

Application for special consideration



Please read the Special Consideration for an Examination Assessment policy available on the RACS website: <https://www.surgeons.org/Examinations/examination-policies-and-forms> before applying.

Applications must be submitted via email to examinations@surgeons.org with the following subject line: RACS ID – Full name – MM/YY Exam, Special Consideration Request (e.g. “123456, Sam Smith, 05/20 FEX Special Consideration Request”) before the examination event.

An application relating to an incident which occurred during the examination must be brought to the attention of the invigilator, examiner or RACS staff member at the time of the incident having occurred. Paper forms are available at each event. Applications with supporting documents must be submitted in line with the Special Consideration for an Examination Assessment Policy.

Applications submitted without the required supporting documentation will not be considered

Personal details:

RACS ID	First Name	Surname
<input type="text"/>	<input type="text"/>	<input type="text"/>
Email		
<input type="text"/>		
Address		Mobile
<input type="text"/>		<input type="text"/>
State	Postal code	<input type="checkbox"/> Australia <input type="checkbox"/> New Zealand
<input type="text"/>	<input type="text"/>	

Examination details:

Please select the examination your application relates to:

<input type="checkbox"/>	Generic Surgical Sciences Examination (GSSE)	
<input type="checkbox"/>	Clinical Examination	
<input type="checkbox"/>	Specialty Surgical Sciences Exam (SSE)	<input type="text"/>
<input type="checkbox"/>	FEX Written component	<input type="text"/>
<input type="checkbox"/>	FEX Clinical/Viva component	<input type="text"/>
Date	<input type="text"/>	Venue <input type="text"/>

Supporting documentation:

Medical Certificate **Note:** The medical practitioner supplying the certificate must not be a relative or family friend.

Incident (during exam)

Note: The invigilator, examiner or RACS Staff member will complete an incident report when an incident is reported during the exam.

Other

Note: Statutory declaration, or any other such document or evidence to support a request.

Reason for applying for special consideration:

Declaration:

- I certify that the information I have provided in and with this application is correct and complete.
- I have read the RACS Special Consideration for an Examination Assessment policy.
- I authorise RACS to contact professional authorities and any party named in support of my application for special consideration for the purpose of verifying any information I have supplied.

Signature

Date

RACS Office Use

Date received

Comments

Verified

Determination

Granted

Rejected

Manager Signature