



## TITLE:

**Exit Exam Sponsorship  
for Senior Residents**

## EFFECTIVE DATE:

**01 October 2015**

## REVISION DATE:

**02 October 2024**

PAGES: 7

## PROCESS OWNER:

**Healthcare Manpower Division**

## APPROVAL:

**Executive Director,  
Healthcare Manpower Division**

**OBJECTIVE**

1. This policy provides guidelines on the application for exit exam sponsorship for Senior Residents.

**POLICY**

2. This policy sets the application and approval procedure for the sponsorship, claimable items and reimbursement of expense claims.
3. All MOHH-employed Senior Residents are eligible to apply for this sponsorship.
4. The Sponsorship provided is intended as a form of financial assistance to Senior Residents and it may not cover all expenses that arise. Senior Residents may expect to incur some expenses on their own.

**APPLICATION CRITERIA**

5. Senior Residents must be in active service with MOHH during the period of the exam.
6. Senior Residents are eligible to apply for sponsorship for one exit exam and the exam must be approved by the Joint Committee of Specialist Training (JCST) / Ministry of Health (MOH).

**APPLICATION PROCESS & APPROVAL**

7. Applicants are required to complete the 'Application for Exit Exams Sponsorship for Senior Residents' (Appendix 1).
8. Applications must be approved by the Programme Director.
9. Application forms should be submitted by email to [physician@mohh.com.sg](mailto:physician@mohh.com.sg) at least 2 weeks from the date of the exams.
10. The outcome of the application will be notified via email.



## **LEAVE**

11. Applicants are advised to apply and obtain approval for leave of absence to attend the exam. At the discretion of the approver, leave type may include Training Leave, Annual Leave or Leave of Absence (mutually agreed by your leave approver). Please refer to the Employee Handbook for MOHH Staff Deployed to Public Healthcare for leave application guidelines.

## **SPONSORSHIP**

12. The sponsorship will provide for the exam fees and one preparatory course. The preparatory course must be taken with the exam in the same sitting. Sponsorship will not be provided for the preparatory course alone.
13. The sponsorship will not provide for supplementary / additional examination fees incurred as a result of failing to qualify for the intended sitting.
14. There will be no course leave, study leave or exam leave provided with this sponsorship.

## **TRAINING BOND**

15. There is no service bond associated with the sponsorship for local examinations.

## **REIMBURSEMENT**

16. Reimbursement claims for both the exam and preparatory course must be consolidated and submitted together via SuccessFactors (SF) within 3 months from the date of the exams.
17. For payments made in foreign currency, reimbursement will be based on the conversion rate provided in the credit card statement/bank draft. In the absence of the conversion rate, HRTD will use the receipt date to determine the conversion rate from the Monetary Authority of Singapore (MAS) Financial Database to calculate the claim amount.
18. Reimbursement will be credited via payroll.

## **ENQUIRY**

For enquiries, please contact:

The Secretariat for Exit Exam Sponsorship  
physician@mohh.com.sg  
DID: 6622-0987 / 6622-0979



## APPENDIX 1

**LIST OF POSTGRADUATE EXIT EXAMINATIONS**

Updated as of 2 October 2024. This list is not exhaustive and is subject to change.

<b>Discipline</b>	<b>Examination</b>
Anaesthesiology	Anaesthesiology Exit Examination (MCQ)
	Clinician Scientist Anaesthesiology Residency Exit Interview
	Master of Medicine (Anaesthesiology) Part C Examination
Cardiology	Cardiology Residency Exit Examination
Cardiothoracic Surgery	Joint Specialty Fellowship Examination in Cardiothoracic Surgery
Dermatology	Dermatology STI MCQ
	SCE Dermatology Exit Examination
	Dermatology Seamless Residency Exit Examination
Diagnostic Radiology	Diagnostic Radiology Exit Examination (MCQ)
	Diagnostic Radiology Residency Exit Interview
	Clinician Scientist Diagnostic Radiology Residency Exit Interview
Emergency Medicine	Emergency Medicine Exit Examination (MCQ)
	Emergency Medicine Residency Exit Exam Part A, Part B and Part C
	Clinical Scientist Emergency Medicine Residency Exit Interview
Endocrinology	Endocrinology Residency Exit Examination
	SCE Endocrinology Exit Examination
Gastroenterology	Gastroenterology Residency Exit Examination
	SCE Gastroenterology Exit Examination
General Surgery	General Surgery Exit Examination (MCQ)
	Joint Specialty Fellowship Examination in General Surgery
	Clinician Scientist General Surgery Residency Exit Interview
Geriatric Medicine	Geriatric Medicine Residency Exit Examination
	SCE Geriatric Medicine Exit Examination
Haematology	Haematology Residency Exit Examination
Hand Surgery	Hand Surgery Residency Exit Examination
Infectious Diseases	Infectious Diseases Residency Exit Examination
Internal Medicine	MRCP (UK) Acute Examination
	Advanced Internal Medicine Exit Examination
	SCE Advanced Internal Medicine Exit Examination



