



Primary Source Verification

Department of Community Development Abu Dhabi

How to Apply

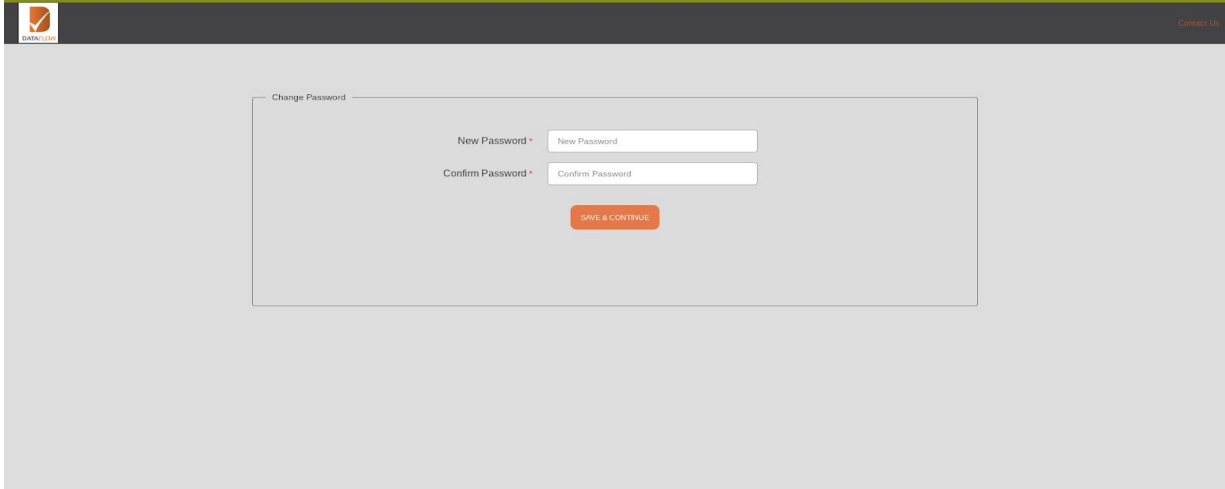
'A Step By Step Guide for Completing Your Application'



Step 1 Signup

- Visit www.dfgateway.com
- Enter your email ID to begin

* 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 above, containing an activation link. Please click on the activation link to complete your registration and set your password



The screenshot shows a web page with a dark header containing the DataFlow logo and a 'Contact Us' link. The main content area is a light gray box titled 'Change Password'. Inside this box, there are two input fields: 'New Password' and 'Confirm Password', each with a small asterisk to its left. Below the input fields is an orange button labeled 'SAVE & CONTINUE'.



Step 2 Activate your account

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



Welcome to The DataFlow Group Central Client Portal. Please enter your login credentials to begin.

Next Next

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



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[Contact Us](#)

Forgot Password

Registered Personal Email ID *

Registered Personal Email ID

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SUBMIT

Step 3 Applications Dashboard

- On the 'Dashboard' page, click the 'Detailed Case Entry' button to initiate a new application
- You can also track your application by selecting your DataFlow Group 'Case Reference' from the 'Select Case' dropdown menu or by clicking the 'Check Your Status' button





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The screenshot shows the DataFlow Gateway web application. At the top left, there is a logo and the text "DataFlow Gateway" and "Welcome Test". At the top right, there are navigation links: "Home", "Contact Us", and "Log Out". The main content area features two orange buttons on the left: "+ Detailed Case Entry" and "Check Your Status". In the center, there is a "Select Case" dropdown menu with "Select" as the current selection. Below this is a large semi-circular gauge labeled "Application Status". The gauge has a needle pointing to the "Create Application" segment, which is highlighted in green. Other segments include "Application Started", "Payment Pending", "Missing Information", "Verification in Progress", and "Case Closed".



