## Extenuating Circumstances and Refund Application Form

Please read the Extenuating Circumstances regulations before completing this form. You will need to complete the entire form. You should submit required documents enclosed with this form to [ExamConfidentialEnquiries@RCOG.ORG.UK](mailto:ExamConfidentialEnquiries@RCOG.ORG.UK) as soon as possible after the circumstance or no later than five working days after the examination. Please keep a copy for your own records.

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| **Part 1 Candidate details** | | | | | | | | |
| First Name |  | | | Surname | |  | | |
| RCOG Number |  | | | Candidate Exam Number | |  | | |
| Contact Email |  | | | Contact telephone number | |  | | |
| **Part 2: EC details** | | | | | | | | |
| Exam (e.g. Part 1, 2, 3 or DRCOG) | | |  | | | | | |
| Date of exam | | |  | | | | | |
| Exam fee claimed to be refunded | | |  | | | | | |
| Nature of the extenuating circumstance (*Please explain what has happened and how it has affected your examination attendance*) | | | | | | | | |
|  | | | | | | | | |
| Signature of applicant | |  | | | | | Date |  |
| **Part 3: Supporting evidence** | | | | | | | | |
| Please clearly list the name and purpose of the documents you enclosed. | | | | | | | | |
| Document number | | Name of the document | | | Purpose of the document | | | |
| Document 1 | |  | | |  | | | |
| Document 2 | |  | | |  | | | |
| Document 3 | |  | | |  | | | |