

PEOPLECERT Auditor Application Form

1. Applicant's Details				
<i>Please complete your details exactly as they appear in your passport/identity card</i>				
Last Name				
Name				
Father's Name				
Date of birth		Gender	Male <input type="checkbox"/>	Female <input type="checkbox"/>
Home address				
Street		Number		Postcode
City		State		
Mobile phone		e-Mail		
*Land line		* Fax		
Business Details				
Organization				
Street		Number		Postcode
City		State		
Land line		e-Mail		

*Optional field

Important Notes for Applicant

- This application refers to the Applicant's eligibility for certification as an Auditor in one Management System standard only. If you would like to apply for Auditor certifications in more than one Management System standards, you need to submit one application for each standard separately.
- In case training in ISO 19011 (Auditor) has not been completed before the application, it must be documented before certification is awarded.
- Applicants for the Auditor / Lead Auditor grades must also take a Personal Attribute Assessment test.

Grade of Certification for which you are applying

- Provisional Auditor
- Internal Auditor
- Auditor
- Lead Auditor

This Application refers to Certification for one of the following ISO Standards (*please select only one)

- ISO 9001
- ISO 14001
- ISO 20000
- ISO 22000
- ISO 27000

2. Qualification Evidence			
2.1 Education			
Year	Award	Title of studies	Educational Institute

2.2 Summary of Evidence of Auditing Related Experience				
From (Month/Year)	To (Month/Year)	Role in Auditing team (Lead Auditor, Auditor, member,etc)	Organization Name	Industry

DECLARATION

I apply for certification and I confirm that I understand and agree to the following conditions:

1. I read and I accept the terms and the requirements of PEOPLECERT Candidate Certification Guide.
2. I shall observe and abide by the PEOPLECERT Code of Conduct for Auditors.
3. The details which are given in my application form can be published in the PEOPLECERT registry.
4. I shall declare any information that may reasonably be considered to adversely affect my ability to perform my obligations as certified Auditor effectively.

I confirm that the information contained in this application is correct to the best of my knowledge and belief. I understand and accept that, if I provide incorrect information or withhold relevant, requested information, I am likely to be excluded or removed from the PEOPLECERT Registry. I also understand that once certified, I am obliged to notify PEOPLECERT without delay of any changes to my circumstances which, if declared when I made my first application, might have caused the PEOPLECERT to exclude me from the Registry.

Date	
Signature	

Check list Minimum Application Requirements

Attached documentation

- | | | |
|---|---|--------------------------|
| 1 | Copy of detailed CV | <input type="checkbox"/> |
| 2 | Copies of academic certificates | <input type="checkbox"/> |
| 3 | Copies of training certificate in ISO 19011 | <input type="checkbox"/> |
| 4 | Copies of Professional certificate in the management system standard applying for | <input type="checkbox"/> |
| 5 | Audit Log | <input type="checkbox"/> |
| 6 | Application review fee | <input type="checkbox"/> |
- Payment reference number _____