



THE COLLEGE OF OPTOMETRISTS

Application form – Therapeutics Common Final Assessment

Please complete and return this form, together with the fee, to the Education Co-ordinator, College of Optometrists, 42 Craven Street, London WC2N 5NG. We recommend that you keep a copy of the form and read *Guidance for Candidates*.

Details of the dates for the CFA (together with the Schedule of Fees) can be found on the College website: www.college-optometrists.org.

In signing this form you agree that we may store the information you provide in connection with your application, share it with the General Optical Council where appropriate and use it to:

- Process and maintain your enrolment;
- Compile statistics and undertake research;
- Keep you informed about the College of Optometrists and the Common Final Assessment.

Personal Details

Surname:
First names:
Title:
Date of birth:
Address (to which correspondence, including results will be sent):
Postcode:
Email (to which correspondence, but not results, may be sent):
Preferred contact telephone number: (please indicate home, work or mobile)
GOC number:
College membership number (if known):
Gender Male <input type="checkbox"/> Female <input type="checkbox"/>

Theoretical training Institute: Aston
 City University, London
 Glasgow Caledonian University

Ethnic group (*This information is for statistical purposes only. Complete this section only if you wish to do so.*)

- A White**
 British
 Irish
 Any other White background _____
- B Mixed**
 White and Black Caribbean
 White and Black African
 White and Asian
 Any other Mixed background _____
- C Asian or Asian British**
 Indian
 Pakistani
 Bangladeshi
 Any other Asian background _____
- D Black or Black British**
 Caribbean
 African
 Any other Black background _____
- E Chinese or other ethnic group**
 Chinese
 Any other _____

Which Assessment are you applying for?

The dates of the assessments can be found on our website.

Please tick box (✓):

Additional Supply

First attempt Resit Date: _____

Independent Prescribing

First attempt Resit Date: _____

Please tick to confirm your work background:

Independent Multiple Hospital

If you have a disability

If you have a disability, we may be able to make reasonable adjustments to the examination. We will not make adjustments to the standard of the examination but may be able to make adjustments to the arrangements if you have physical, mental or sensory impairments covered by the Disability Discrimination Act 1995. For further information please refer to the Equality and Human Rights Commission website: <http://www.equalityhumanrights.com>

If you would like us to consider making reasonable adjustments, please let us know as soon as possible either by email jackie.martin@college-optometrists.org or by writing to the Education Manager at The College of Optometrists, 42 Craven Street, London WC2N 5NG.

If you delay in telling us we may not be able to make the reasonable adjustments in time for the date of your examination. If you would find it easier we can provide a form for you to complete. If you think you will have difficulty completing the form, please contact the College.

Temporary circumstances that might affect your performance in the examinations, such as illness, pregnancy or bereavement, will not be taken into account. This is because examinations are held frequently and we would expect you to cancel and book a later place. Under these circumstances, you may be entitled to a refund.

Please state if there is any cultural or religious reason you may not be able to sit exams on certain dates.

I declare that the above statements are correct. I undertake to comply with the Assessment Regulations of the College of Optometrists.

The College of Optometrists would like to use your email and postal addresses to send you general College news and information on the College's products and services. The College administers DOCET on behalf of the Department of Health, and it will therefore also use your email and postal addresses to send you DOCET news and information. You may opt out of receiving College or DOCET communications at any time by contacting the College. The College also shares membership and qualification information with the General Optical Council when necessary. The College uses personal information for statistical and research purposes and, when not anonymised, we seek consent.

Signed

Date

Fees

Fees must be paid in full before your application will be accepted. Details of the fees can be found in the *Schedule of Fees* on our website.

I have enclosed a cheque made payable to *College of Optometrists*

I have paid by credit card over the phone