CQI Certification Pvt. Ltd.

APPLICATION FORM

Date of Application	
Name of the Company	
Address	
Website, Email and Phone number	
No of Sites	
Site Address	
Contact Person Name and Designation	
Legal Status	Company: Private ☐ Public ☐ Proprietorship ☐ Partnership ☐ Govt Undertaken ☐ PSU ☐ NGO ☐ Other ☐
Statutory and Regulatory Requirement	
Accreditation Required	UAF ☐
Certification Scheme	ISO 9001:2015 ☐ ISO 14001:2015 ☐ ISO 45001:2018 ☐ ISO 37001:2016 ☐ ISO 37001:2025 ☐
Scope of Certification	
Exclusion if any	**Clause** / **Justification**
Outsourced Process, If any	

No. of Employees	**Location**	**Shifts**	**Full Time**	**Part time**	**Performing Same type of Job**	**Temporary Unskilled workers**	**Effective No. of Employees**
	Site 1						
	Site 2 (Temporary)						
	TOTAL						

Other Type of Employees (If Any):

Certification Program Required	Initial ☐	Surveillance ☐	Recertification ☐	Transfer ☐
Combined Audit	In the case of several certification programmes, would you like the audits to be Combined or carried out separately? ☐ Yes ☐ No If the answer is yes, please specify which combination of Standards:			
	Is Internal Audit is Combined: ☐ Yes ☐ No			
	Is MRM is Combined: ☐ Yes ☐ No			
	Is Manual, Procedures are Combined: ☐ Yes ☐ No			
	Is Implemented System is Integrated: ☐ Yes ☐ No			

Integration Level of the Client Organization		
1. An integrated documentation set, including work instructions to a good level of development, as appropriate;	**☐Yes**	**☐No**
2. Management Reviews that consider the overall business strategy and plan;	**☐Yes**	**☐No**
3. An integrated approach to internal audits;	**☐Yes**	**☐No**
4. An integrated approach to policy and objectives;	**☐Yes**	**☐No**
5. An integrated approach to systems processes;	**☐Yes**	**☐No**
6. An integrated approach to improvement mechanisms, (corrective and preventive action; measurement and continual Improvement);	**☐Yes**	**☐No**

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7. Integrated management support and responsibilities.	☐Yes ☐No
Is Already Certified for any Standard	Yes ☐ No ☐ If Answer is Yes Mention Name of the Standard:
Is Consultants Involved	Yes ☐ No ☐ If Answer is Yes Mention Name of the Consultants:
Key Business Process Involved	
How To Reach at Site	
Manual Date	
Internal Audit Date	
MRM Date	

Additional Information Required	
EMS	How many Sites the company is Managing at the same time? Do you have Register of Significant Environment aspect? ☐ Yes ☐ No Do you have an Environmental Management Manual? ☐ Yes ☐ No Do you have an Internal Environmental Audit Programme? ☐ Yes ☐ No Has the Internal Environmental Audit Programme been implemented? ☐ Yes ☐ No
OHSMS	Hazard's Identified? ☐ Yes ☐ No Detail any critical occupational health & safety risks identified? The key hazards and OH&S risks associated with the processes: Information about the main hazardous materials used in the processes:
ABMS	Is there any Legal Case in Last Five Years ☐ Yes ☐ No Is there any Case of Bribery Noted in Last Five Years ☐ Yes ☐ No Description If Yes { }

DECLARATION: The above information is true to the best of my knowledge and belief and I am authorized to provide such information on behalf of the company.

Name		**Designation**		**Signature**	

CQI Official Use
Can the Application Proceed for Application Review: ☐ Yes ☐ No

Name of Application reviewer		**Signature**		**Date**	

***Delete or leave whichever is not applicable**