



WEST AFRICAN COLLEGE OF PHYSICIANS

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REQUIREMENTS FOR APPLICATION FOR EXEMPTION FROM PRIMARY FELLOWSHIP EXAMINATION (FOR ALL FACULTIES)

1. Upload online Exemption Application letter, addressed to the Secretary-General. (including: contact address, phone number and e-mail address, **P.O Box/P.M.B not acceptable**)
2. Fill and Upload online Physician in Training form.
3. Photocopy of passed primary examination from sister Colleges.
4. Photocopy of certificate of full registration with the Medical & Dental Council of the Resident Country of Applicant.
5. Photocopy of current annual practicing license/receipt.
6. Photocopy of NYSC discharge certificate/certificate of exemption (for Nigerians)
7. Photocopy of MBBS degree certificate.
8. Evidence of change of name (where applicable).
9. Evidence of Commencement of Training (**that is: Certificate of Postings**) till date.

Pay online via College Website. (Please Payment to the bank or transfer is **NO LONGER acceptable**).

NOTE: www.wacpcoam.org and Click on Login