Step 4 Licensing Authority Details

- Choose the Department of Community Development Abu Dhabi from the 'Select Licensing Authority' dropdown menu



- Please select from the dropdown in 'Category 1' based on your country of education. The options are as follows:
 - a. **International Education:** Please select this option in case one or more of your institutes of education are from outside of UAE (United Arab Emirates)
 - b. **Report transfer Non-UAE regulator:** Please select this option in case you are seeking to transfer your existing DataFlow report generated for a regulator outside of UAE
 - c. **Report transfer UAE regulator:** Please select this option in case you are seeking to transfer your existing DataFlow report generated for a UAE based regulator
 - d. **UAE Education:** Please select this option in case your institution of education is within the UAE



- Based on your selection of the option in 'Category 1', the list within 'Category 2' would be updated. Please select from the options best suited to your application as per the Department of Community Development Abu Dhabi. Currently the options are as under:



1. International Education

1.1. Please select 'International Education' package

Licensing Authority Details

Authority Name

Select Category 1

Select Category 2

Package Details

Select Package

- Select
- Select
- International Education

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2. Report transfer Non-UAE regulator:

2.1. Please select 'Report Transfer Non UAE Regulator' package

Licensing Authority Details

Authority Name

Select Category 1

Select Category 2

Package Details

Select Package

- Select
- Select
- Report Transfer Non UAE Regulator

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3. Report transfer UAE regulator:

3.1. Please select 'Report Transfer UAE Regulator' package





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Licensing Authority Details

Authority Name

Select Category 1

Select Category 2

Package Details

Select Package

- Select
- Select
- Report Transfer UAE Regulator

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4. UAE Education:

4.1. Please select from the dropdown in 'Category 2' based on requirements shared by the Department of Community Development Abu Dhabi

4.1.1. **One Edu + One Exp:** Please select this option if you are required to verify one Education Credential and one Experience certificate, where both are issued from authorities within the UAE

4.1.2. **One education:** Please select this option if you are required to verify only one Education Credential issued from an educational institute within the UAE

4.1.3. **Two Edu + One Exp:** Please select this option if you are required to verify two Education Credential and one Experience certificate, where all three are issued from authorities within the UAE

Licensing Authority Details

Authority Name

Select Category 1

Select Category 2

- Select
- Select
- One Edu + One Exp
- One Education
- Two Edu + One Exp

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You can add additional documents or certificates for verification for an additional fee by clicking on the '+' button. Additionally in case you decide not to proceed with the additional document or credential click to reduce the count by clicking the '-' button.





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Please note that the count cannot be reduced below the standard package count of the documents.

Select Package
UAE Educated

Type of Check
Education

No. of Checks
1

Add Product

You can add additional types of documents or certificates for verification for an additional fee by clicking the 'Add Product' button. This will bring up the types of documents or credentials that are added to the combination.

The system would prompt you to confirm your choice of options prior to proceeding further. The system will also display the calculated total amount payable based on your selection of options.

* Note: you would be able to add additional Education or Employment verification components for an additional charge within the packages



Step 5 Personal Details

- On the 'Personal Details' page, enter the required details
- Upload clear uncropped scans of the mandatory documents listed below:
 - a. Passport
 - b. Name Change Certificate (If applicable) - Supported by a Marriage Certificate, Affidavit or Any Other Legal Document
- Click 'Save' to save your personal details before proceeding further
- Once the personal details are saved, please click 'Next' to move to the next step
- As a set of next steps, the system will ask you to enter information about the selected certificates and upload the required documents for verification

Please enter all details in ENGLISH language only

Personal Details

First Name *	<input type="text" value="First Name"/>	Middle Name	<input type="text" value="Middle Name"/>	Last/Family Name *	<input type="text" value="Last/Family Name"/>
Gender	<input type="text" value="Select"/>	Passport Number *	<input type="text" value="Passport Number"/>	Date of Birth *	<input type="text" value="Date of Birth"/>
Case Reference Number (transferred) *	<input type="text" value="Case Reference Number (transferred)"/>	Nationality *	<input type="text" value="Select"/>	Country Code *	<input type="text" value="+93 Afghanistan (AF)"/>
Mobile Number *	<input type="text" value="Mobile Number"/>	Personal Email ID *	<input type="text" value="Personal Email ID"/>	Professional Email ID	<input type="text" value="Professional Email ID"/>

Mandatory Documents

Upload clear scan copy of Passport (First and Last Page) or clear scan of National Identification Card.



