

AC 5: Accreditation of Proficiency / External Quality Assurance Testing Provider (ISO/IEC 17043)



Company Details	
Company Name	
CQC Ref (Existing Customers Only)	

Type of Proficiency Testing / EQA Scheme (Ref ISO/IEC 17043:2010, Annex A)	
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No.	Scheme Name	Products/Materials	Determinands/Parameters	Statistical Techniques Employed
1				
2				
4				
5				
6				
7				
8				

ABOUT SUBCONTRACTORS:

Please provide information concerning the involvement of any subcontractors in the PT / EQA scheme(s).

No.	Organisation	Function and Role of Subcontractor including Activities Subcontracted	Basis for Approval as a Subcontractor
1			
2			
3			
4			
5			

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IN-HOUSE CALIBRATION:

Are there any in-house calibration(s) of equipment used for any measurement activities associated with your scope of application?

Yes No

If 'Yes' please provide details below (refer to CQC publication **TPS 41** for information)

No.	MEASURED QUANTITY/INSTRUMENT	REFERENCE STANDARD USED	PROCEDURE	PURPOSE (DETAILS OF MEASUREMENT ACTIVITIES THAT THIS SUPPORTS)
1				
2				
3				
4				
5				

MULTI-SITE APPLICATIONS:

If your application covers activities performed at more than one site, details must be provided below.

SITE No.	SITE LOCATION	ACTIVITIES PERFORMED AT THIS SITE	CONTACT DETAILS
1			
2			
3			
4			
5			

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EXTENSIONS TO SCOPE ONLY:

1. I wish this extension to scope application to be processed now (and understand this may require an extra visit by CQC).

Desired Timeframe for Assessment:

- 1-3 months 3-6 months 6-9 months 9-12 months

Please note standard CQC timeframe for the assessment of extensions to scope is 3 months from receipt of application

2. I wish this extension to scope application to be processed with my next surveillance/re-assessment visit.
3. I would like to propose that this extension to scope application is considered for desktop review (*Please note that the decision on the applicability of this proposal will be made by CQC based on a number of factors including existing scope of accreditation and competences demonstrated*)

SUPPORTING DOCUMENTATION:

For an extension to scope to be progressed by CQC the following documentation must, as a minimum, be supplied where it is applicable. Applications submitted with no supporting documentation will not be accepted.

Documentation	'Tick' if supplied	Justification for non-submission
Documented Scheme Protocol <i>(or scheme description as provided to [potential] participants if not in a scheme protocol)</i>	<input type="checkbox"/>	Click here to enter text.
Stability Assessment Data and Summary	<input type="checkbox"/>	Click here to enter text.
Homogeneity Assessment Data and Summary	<input type="checkbox"/>	Click here to enter text.
Procedures for Calculating the Assigned Value, Analysis of Participants' Data and Performance Evaluation	<input type="checkbox"/>	Click here to enter text.
Example Reports	<input type="checkbox"/>	Click here to enter text.
Other (please specify)	Click here to enter text.	Click here to enter text.

For an extension to scope to be considered for desktop review the following documentation, in addition to that listed above, must be supplied, where it is applicable. Applications submitted with no supporting documentation will not be accepted.

Documentation	'Tick' if supplied	Justification for non-submission
Training Records of Relevant Staff	<input type="checkbox"/>	Click here to enter text.
Audits/Approval Records of Subcontractors	<input type="checkbox"/>	Click here to enter text.
Other (please specify)	Click here to enter text.	Click here to enter text.

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DECLARATION:

- I declare that I am authorised, on behalf of the company, to submit this application, and that the information contained herein is both correct and accurate to the best of my knowledge and belief.
- If this application relates to an extension to scope, I understand and accept that an assessment fee will normally be charged for the extension to scope, and it may be necessary to revise our annual fees upon grant of the extension to scope.
- By submitting this application I acknowledge that I have read, understood and accepted CQC' Standard Terms of Business.

Name: _____

Position: _____

Date: [Click here to enter a date.](#) _____

APPLICATIONS TO BE SUBMITTED TO:

EMAIL: manager@cqcert.co.uk