International Association for Assessment Board Inc. (IAAB)

Application form for GLA assessments program

IAAB GLA 02: 2024 Issue 1

0. Introduction:

Below Application form for GLA assessments scopes:

- IAAB 1 – Management systems
- IAAB 2 – Personal certification
- IAAB 3 – Inspection body
- IAAB 4 – Validation and verification
- IAAB 5 – Product verification
- IAAB 6 – Calibration and testing

1.0 Application forms

Accreditation Body shall ensure that they have read all the appropriate standards, Guidance and regulations relevant to your application. Incomplete applications may delay in processing.

Send email to complete application at:

Email: info@IAAB.US

1.1. General

IAAB will require access to your documented management system & accreditation Scheme during the review application form & onsite / online assessment process;

Any amendments made to the system during this time should be inform to IAAB;

All information given to IAAB for the purposes of this application will be treated in the strictest confidence;

1.2 Scope extension

Existing accreditation body may apply for an extension to scope ref. 3.5

Part 1: Organization's information:

1.1	**Name of Accreditation Body**	
1.2	**Address** Please enter the complete address	
	Invoicing address (if sperate) Please enter the address for invoice	
1.3	**Website**	
1.4	**Contact number**	
1.5	**Email id of the contact person**	
1.6	**Has the organization applied for GLA assessment previously?** if yes provide details	
1.7	**Singal Point of Contact Person**	
1.8	**Position in the organization**	
1.9	**Contact number**	
1.10	**Email id of the contact person**	
1.11	**What is the main activity of your accreditation body?**	
1.12	**Please state the legal status of the Accreditation body**	
1.13	**State your accreditation body registration number**	
1.14	**Is your accreditation body being part of a Govt. organization?** If yes specify the details	

Part 2: Staff information:

2.1	**Total number of employees**	
2.2	**Provide details of** (Applied GLA assessment program personal)	**General staff:** **Technical Staff members:** **Assessors:** **Technical Experts:** **Contract staff:**
2.3	**Accreditation Scheme Manager**	**Name:** **Qualification:** **Experience:**
2.4	**Quality Manager (or team or equivalent)**	**Name:** **Qualification:** **Experience:**

3.0 GLA Assessment scope

3.1	Applied GLA Assessment scope *(Write the IAAB category)*	
3.2	Have you demonstrated your accreditation Scheme before apply, if yes, share the details (may share sperate sheet)	
3.3	Required pre-GLA assessment visit	
3.4	Any other Accreditation / Approval(s) from Govt. or Regulatory Bodies, if any other	
3.5	Apply for GLA Scope Extension	

3. 6 Required Documentation	
Accreditation body Registration Document or undertaking or legal entity	Attachment-1
Declaration of Top Management Authority & Responsibility for applied GLA Assessment scope	Attachment-2
Manual in accordance ISO 17011 & IAAB 17011-1/2/3/4/5/6/7 as applicable	Attachment-3
Master List of Documents & Records	Attachment-4
Procedures, Quality instruction and Policies including technical documents, formats, checklists etc.	Attachment-5
Documented Evidence for Internal Audit and Management Review Meeting	Attachment-6
List of the personal involvement in Accreditation scheme	Attachment-7
List of the Assessors (full time, contract, experts)	Attachment-8
Support document for financing and liability of accreditation body	Attachment-9
Accreditation Body Mark Specimen & its Recognition Certificate	Attachment-10
Submit the reference of Applied GLA assessment program Fee	Attachment-11

Part 4: Other information:

Please provide the details of other current Accreditation / approvals held by your accreditation body.
Add more rows, if more than one approval

4.1	Approval details	Scope of Approval
	Name of approval: Name of approval Body: Location of approval body:	

Please provide the details of professional networks or associations that is relevant to the scheme applied.

4.2	Professional Network details	Scope of Approval
	Name of approval: Name of approval Body: Location of approval body:	

Part 5: Declaration

The Accreditation body applying for the GLS assessment is agreeing to comply with all applicable USA / International standards, IAAB requirements and to adapt to the changes to the requirements. We have read and understood the IAAB requirements.

I declare that I am authorized, on behalf of the accreditation body, to submit the application, and the information contain herein is correct and accurate.

Signature	
Name of the Person	
Position	
Date	

Part 6: IAAB Office use only

Step 1. Application Received & reviewed Checklist: • Application duly filled? • All Required information received? • All Attachment received? • Received Application fee?	
Application accepted or rejected or required supplement information	
Required Man-day for Application & received Documentation review	
Required Man-day for Office Assessment	
Selected GLA assessment team leader & Assessors	
Propose office GLA Assessment date (Mutual Agreed)	

FURTHER INFORMATION

For further information on this document contact:

Secretariat:
IAAB Corporate Secretary

Email:
Contact@IAAB.US