**Request for remark of MRCPsych Exams**



**Prior to completing this form, please ensure you have read the**

**[Eligibility Criteria and Regulations for MRCPsych Written Papers and](http://rcpsych.ac.uk/pdf/MRCPsych%20Exams%20Eligibility%20Criteria%20and%20Regulations%20160212.pdf)**

**[Clinical Assessment of Skills and Competencies (CASC)](http://rcpsych.ac.uk/pdf/MRCPsych%20Exams%20Eligibility%20Criteria%20and%20Regulations%20160212.pdf)**

Candidates should complete this form and send with a cheque for £130 made payable to 'The Royal College of Psychiatrists' **no later than 14 days after the publication of the results.**

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| **Candidate Number** |  |
| **GMC Number (if GMC registered)** |  |

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| **Your Details** | | | |
| **Surname** |  | | |
| **Forename** |  | | |
| **Email Address** |  | | |
|  | | | |
| **Which Written Paper are you requesting to be re-marked?**  Paper A (i)  Paper A (ii)  Paper A  Paper B  CASC  **Date of the examination** | | | |
| **Enclosed:**  **Cheque for £130 made payable to “The Royal College of Psychiatrists”**  Yes | | | |
| **Signature** |  | **Date** |  |
| **Please print, sign and return by post to:**  Head of Examinations Operations  Examinations Unit  Royal College of Psychiatrists  21 Prescot Street  London E1 8BB | | | |