

Final body: see note 2

Medical Council of the United Kingdom (GMC)?*

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Date obtained ____ / ____ / ____ / **GMC NUMBER:**

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OR

2. Are you currently registered with the Nursing and Midwifery Council of the United Kingdom (NMC)?*
YES / NO (please circle)

Date obtained ____ / ____ / ____ / **NMC NUMBER:**

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* If not registered with either the GMC or NMC . please refer to Notes

SECTION 3 – DFCASA Option: see note 3

I wish to take the following option:

- DFCASA
- DFCASA(a) (adults only)
- DFCASA(c) (children only)

SECTION 4 – DFCASA (Part II) Case Portfolio Assessment Agreement

_____ [FULL NAME IN BLOCK CAPITALS]

I confirm that the information given on this form is true, complete and accurate and no information requested or other material information has been omitted. I have read and understood the SAL Guide to the Diploma incorporating the Regulations and Syllabus and I understand that my entrance to the examination may be forfeited if any information or documentation requested is not correct or omitted.

Data protection: I consent to the information in this form being held on the Society's database and to my name, if the Diploma is awarded, being disclosed in any enquiry concerning diplomates.

I have submitted the following with my signed application form, prior to the closing date (please tick where applicable):

- Current case portfolio marking fee (**OR** please tick here if you have paid via Pay Pal™)
- Case portfolio (2 hard copies plus an electronic copy sent via e-mail to diploma@apothecaries.org)

I accept that incomplete applications may lead to a delay in processing my application and may lead to it being returned.

I understand that if I withdraw or defer my application after the closing date I will forfeit a proportion of the application fee as per the Regulations and Syllabus (www.apothecaries.org).

I understand that faxed or e-mailed applications or photocopied signatures will not be accepted for reasons of confidentiality or security.

I agree to the above, if any of the above is not correct or is not fully met the Society of Apothecaries of London reserves the right to reject my application and I will not be permitted to re-apply until the next diet.

SIGNATURE _____

DATE ____ / ____ / ____ /
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be returned.

You are required to complete the case portfolio application form if you are applying to have your case portfolio marked for the FIRST time. For re-submission please use the re-entry form (available from diploma@apothecaries.org)

Your application must be received no later than 5.00pm on the closing date shown in the Administrative Guidance for Candidates.

APPLICATIONS RECEIVED AFTER THAT DATE WILL NOT BE ACCEPTED AND NO ALLOWANCE CAN BE MADE FOR POSTAL DELAYS.

SECTION 1: Personal details

1.1 Family/Last Name and Forename(s) Please give your full name EXACTLY as it appears on the Diploma of your PRIMARY MEDICAL OR NURSING QUALIFICATION unless you have since changed your name by marriage or Deed Poll. Any initial, abbreviation, change in the order, number and spelling of names will require that you produce original documentary evidence to explain the discrepancy.

1.2 Correspondence address The address you provide will be used for all correspondence including the address to which your admission document will be sent. If using a hospital address, please also give the relevant Department. If your address changes, please notify the Examinations Office in writing as soon as possible.

SECTION 2: Registration with professional body

Please confirm whether you are currently registered with either the General Medical Council of the United Kingdom (GMC) or the Nursing and Midwifery Council of the United Kingdom (NMC).

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SECTION 3: DFCASA Option

Please indicate whether you wish to take the DFCASA, the DFCASA(a) or the DFCASA(c). **Please refer to the Guide to the Diploma for further information on the number of cases that must be submitted for each option and for guidance on the composition of your portfolio.**

CASE PORTFOLIO MARKING FEES

Fees are published in the **Administrative Guidance for Candidates** (available online at www.apothecaries.org) and are revised annually. Fees are likely to increase from the first examination of each year.

For payment methods please refer to the **Administrative Guidance for Candidates**.

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