

## **Record sheet for auditors**

(Please fill in completely and legibly!)

Relevant documents for the approval of auditors have to be submitted at the latest 6 weeks before the training.  Only complete applications can be processed.							
☐ Extension of approval							
A. Applicant							
Name of certification body:							
Name of responsible person:							
Phone:							
E-Mail:							
B. Auditor							
Surname:							
First name:							
Date of birth:							
Personal email address auditor:							
Professional degree (Proof required):							
in each case with proven knowledge of	agricultural livestock production/meat sector						
A minimum of 2 years of professional experience in the field of animal production, namely:							



Area of approval			Approval is requested for	
Agriculture Pig				
Agriculture Poultry				
Meat Sector				
Enclosures:				
	Yes	No	Comments	To be submitted until
Proof of professional degree (copy)				_
Proof of a minimum of two years of professional experience in livestock production/ meat sector				
Curriculum vitae				_
Proof of auditor training (copy)				_
List of qualified audits				_
If necessary, certificates of competence				_
Proof of internal training by the certification body				Conducted on:
Declaration of Consent regarding the use of personal data				
Registration for training by the sponsoring company				Date of training:
Other/comments:				
We confirm the accuracy of the informat	ion in th	ne appli	cation and the enclosures.	
Date:			<del> </del>	
Signature of the responsible contact person of the certification body:				



## **List of qualified audits** Surname, first name:

## Registered certification body:

No.	Date	Sector/stage	Company	Scope/standard	For QS-audits: Location number and production scope		
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Date:	Date: Signature of the responsible contact person of the certification body						



Gesellschaft zur Förderung des Tierwohls in der Nutztierhaltung mbH

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