

# Exam incident report



**This incident report relates to:** (please tick the exam this incident applies to)

Applied Knowledge Test (AKT)  Key Feature Problem (KFP)

Date of exam Time of incident State City Venue

## Section A: Candidate's description of events (if applicable)

Submit this report to your venue invigilator or email to [examinations@racgp.org.au](mailto:examinations@racgp.org.au) **within two business days of the exam**.

Please refer to the [Assessments and Examinations Candidate Handbook](#) for further information.

Name RACGP ID Signature Date

**Important note to staff:** If Section A is completed by a candidate, Sections B MUST be completed by the relevant invigilator.

## Section B: RACGP description of events

Name Staff role Signature Date

Duration of incident (if applicable)

**Was anything done to remedy the incident or to compensate for it at the time?**      No      Yes, please explain

**Did the candidate appear to be affected by the incident?**      No      Yes, please explain

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## For Office Use Only

### For completion by the RACGP staff member collecting and submitting the incident form

Checklist for submission to RACGP Fellowship Exams Team:

Are all sections and report details complete?

If Section A has been completed by the candidate, can you read and understand the candidate's handwriting?  
Please seek further clarification if necessary.

If Section A has been completed by the candidate, have you sought information from the relevant invigilators?

Has a photo/scan of this report been sent to HQ?

Staff role

Name

Signature

Date

Signature

Date