

## Joint Surgical Colleges Fellowship Examination

### Mitigating Circumstances Submission Form

<b>Full Name of Candidate</b>	
<b>Email Address</b>	
<b>GMC/IMC Number (if applicable)</b>	
<b>Date &amp; time reported to Relevant authority/Board Chair</b>	
<b>Date of Examination</b>	
<b>Examination Component: Section 1 / Section 2</b>	
<b>Surgical Specialty</b>	
<b>Detail of Mitigating Circumstances:</b>	
Please email this form to: <a href="mailto:enquiries@jscfe.co.uk">enquiries@jscfe.co.uk</a> and await formal acknowledgement	