Step 6 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)

Please enter all details in ENGLISH language only.

Issuing Authority Name *	<input type="text" value="Issuing Authority Name"/>	Issuing Authority Address	<input type="text" value="Issuing Authority Address"/>
Issuing Authority City	<input type="text" value="Issuing Authority City"/>	Issuing Authority State	<input type="text" value="Issuing Authority State"/>
Issuing Authority Country *	<input type="text" value="Select"/>	Qualification Attained *	<input type="text" value="Qualification Attained"/>
Applicants Name as per Document *	<input type="text" value="Karen Bir Singh"/>	College/Institution Name	<input type="text" value="College/Institution Name"/>
Have You Completed this Degree/Course	<input type="text" value="Select"/>	Mode of Study *	<input type="text" value="Select"/>
Major Subject *	<input type="text" value="Major Subject"/>	Period Of Study From	<input type="text" value="Period Of Study From"/>

Mandatory Documents

Upload the front page of the qualification document to be verified (Certificate/Diploma/Degree).
Upload the relevant all year marksheet or Transcript of Records (TOR) (As Applicable).

Optional Document / Information

Upload the back page of the qualification document to be verified if it contains any stamps, endorsements or unique identifiers (Certificate/ Diploma/ Degree).



Step 7 Experience




- On the 'Experience' page, enter the required details and upload clear uncropped scans of the mandatory documents listed below:
 - Experience certificate, or
 - Relieving certificate

Please enter all details in ENGLISH language only.

Issuing Authority Name *	HSSSI ACADEMY CSSD FOUNDATION, STERILE SUPPLY TRAI	Issuing Authority Address	P.B No 01 Sterilization House Kulappuram(East) near Pariyaram Viliyancode(PO) Kannur(Dist) Kerala, India 670504
Issuing Authority City	KANNUR	Issuing Authority State	Kerala
Issuing Authority Country *	India	Last Profile/Designation *	fgdfg
Applicants Name as per Document *	Karan Bir Singh	Employee Code	Employee Code
Department	Department	Nature of Employment	Select
Employment Period (From) *	01/09/2019	Employment Period (To/Till Date) *	17/09/2019
Reason for leaving	Reason for leaving	Performance	Select
GoodStanding	Select		

Mandatory Documents

Upload Experience Letters from Previous/Current employers.


 Research Report - Not !  
 Employment...

UPLOAD



Step 8 Certification of Good Standing

- On the 'Certificate of Good Standing' page, enter the required details and upload clear uncropped scans of the mandatory documents listed below:
 - a. Certificate of Good Standing

Please enter all details in ENGLISH language only.

Issuing Authority Name *	UNIVERSITY OF ADEN	Issuing Authority Address	NA3
Issuing Authority Country *	Yemen	Applicant's Name As Per Document *	Applicant's Name As Per Document
License Type	Select	License Status *	Active
License Number *	32456		

