

**Application Form: ISO Certification**

Please complete this form in full and send to sales@centreforassessment.co.uk or the person who sent it to you. If you require any assistance in completing the form, please contact us on **0161 237 4080**.

**Section One: Basic Details**

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| **Your Details** |
| **Organisation Name** |  |
| **Key Contact name** |  |
| **Key Contact Job Title** |  |
| **Email** |  |
| **Telephone** |  |

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| **Your Assessment** |
| Which Standard(s) does your organisation seek certification against? | [ ]  ISO 9001[ ]  ISO 14001 | [ ]  ISO 27001[ ]  ISO 45001 |
| What type of assessment do you require? | Initial[ ]  | Transfer[ ]  | Next audit type dueChoose an item. |
| Do you require a gap analysis? | Yes[ ]  | No[ ]  |
| Is your Management System integrated across the requirements of more than one Standard? | Yes[ ]  | No[ ]  |
| Do you require a Certificate of Commitment? | Yes[ ]  | No[ ]  |

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| **The Scope of Your Assessment** |
| What is the scope of your organisation’s operations? |  |
| What sector(s) do you operate in? |  |
|  | Details if ‘yes’ |
| Does your organisation design the services and/or products it provides? | Yes[ ]  | No[ ]  |  |
| Do you outsource any core processes or services? | Yes[ ]  | No[ ]  |  |
| Do you operate from customer sites? | Yes[ ]  | No[ ]  |  |

**Section Two: Locations**

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| **Location One (Main Location)** |
| Address |  |
| Activities/processes undertaken on site |  |
| Number of full-time employees |   |
| Number of part-time employees |  | Average % hours worked: |
| How many are based permanently ‘off-site’? |  | Details: |
| Please provide a breakdown of staff roles (e.g. 4 directors, 5 sales, 10 admin, or provide an organisation chart) |  |
| How many subcontractors are used? |  | Details: |

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| **Location Two** |
| Address |  |
| Activities/processes undertaken on site |  |
| Number of full-time employees |   |
| Number of part-time employees |  | Average % hours worked: |
| How many are based permanently ‘off-site’? |  | Details: |
| Please provide a breakdown of staff roles |  |
| How many subcontractors are used? |  | Details: |

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| **Location Three** |
| Address |  |
| Activities/processes undertaken on site |  |
| Number of full-time employees |  |
| Number of part-time employees |  | Average % hours worked: |
| How many are based permanently ‘off-site’? |  | Details: |
| Please provide a breakdown of staff roles |  |
| How many subcontractors are used?  |  | Details: |

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| **Location Four** |
| Address |  |
| Activities/processes undertaken on site |  |
| Number of full-time employees |  |
| Number of part-time employees |  | Average % hours worked: |
| How many are based permanently ‘off-site’? |  | Details: |
| Please provide a breakdown of staff roles |  |
| How many subcontractors are used? |  | Details: |

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*If you have more than four locations, please complete our* ***additional locations*** *supplement.*

**Section Three: Additional Information**

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| Company registration number |  |
| VAT number |  |

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| **Audit Arrangements** |
|  | Details if ‘Yes’ |
| Will the auditor require an interpreter? | Yes[x]  | No[x]  |  |
| Is the organisation subject to high regulation? | Yes[ ]  | No[ ]  |  |
| Are there any Health and Safety risks? | Yes[ ]  | No[ ]  |  |
| Dotes the auditor require any PPE? | Yes[ ]  | No[ ]  |  |
| Does the auditor require induction or security clearance? | Yes[ ]  | No[ ]  |  |

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| **The System** |
|  | Details if ‘Yes’ |
| Have you engaged with any consultant to help develop your Management System? | Yes[ ]  | No[ ]  |  |
| Do you have any impartiality concerns? | Yes[ ]  | No[ ]  |  |
| How long has the System been in place? |  |  |

