

Notice
Request for Recorrection of Answer Scripts
External Pharmacists' Examination

1. The Ceylon Medical College Council has approved a fee of Rs. 3000/= for recorrection of answer scripts.

2. Use the following form for applications, and do not write rambling stories

• Name of applicant: Surname:.....

Initials:.....

• Applicant's NIC No:

• Month/Year of examination:

• Index (exam) number:.....

• Applicant's Address, Email address & Contact No:

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• Closing Date: **17th September 2025.**

The fee should be paid at any people's Bank Branch to the credit of people's Bank Twonhall Branch A/C No 167-1-001-2-0020892. Please send the proof of payment (scanned copy of the SLIP/online transfer receipt) to the email, cmcc.ext@gmail.com on or before September 17th, 2025

***Please mention your index number on the bank slip or the transfer description of the online banking**