Leitungsgremiums: Regierung / Halb Regierung / Private

Einrichtung / Institut / Universität / Non-Profit-Organisation /

Nichtregierungsorganisation / Regulierungsbehörde

Employer Name

Employer State

Employer
Country

Applicant's
Name as per
Document

Employment
Period (From)

Employment
Period (To/Till
Date)

Last
Profile/Designation



Employment...

(Employment
Certificate
Issued from the
Human
Resource
Department
(HRD))

Activate Windows
Go to Settings to activate Windows

1

Personal Details

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Licensing Details

3

Verification Details

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Letter of
Authorisation



Letter of Authorisation

Consent

BACK

NEXT



Before DataFlow may act on your behalf to verify your information and documents, you first have to consent to the Letter of Authorisation. **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 verify the information and documents presented with my application form; including, but not limited to, education, employment and licenses.

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

Given names *

Surname

[Rate Win](#)
[Go to Settings to](#)



Letter of Authorisation

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

Name

Sanctioned on

Download PDF

Finish



Letter of Authorisation



Consent

Mandatory Documents



Letter of
Authorisation



BACK

NEXT

Activate Window
Go to Settings to activa



آلية الدفع

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

Please note:-

Your Issuing Authorities (Universities, Councils, etc.) may request additional or extra verification fees. In these cases, the DataFlow Group will contact you in order to collect this additional payment in order to continue processing the case.

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 USD 2.6 for this service.

Payment Method

Credit Card



Package Net Amount

122

VAT(Value Added Tax) Amount

6.23

surcharge

0

GROSS AMOUNT (USD)

130.83

Premium Services

2.6

Activate Windows

Go to Settings to activate Windows

Applications successfully submitted for Licensing Authority

You can view the application details along with applicant's case & check status under Check Status tab.

To download the payment receipt, click on "Check Status" on the dashboard page and download the payment receipt from the concerned case.

Check Status

Home

Activate Windows
Go to Settings to activate



هذا ايميل التأكيد



Dear [Name],

Your PSV application has been received and is being processed under DataFlow Case Number [Case Number].
The verification process shall start once details and documents submitted by you have been successfully reviewed. If we need any additional information or discover missing documents we will contact you via your registered contact IDs.

Your application is expected to be completed by 11/11/2024. The date may be extended in case any missing or required documents or clarifications are submitted on a later date.

Activate Windows

ثم يتم ارسال هذا الايميل من الداتافلو الى الجهة المعنية

Bitte bestätigen Sie die unten genannten Details -

- 1- Das beigefügte Dokument ist echt - Ja oder Nein?
- 2- Der Antragsteller arbeitet noch mit der Einrichtung – Ja oder Nein? (Wenn nein, geben Sie bitte das Enddatum an).
- 3- Darf der Kandidat bei einer anderen Organisation arbeiten, während er in Ihrer Organisation beschäftigt ist – Ja oder Nein?
- 4- Ist Ihnen bekannt, dass der Bewerber mit einer anderen Organisation zusammenarbeitet?

عند صدور التقرير والانتهاء من التحقق من المعاملة

DataFlow PSV Case Completed

Case Is Completed

Case Status Summary

- 6 out of 6 checks are completed

Case Outcome: Positive

Important Notes

- To open the report - Please enter your date of birth in DDMMYYYY format without space
- The free report is available for download for 90 days, after which a fee will be payable. The validity will expire on 2024-10-10 10:00:00

في حال نقص احد المستندات وازادتها

- Jordanian - Non-Jordanian	Additional Documents	Any type of additional documents over a package or report transfer	70\$
- Jordanian - Non-Jordanian	Report Transfer	1- Previous DataFlow report transfer to JMC 2- CrossCheck risk database	52\$

Licensing Authority Details

Customer: Jordan Medical Council

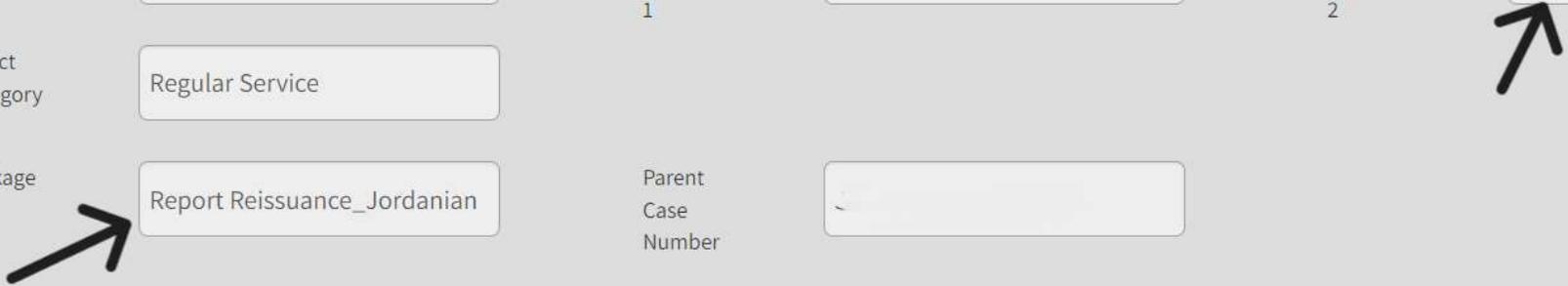
Select Category 1: Jordanian Citizen

Select Category 2: Report Reissuance

Select Category 3: Regular Service

Package: Report Reissuance_Jordanian

Parent Case Number: [Empty]



عند تغيير عنوان شهادة تم معادلتها الاعتراف بها لدى الداتاقلو

to be verified (such as degree, transcript/mark sheets, experience letter, etc) along with the mandatory requirements in the section below.

Note: If multiple documents are required, please utilize the same upload option to submit all documents.

→ Upload a copy of your Name Change Certificate. ←

Employment Certificate I

Employment...

UPLOAD

الراغبين في تقديم البورد الأردني:

- Jordanian Board - Non-Jordanian Qualification	1- Highest Specialty Qualification in the specialization country	155\$
	2- Specialty training certificate	
	3- CrossCheck risk database	

سلبيات الداتافلو:

عدم وجود رقم هاتف للاتصال المباشر
عدم فهم طلبك بوضوح برغم ارسال الرسائل الالكترونية
العامل المادي
الوقت



شكرا لحسن استماعكم... أسئلة؟؟ 😊😊