<b>Discipline</b>	<b>Examination</b>
Medical Oncology	SCE Medical Oncology Exit Examination
	Medical Oncology Residency Exit Examination
Neurology	SCE Neurology Exit Examination
	Neurology Residency Exit Examination
Neurosurgery	Joint Specialty Fellowship Examination in Neurosurgery
Nuclear Medicine	Nuclear Medicine Residency Exit Examination
Obstetrics & Gynaecology	Obstetrics & Gynaecology Exit Examination (Part 1)
	Obstetrics & Gynaecology Residency Exit Examination
	Clinician Scientist Obstetrics & Gynaecology Exit Interview
Ophthalmology	Ophthalmology Exit Examination (MCQ)
	Ophthalmology Residency Exit Examination
Orthopaedic Surgery	Joint Specialty Fellowship Exam in Orthopaedic Surgery
	Clinician Scientist Orthopaedic Surgery Residency Exit Interview
Otorhinolaryngology	Otorhinolaryngology Exit Examination (MCQ)
	Otorhinolaryngology Residency Exit Examination
Paediatric Medicine	Paediatric Medicine Exit Examination (MCQ)
	Paediatric Medicine Residency Exit Examination
	Paediatric Medicine Residency Exit Interview
Pathology (Chemical Pathology, Forensic Pathology, Microbiology)	FRCPA Part 1 & 2 or FRCPATH Part 1 & 2
Pathology (Histopathology)/ Anatomical pathology	Pathology Intermediate Examination (MCQ)
	Anatomical Pathology Part II Examination
	FRCPATH Part II (Fellowship of the Royal College of Pathologists - UK) - Histopathology Examination
Plastic Surgery	Plastic Surgery Residency Exit Examination
	Clinical Scientist Plastic Surgery Residency Exit Interview
Preventive Medicine	Preventive Medicine Residency Exit Examination Part 1
	Preventive Medicine Residency Exit Examination Part 2
Psychiatry	Psychiatry Exit Examination (MCQ)
	Psychiatry Residency Exit Examination
Rehabilitation Medicine	Rehabilitation Medicine Residency Exit Examination
Renal Medicine	Renal Medicine Exit Examination
	European Specialty Examination in Nephrology (ESENeph)



<b>Discipline</b>	<b>Examination</b>
Respiratory Medicine	Respiratory Medicine Exit Examination SCE Respiratory Medicine Exit Examination
Rheumatology	Rheumatology Residency Exit Examination
Urology	Urology Residency Exit Examination
Renal Medicine	Renal Medicine Exit Examination
	European Specialty Examination in Nephrology (ESENeph)
Respiratory Medicine	Respiratory Medicine Exit Examination
	SCE Respiratory Medicine Exit Examination
Rheumatology	Rheumatology Residency Exit Examination
Urology	Urology Residency Exit Examination



APPENDIX 2

**APPLICATION FOR EXIT EXAM SPONSORSHIP  
FOR SENIOR RESIDENTS**

I) To be completed by Applicant
Name : _____ MCR No.: _____
Email : _____ Contact No. _____
Address: _____
Residency (Speciality : _____ )
Current Posting Hospital/Dept: _____
Is the examination your first attempt? <input type="radio"/> Yes <input type="radio"/> No
Have you applied for this or a similar exam scholarship before? <input type="radio"/> Yes <input type="radio"/> No
<b><u>Details of Examination</u></b> <i>(Please attach examination &amp; Preparatory Course details with your application)</i>
Examination Title : _____
Organiser: _____
Preparatory Course Title : _____
Organiser: _____
Date of Preparatory Course : _____ Preparatory Course Fees: _____
Date of Examination : _____ Examination Fees: _____
I declare that the information which I have provided in this application is true and that I have not sought other reimbursements or sponsorships for the above examination. I understand that breach of regulations or inaccurate information in the application will result in liability for severe punishment



and approval of funding is conditional and subjected to the approval of the Director, Healthcare Manpower Division.

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Applicant's Signature -----  
Date

**II) To be completed by Programme Director**

Supported  Please specify relevance/benefits to Applicant's job functions

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Not recommended

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Name/Designation/Signature -----  
Date

**III) To be completed by Approving Personnel**

Approved

Not Approved  Reasons for not approving :

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Director, Healthcare Manpower Division, MOHH  
Signature & Date

Instructions :

Application forms should be forwarded by email to [physician@mohh.com.sg](mailto:physician@mohh.com.sg)