

Area of approval	Approval is requested for
Agriculture Pig	<input type="checkbox"/>
Agriculture Poultry	<input type="checkbox"/>
Agriculture Cattle	<input type="checkbox"/>
Meat Sector	<input type="checkbox"/>

Enclosures:

	Yes	No	Comments	To be submitted until
Proof of professional degree (copy)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Proof of a minimum of two years of professional experience in livestock production/ meat sector	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Curriculum vitae	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Proof of auditor training (copy)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
List of qualified audits	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
If necessary, certificates of competence	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Proof of internal training by the certification body	<input type="checkbox"/>	<input type="checkbox"/>	_____	Conducted on: _____
Declaration of Consent regarding the use of personal data	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Registration for training by the sponsoring company	<input type="checkbox"/>	<input type="checkbox"/>	_____	Date of training: _____

Other/comments: _____

We confirm the accuracy of the information in the application and the enclosures.

Date: _____

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: _____

Signature of the responsible contact person of the certification body _____