

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

|   |  |
|---|--|
| <input type="checkbox"/> Applied Knowledge Test (AKT) | <input type="checkbox"/> 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

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