



香港婦產科學院  
**THE HONG KONG COLLEGE OF  
OBSTETRICIANS AND GYNAECOLOGISTS**  
*A Foundation College of Hong Kong Academy of Medicine*  
(Incorporated in Hong Kong with limited liability)



**Notice to those candidates wishing to sit the Examination of the Diploma in  
Community Gynaecology to be held by the Hong Kong College of Obstetricians  
and Gynaecologists on 26<sup>th</sup> July 2025**

All candidates who wish to take the Examination of the Diploma in Community Gynaecology of the HKCOG should complete the attached form and send to:-

Professor Raymond LI  
Chairman  
Working Group on Community Gynaecology  
The Hong Kong College of Obstetricians & Gynaecologists  
Room 805, Hong Kong Academy of Medicine Jockey Club Building  
99 Wong Chuk Hang Road, Aberdeen, Hong Kong

**before 5:00 pm on 30<sup>th</sup> April 2025**

The application form must be accompanied by a sum of Hong Kong Dollars \$5,000 (made payable to “The Hong Kong College of Obstetricians and Gynaecologists”) as the examination fee.

Logbooks must be submitted together with the application form.

Please note that the examination fee paid is non-refundable and not transferable to a subsequent examination. Late submission would not be entertained.

Professor Raymond LI

Chairman

Working Group on Community Gynaecology



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**APPLICATION TO ENTER THE EXAMINATION OF  
DIPLOMA IN COMMUNITY GYNAECOLOGY OF HKCOG**

**SATURDAY 26<sup>th</sup> July 2025**

**Name in English:** \_\_\_\_\_  
*(Please write down full name and underline surname)*

**Name in Chinese:** \_\_\_\_\_  
*(if applicable)*

**I/D No.** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_ **Sex:** Male / Female  
*(dd/mm/yy)*

**Training Unit:** \_\_\_\_\_ **Contact Fax No.** \_\_\_\_\_

**Contact Tel. No.** \_\_\_\_\_ **Pager:** \_\_\_\_\_

**Mobile:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Correspondence Address:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I acknowledge the fee is non-refundable and not transferable to a subsequent examination.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Enclosure:-** **Cheque No:** \_\_\_\_\_ **Bank:** \_\_\_\_\_