

WEST AFRICAN COLLEGE OF PHYSICIANS

APPLICATION FOR PRIMARY EXAMINATIONS DOCUMENTS INCLUDED CONTROL FORM

TO ALL CANDIDATES (This document serves as a check-list to guide in filling your application form on line)

NAME:..... FACULTY..... PRIMARY

Kindly tick below, all documents that you have uploaded onto the platform.

- Print, fill, sign and upload the certification page
- Indicate Preferred Exam Centre (**Accra.**), (**Banjul**) (**Enugu**), (**Freetown**), (**Ibadan**), (**Monrovia**) and (**Zaria**) (Pls. Note: Change of examination venue after submission of Application Form will not be entertained)
- Upload a copy of Full Registration with Medical and Dental Council of the country of practice (or Evidence of Payment) **NOT** Provisional or Practicing Registration receipts please!.
- Primary N125,500.00 Online payment
- Upload One recent passport size photograph
- Type address where courier will deliver your result letter (on platform page)
- Upload a Copy of MBBS certificate (Primary)
- Your Tel:..... E-mail..... Signature..... Date...**

Dr. Clement Ezechukwu, FWACP (Paed) (signed)

Secretary-General, WACP

NB:

1. College shall bear no responsibilities for payment made into a wrong account other than College online payment. **And no refund for non attendance of examination**
2. Closing date for submission of application form is **Friday 29th June 2018 for October, 2018 Examinations**. Late submission attracts a fine of N76,000.00 for one week and N152,000.00 thereafter for the second week
3. Examination Office email is **cexaminations@yahoo.com**
4. Kindly note that once disqualified for non compliance after vetting, candidate is advised to re-apply for the next examination in **APRIL 2019**
5. No complaint shall be entertained in the examination hall
6. **Deferment of examinations after application is no longer acceptable.**
- 7.. Candidates for Accra centre to pay through Western Union or Moneygram Transfer and call Mr. Okletey on +233275091659 or Mr. Vincent on +233246153624