







Joint Surgical Colleges Fellowship Examination

Reasonable Adjustment Submission Form

This form should be completed by any candidate seeking a reasonable adjustment (special arrangement) in the JSCFE examination on the grounds of a disability, whether temporary or permanent.

Name of candidate	
Email Address	
GMC/IMC number (if applicable)	
Nature of disability	
would be appropriate for your assessmen documentary evidence (e.g. a medical disa	rou wish the JCIE to take into account in deciding what reasonable adjustment t. Please explain how your ability to perform the assessment is affected. Any bility certificate) should be submitted with this form. For dyslexic candidates a per required. Please refer to the Reasonable Adjustments Policy for the reports
	for previous assessments hat have been made for you during training, and any reasonable adjustments u have taken in the past, stating in each case the organisation that administered
Please outline any special arrangements t that have been granted for assessments yo	hat have been made for you during training, and any reasonable adjustments
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Joint Surgical Colleges Fellowship Examination Policy No. OP10 v1.0 Date of last review: July 2017