Mandatory Documents

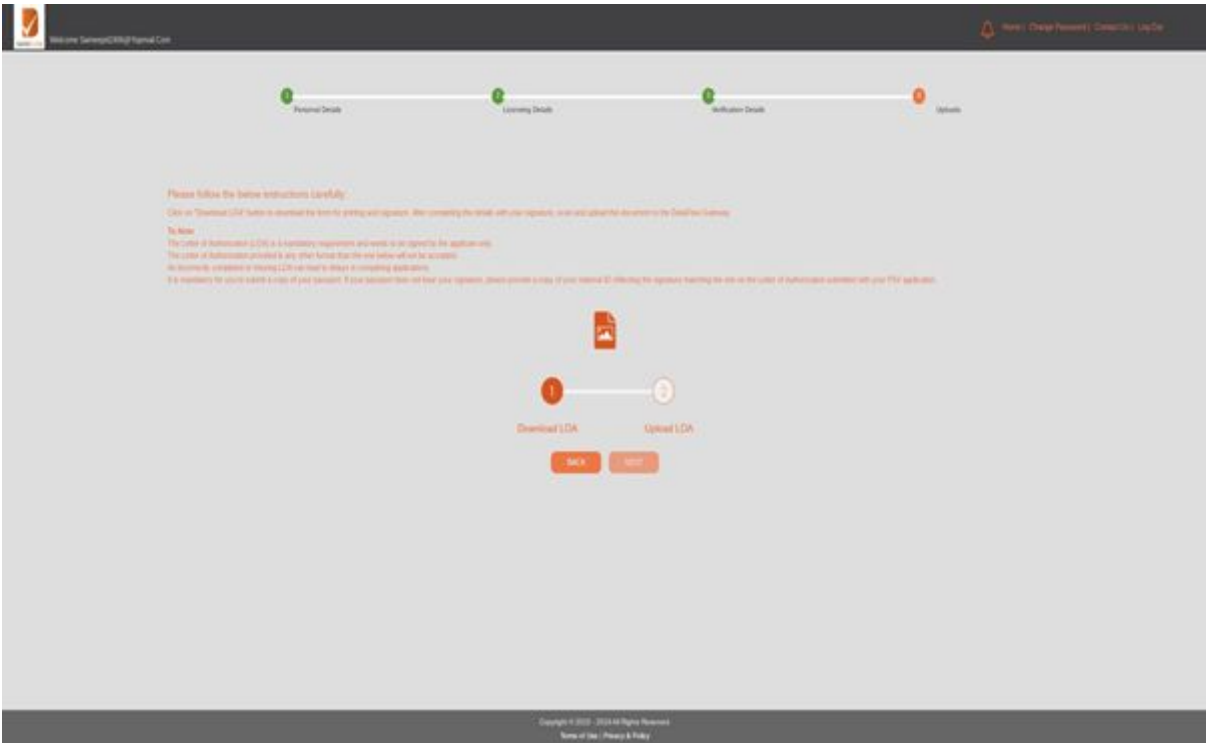
Upload an updated copy of Good Standing Certificate.

UPLOAD



Step 9 MANDATORY - Letter of Authorization

- After you have entered all certificate details - a signed 'Letter of Authorization' is required before proceeding further. **This is a mandatory document**
- Download the 'Letter of Authorization'
- Print, Sign and Scan the signed 'Letter of Authorization'
- Upload a clear and complete scan of the 'Letter of Authorization' to proceed further



Welcome Gateway@Dof.gov.ae

Home | Change Password | Contact Us | Log Out

Personal Details | Learning Details | Authorization Details | Uploads

Please follow the below instructions Carefully

Click on 'Download LDA' button to download the form for printing and signature. After completing the form, with your signature, scan and upload the document to the Dashboard/Uploads.

To Note
The Letter of Authorization (LDA) is a mandatory requirement and needs to be signed by the applicant only.
The Letter of Authorization provided in any other format than the one below will not be accepted.
An electronic signature or stamping (LDA) will lead to delays in completing applications.
It is mandatory to attach valid copies of your passport. If your passport has not been your signature, please provide a copy of your national ID, indicating the signature bearing the date on the Letter of Authorization submitted with your LDA application.

