

Request to Withdraw from Examination(s)

Level 6 – Diploma in Ophthalmic Dispensing



Section 1 - Personal Details (To be completed in BLOCK CAPITALS)

ABDO Membership Number: **Title:** Mr Mrs Miss Ms

Surname: _____ **Forename(s):** _____

Address: _____

Post Code: _____

Section 2 – Examination

This form must be completed if you are wishing to withdraw from any of the following examinations. (Please tick only the examination(s) you wish to withdraw from – if practical resits, specify which sections of the relevant unit):

2015 Syllabus

PQE

- Units 1a&1b – Theory of General Optics/Theory of Ophthalmic Lenses
 Unit 2 – Ophthalmic Dispensing Practice (Sections _____)

FQE

- Units 3&4 – Theory of Ophthalmic Dispensing/Advance Theory in Ophthalmic Lenses
 Unit 5 – Abnormal Ocular Conditions & Standards of Practice
 Unit 6 – Ocular Anatomy
 Unit 9 - The Assessment & Management of Refractive Errors
 Unit 10 – Low Vision in Ophthalmic Dispensing
 Unit 11 – The Basic Principles of Contact Lens Wear
 Unit 12 – Advanced Ophthalmic Dispensing Practice

2008 Syllabus

PQE

- Unit 3 – Ophthalmic Dispensing Practice (Sections _____)

FQE

- Units 4&5 – Theory of Ophthalmic Dispensing/Advance Theory in Ophthalmic Lenses
 Unit 6 – Professional Conduct in Ophthalmic Dispensing
 Unit 7 – Communications in Ophthalmic Dispensing
 Unit 8 – The Assessment & Management of Refractive Errors
 Unit 9 – Low Vision in Ophthalmic Dispensing
 Unit 10 – The Basic Principles of Contact Lens Wear
 Unit 11 – Advanced Ophthalmic Dispensing Practice (Sections _____)

Section 3 – Reason for Withdrawal

Please indicate below the reason for your withdrawal:

Please note: there is no automatic re-application for the examination(s) you are withdrawing from. You will need to re-apply using the Examination Entry Form available for the next session you wish to enter for.

Signed: _____

Date: / /

Withdrawal Information

- All requests to withdraw from any exam applied for must be made using this form.

- **Fees/Refund for Fee paying candidates only**

Fee paying candidates who wish to be considered for a refund should include a letter to the Head of Examinations and Registration outlining the reason for withdrawal. If withdrawal is related to a health issue, medical evidence must be provided.

Please note: an administration fee of £20.00 will be deducted from any refund granted. The remainder of the fee paid will be refunded in the form of a cheque, whether they were paid by cheque, credit/debit card or BACS payment.

Return the completed Withdrawal form to the following address:

**ABDO Examinations & Registration Department,
The Old Dairy, Godmersham Park,
Godmersham,
Canterbury
Kent CT4 7DT**