

Title	Application form for Accreditation of Proficiency Testing Providers (PTP)
Reference	DA-06
Revision	01
Date	2016-07-12

Preparation	Approval	Authorization of issue	Application date
The Quality Manager	The Director of Testing Laboratories Department	The General Director	2016-07-19

1. CAB Legal Entity

1.1 Laboratory' s Operative site address

2. ORGANIZATION

2.1 Responsible Name, Surname and title of the PTP under accreditation ⁽¹⁾ ⁽²⁾ ⁽³⁾

2.2 Name, Surname and title of PTP Responsible substitute ⁽¹⁾ ⁽³⁾

2.3 Name, Surname and title ⁽¹⁾ of PTP Quality Manager ⁽³⁾

2.4 Name, Surname and title ⁽¹⁾ of PTP Quality Manager Deputy⁽³⁾

2.5 Name, Surname, title ⁽¹⁾ and technical area of the Coordinators of the schemes under accreditation ⁽³⁾

2.6 Name, Surname, title ⁽¹⁾ and technical sector relevant to people deputed for reports release ^(3,4)

1) *specify title or degree*

2) *As "PTP Responsible ", ACCREDIA intends the person appointed for the overall PTP technical responsibility and responsible to assure the compliance to ACCREDIA requirements (see RG-14 pt. 2.2 and UNI CEI EN ISO/IEC 17043 pt. 5.1)*

3) *The CV of specified people duly signed and dated must be attached to present form.*

4) *The signature is to be intended as approval in view of the release of report (see. UNI CEI EN ISO/IEC 17043 pt. 4.8).*

3. ADDITIONAL INFORMATION

3.1) The PTP provides proficiency testing for:

the Company or Organization to whom is pertaining (internal customer) yes no

external customers yes no

on behalf of interest parties yes no

NOTE:

3.2) If the PTP has an internal testing laboratory, involved in PT activities (i.e. homogeneity and stability tests):

is the laboratory accredited according ISO/IEC 17025 or ISO 15189? yes no

does the laboratory participate to the proposed proficiency testing? yes no

NOTE:

3.3) N° of reports issued using the ACCREDIA mark and N° of rounds during the previous accreditation cycle (to be filled only in case of re-accreditation)

3.4) Does the PTP issue preliminary, interim or partial reports before the final issue? yes no

3.3) Supply, if applicable/significant, notes about the position of PTP within the mother organization, included the relationship with the others departments (i.e. specify if personnel, equipment, spaces are shared with other departments; if material/services supplied by others structures are used; if people listed at §2 is appointed for additional duties, etc.).

3.4) In view of the audit execution, specify if the people executing the activities covered by the Quality Manual and relevant records are available at PTP premises mentioned at § 2.1 of DA-00, and if not, specify which activities and record are elsewhere located.

3.5) List the activities (i.e. samples preparation, homogeneity tests, statistical evaluation, assigned value, packaging, labelling, shipping) that PTP usually externally subcontracts (specify also Legal Entity and address of Subcontractors) and indicate in which way these are evaluated by the PTP (see RT-27, pt. 5.5)

- 3.6) The PTP has avail himself of the services a consultant for the establishment and maintaining of the SGQ in conformity to the reference standard? (i.e. UNI CEI EN ISO/IEC 17043)? SI NO

If yes, declare the name and membership organization.

- 3.7) List of the management system procedures of the PTP:

Code	Title	Rev.	Date
	<i>add new lines, if necessary</i>		

4. FURTHER ATTACHMENTS TO BE PRESENTED TOGETHER WITH THE APPLICATION FORM

- Relevant document attesting the legal identity of the CAB along with the identification of its legal representative (see DA-00).

- List of proficiency testing for which the accreditation is requested (see *DA-06 All. 1*)
(.pdf and .xls)

- Controlled copy (pdf.) of the PTP Quality System Manual (only one file)
Code: _____ Rev.: _____

- CV (complete of date of issue, signature, and release to personal data treatment) of people mentioned under § 2 above.

- The procedure/s and/or others PTP document detailing the general criteria chosen for data analysis and evaluation of participant results.

- Organizational chart, with names, of the PTP operators (at least the main roles).

- Only for the 1° accreditation: Minute of meeting of the last management review, containing all the information foreseen by point 5.15 della UNI CEI EN ISO/IEC 17043 standard, and covering also a complete internal audits program.

- Last report issued for each scheme under accreditation (.pdf)
Ultimo rapporto di prova valutativa emesso per ciascuno degli schemi richieste in accreditamento (in formato pdf)

Rev.:

Date:

CAB Stamp
Name and Signature
of CAB Legal Representative⁽⁵⁾

6) Legal Representative or delegate.