

**SRI LANKA MEDICAL COUNCIL**

**APPLICATION FOR RE-CORRECTION OF ERPM PARTS A & D ANSWER PAPERS**

**December 2017(Rescheduled from May 2017)**

FULL NAME: .....

ADDRESS: .....

INDEX NO : .....

NATIONAL IDENTITY CARD NO : .....

SUBJECTS FOR RE-CORRECTION OF ANSWER PAPERS:

1. .... 2. ....

3. .... 4. ....

5. .... 6. ....

.....  
Signature

.....  
Date

**See reverse of this application for instructions**

## **INSTRUCTIONS**

### **PLEASE FORWARD THE FOLLOWING:**

1. The application duly completed and signed only by the applicant.
2. The attached bank paying –in-slip duly certified by the bank.

Payment should be made to the Sri Lanka Medical Council A/C No. 003010153598 at any branch of the Hatton National Bank in the Island at the rate of Rs. 1,000/= for each subject.

**PAYMENT BY CASH ONLY**

**SRI LANKA MEDICAL COUNCIL**  
31, Norris Canal Road, Colombo 10.

Hatton National Bank, Branch: .....

Please Credit to A/C No. 003010153598, Sri Lanka Medical Council,  
Hatton National Bank, Darley Road Branch, Colombo 10.

Name of Applicant (IN BLOCK LETTERS)

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.....

Address:

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.....

On account of the ERPM (PART A & D- WRITTEN PAPERS) Re-correction

PAPER	RE-CORRECTION FEE	RUPEES
1.	MEDICINE AND PSYCHIATRY	1000/-
2.	PAEDIATRICS AND PSYCHIATRY	1000/-
3.	SURGERY	1000/-
4.	OBSTETRICS AND GYNAECOLOGY	1000/-
5.	COMMUNITY MEDICINE	1000/-
6.	FORENSIC MEDICINE	1000/-
<b>OPTION 2</b>	<b>COMMUNITY MEDICINE</b>	<b>1000/-</b>
	<b>FORENSIC MEDICINE</b>	<b>1000/-</b>
	TOTAL	

.....  
Signature of Applicant

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Received the above amount for credit to Sri Lanka Medical Council, A/C No.  
003010153598 Hatton National Bank, Darley Road Branch, Colombo 10.

**Hatton National Bank Seal**