



NZREX5: Application to withdraw from an examination

NZREX Clinical

PLEASE READ THE FOLLOWING. IT CONTAINS IMPORTANT INFORMATION.

- Complete this form if you wish to withdraw from an NZREX Clinical examination you have been scheduled to sit.

SECTION 1 – Personal identification details

| | |
|-------------|--|
| Family name | |
| Given names | |
| Signature | |

SECTION 2 – Current examination details

| | |
|-------------------------------|--|
| Date of scheduled examination | |
|-------------------------------|--|

SECTION 3 – Withdrawal from an examination - Council's policy on withdrawing from NZREX Clinical applies. The policy can be found on Council's website: <https://www.mcnz.org.nz/assets/Policies/bf909d7d53/Policy-on-refunds-for-candidates-withdrawing-from-New-Zealand-registration-examination.pdf>

Please provide your reason(s) for withdrawing from NZREX Clinical:

SECTION 4 – Bank account details

Please provide your bank account details. Council will reimburse your application fee less \$150 if your withdrawal is received prior to the closing date of the examination. Council will reimburse your application fee less 20 percent if your withdrawal is received at least 20 working days before the day of the examination.

You will not be entitled to a refund if your withdrawal is received within 19 working days of the examination, unless Council considers that it is an exceptional circumstance. You will need to supply documented evidence about these circumstances.

Please note if you paid for NZREX Clinical by credit card, the fee will be refunded into that account.

Bank name:

Bank address:

Account number:

Routing number:

You will receive written confirmation of your withdrawal once it has been processed.