WEST AFRICAN COLLEGE OF SURGEON
4, Harvey Road, Yaba, Lagos, Nigeria
09062759914

REQUIREMENTS FOR APPLICATION FOR EXEMPTION FROM PRIMARY FELLOWSHIP EXAMINATION

1. Application letter addressed to the Secretary General
   (with contact address, phone number and e-mail address)
2. Evidence of having passed Primary Examination from equivalent Colleges
   (Success Letter)
3. Certificate of Full Registration with the Medical & Dental Council of the Resident Country of Applicant.
5. Photocopy of NYSC Discharge Certificate/Certificate of Exemption (For Nigerians).
6. Evidence of change of name published in the News Paper. (where applicable)
7. Photocopy of MBBS Degree Certificate
8. Surgeon-in-Training Form (to be downloaded from www.wacscoac.org)
9. Evidence of payment for Surgeon-in-Training Form – $200 (Two hundred dollars) or its equivalent of N74,000 (Seventy Four thousand naira).
10. Exemption fee - $750 (Seven hundred and fifty Dollars) or its equivalent of N277, 500 :00 (two hundred and seventy Seven thousand, five hundred naira only).

Payment Details
Bank - UBA, LUTH Branch
Account No - 1014229919
Account Name - West African College of Surgeons

Processing of Exemption from the West African College of Surgeons Primary Examination, must be completed one (1) year before the intended date of sitting the Part I WACS Fellowship Examination.

Surgeon-In-Training form and original teller of payment must be attached to your Application for Exemption.