Download LDA | Upload LDA

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Step 10 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





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Welcome Ssdhpr@Yopmail.Com

Home | Change Password | Contact Us | Search | Log Out

Personal Details

First Name: Test1 Middle Name: Middle Name Last Family Name: Customer
 Gender: Female Passport Number: A12345 Date of Birth: 1/09/1974
 Case Reference Number (transferred): Case Reference Number (transferred) Nationality: Indian Country Code: +91
 Mobile Number: 9912345678 Personal Email ID: ssdhpri@yopmail.com Professional Email ID: Professional Email ID

Licensing Authority Details

Customer: Social Services Department Shajah Select Service Type: Regular Service Select Case Type: Fresh
 Package: Professionals Package 1

Education

Issuing Authority Name: AMITY UNIVERSITY Issuing Authority Address: Block - J2, Ground Floor Amity University Campus Sec Issuing Authority City: NOIDA
 Issuing Authority State: Uttar Pradesh Issuing Authority Country: India Qualification Awarded: BA
 Applicant's Name as per Document: Test1 Customer College/Institution Name: Have You Completed this Degree/Course:
 Mode of Study: Distance Learning Major Subject: Sociology Period Of Study From:
 Education (Degree Certificate)

Employment

Issuing Authority Name: AB HEALTH CENTRE Issuing Authority Address: Chennai, Tamil Nadu 600040 Issuing Authority City: CHENNAI
 Issuing Authority State: Tamilnadu Issuing Authority Country: India Last Profile/Designation: Therapist
 Applicant's Name as per Document: Test1 Customer Employee Code: Department:
 Nature of Employment: Employment Period (From Date): 25/09/2013 Employment Period (Till Date): 24/09/2013
 Reason for Issuing: Performance: Good/standing
 Employment (Experience Letter)

Professional License

Issuing Authority Name: ACADEMIC COUNCIL OF OCCUPATIONAL THERAPY Issuing Authority Address: Kochi, Kerala, India Issuing Authority City: KOCHI
 Issuing Authority State: Kerala Issuing Authority Country: India License Awarded: y
 Applicant's Name as per Document: Test1 Customer License Type: Part time License Status:
 Registration/License Number / ID: 123m License Confirmed Date: 04/09/2008 Valid From: 04/09/2008
 Health License (Membership Certificate)

Database

Name as per Passport: Test1 Customer Date of Birth: 01/09/1974 Passport Number: A12345
 Database (Passport Copy)

Certificate of Good Standing

Issuing Authority Name: ACADEMIC COUNCIL OF OCCUPATIONAL THERAPY Issuing Authority Address: Kochi, Kerala, India Issuing Authority Country: India
 Applicant's Name As Per Document: Test License Type: Part time License Status: Expired
 License Number: 123
 Certificate (Certificate of Good Standing)

Letter Of Authorization

LOA.pdf

Step 11 Payment

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





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- You can proceed to conclude your payment by clicking the 'Submit Application' button
- By clicking the 'Submit Application' button, you will be redirected to the payment gateway





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Step 12 Tax Invoice

- Once you have completed your payment, the system will automatically populate a printable tax invoice and will forward your application to initiate the Primary Source Verification process

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



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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:




- 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**



Step 13 Track your case status

- To track the status of your application, click on the 'Check Your Status' button and you will be redirected to the page shown below
- To review the details entered in your application, click on 'Case ID'
- Once your final DataFlow Group report is completed, you can download a copy of your report

Application Submitted List											
Action	Case Reference Number	Client Reference Number	Client Name	Category	Payment Status	Package Amount	Case Submit Date	Expected Closure Date	Status	Report	Delete
	TC99-1707-051368	TC99-1707-051368	Test Customer	Acupuncture Practitioner	Received	KWD 500	28/07/2017	NA	Your case is completed and the final report has been submitted to the regulator you have applied to.	Pending	
	D002-1902-355642	D002-1902-355642	DHAMAN	Regular Service	Pending	KWD 74.70	NA	NA	Your case has been started.	Pending	