



Student attestation form

This form is to be completed for an INTERNATIONAL MEDICAL STUDENT, US MEDICAL STUDENT, or US SCHOOL OF OSTEOPATHIC MEDICINE STUDENT applying to the Medical Council of Canada Qualifying Examination (MCCQE) Part I or to the National Assessment Collaboration (NAC) Examination.

- This form must be completed by the DEAN or REGISTRAR.
- The dean or registrar must confirm that the student will complete all requirements for the medical degree.

Action required:

· The medical school:

Please provide a copy of the completed form to the candidate. Do not submit the form directly to the MCC.

The candidate:

Ensure that you have the form completed before applying to an MCC examination. You will be required to upload the completed form when submitting your exam application in physiciansapply.ca.

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PRINT CLEARLY OR TYPE

STUDENT'S GIVEN NAME(S)	SURNAME	
is in good standing and is fully expected to gradu	uate and successfully complete <u>all</u> requirements to receive	
their final medical diploma on the date(s) indicate	ed below at	
	in	
NAME OF UNIVERSITY	CITY / COUNTRY	
	ments for the medical degree is:	
The expected date of awarding of the diploma	İS:	
Certified by:		
Certified by:SIGNATURE OF DEAN OR REGISTRAR	NAME OF DEAN OR REGISTRAR (PRINT)	
TITLE		
Date:/_/		