**Section Four: Multi-Location Details**

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| **ONLY COMPLETE THIS SECTION IF YOU OPERATE ACROSS MORE THAN ONE LOCATION** |
| Does your organisation have one Management System covering all locations? | Yes[ ]  | No[ ]  |
| Please state the location from where the System is controlled. |  |
| Does the above location have the authority to define, establish and maintain the single Management System? | Yes[ ]  | No[ ]  |
| Is your single management system subject to a centralised management review covering all locations? | Yes[ ]  | No[ ]  |
| Are all locations subject to the organisation’s internal audit programme? | Yes[ ]  | No[ ]  |
| Is the control location responsible for ensuring Management System data is collected and analysed from all sites? | Yes[ ]  | No[ ]  |
| Does the control location have the authority and ability to initiate organisational changes? | Yes[ ]  | No[ ]  |

**Section Five: Standard-Specific Details**

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| **ISO 14001 ONLY** |
|  | Details if ‘Yes’ |
| Are any of the organisation’s sites located in environmentally sensitive surroundings? | Yes[ ]  | No[ ]  |  |
| Has the organisation identified its environmental aspects? | Yes[ ]  | No[ ]  |  |
| Do you rent any of your premises to other organisations or share premises? | Yes[ ]  | No[ ]  |  |
| Are you subject to an environmental permit, licence, consent etc.? | Yes[ ]  | No[ ]  |  |
| Has your organisation been prosecuted for a breach of environmental legislation? | Yes[ ]  | No[ ]  |  |

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| **ISO 27001 ONLY** |
| A – Sensitive of confidential information | Little[ ]  | Moderate[ ]  | Highly[ ]  |
| A – Availability of information requirements | Low[ ]  | Moderate[ ]  | High[ ]  |
| A – Number of key processes, interfaces and units | One[ ]  | Two or three[ ]  | More than three[ ]  |
| B – Criticality of business sectors | Non-critical and Non-regulated[ ]  | Customers in critical sectors[ ]  | Work in critical sectors[ ]  |
| C – Established/performance of ISMS | Well established and tested[ ]  | Fully implemented[ ]  | Only partially implemented[ ]  |
| D – IT infrastructure complexity | Few different platforms, networks etc.[ ]  | Several different platforms, networks etc.[ ]  | Many different platforms, networks etc.[ ]  |
| E – Extent of outsourcing and suppliers, including cloud services | Little or no dependency[ ]  | Some dependency[ ]  | High dependency[ ]  |
| F – Information System development | None or very limited in-house[ ]  | Some in-house and some outsourced[ ]  | Lots of in-house [ ]  |
| G – Number of disaster recovery sites | None or one[ ]  | Two or three[ ]  | More than three[ ]  |

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| **ISO 45001 ONLY** |
|  | Details if ‘Yes’ |
| Have you had any incident leading to prosecution, insurance claims or enforcement notices in the last 5 years? | Yes[ ]  | No[ ]  |  |
| Have there been any injuries, diseases or dangerous occurrences in the last 12 months? | Yes[ ]  | No[ ]  |  |
| Did any of the previous two answers relate to members of the public? | Yes[ ]  | No[ ]  |  |
| Please provide details of legislation, regulation and applicable guidance to your business |  |
| Please provide details of occupational health and safety hazards |  |

**Section Six: Integrated Audits**

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| **ONLY COMPLETE THIS SECTION IF YOU HAVE AN INTEGRATED MANAGEMENT SYSTEM** |
| Does you have an integrated documentation set? | Yes[ ]  | No[ ]  |
| Do your Management Reviews consider the overall business strategy? | Yes[ ]  | No[ ]  |
| Do you take an integrated approach to internal audits? | Yes[ ]  | No[ ]  |
| Do you take an integrated approach to policy and objectives? | Yes[ ]  | No[ ]  |
| Do you take an integrated approach to system processes? | Yes[ ]  | No[ ]  |
| Do you take an integrated approach to improvement mechanisms? | Yes[ ]  | No[ ]  |
| Do you have integrated management support and responsibilities? | Yes[ ]  | No[ ]  |

**Notes**

Once received, a member of our Business Development team will acknowledge receipt of your application and, unless further details are required, issue you with a no-obligation quotation within three working days.

If further details are needed, we will contact you by email or phone to discuss these with you.

Please get in touch with us at any time with any enquiries you have: sales@centreforassessment.co.uk.

**Data Protection Statement**

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