CONFIDENTIAL

OFFICE USE ONLY

REGISTRATION NO:

DATE REGISTERED:

MALAYSIA REGISTER OF CERTIFICATED AUDITORS (MRCA)

Institute of Quality Malaysia No 25-2, Plaza Danau 2, Jalan 5/109F, Taman Danau Desa 58100 Kuala Lumpur Tel: 603-79848700 Fax: 603-79848711 E-mail: contact@igm.org.my Website: http://igm.org.my

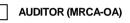
APPLICATION FOR AUDITOR CERTIFICATION - SECTOR

APPLYING FOR (PLEASE INDICATE):

INTERNAL QUALITY AUDITOR (MRCA-IA)

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PROVISIONAL AUDITOR (MRCA-PA)



SENIOR AUDITOR (MRCA-SA)

PLEASE READ ALL NOTES BEFORE PROCEEDING:

- 1 Enclose application fee, not refundable, with this form (refer Fee Schedule)
- 2 All entries must be in legible writing in black ink.
- 3 Send application together with supporting documents in duplicate. Copies of qualifications, professional membership certificates and auditor training certificates must be enclosed with this application.
- 4 If you hold current Auditor/Lead (Senior) Auditor certification with another organisation, give details including industry sector competence.
- 5 Customer references must be enclosed with this application. Lead Auditor applicants require two (2) and Auditor applicants one (1). The references will include details of your role in the audit and the standard used.
- 6 Verification signatures supporting your industry and auditing experience must be obtained where requested in the margins.
- 7 This application cannot be accepted unless correctly supported by sponsor.

1. PERSONAL AND BUSINESS DETAILS

(underline surname or family name)	
DATE OF BIRTH:	
	E-mail:
TEL: FAX:	
H/P: E-mail:	

SECTOR AUDITOR TO BE APPLIED FOR:

4 5 6 7	ISO 9001: QMS ISO 14001: EMS ISO 22000: Food Safety HACCP ISO 50001: Energy MS ISO 27001: IT Security ISO 20000: IT Maintenance	14 15 16	ISO 22301: BCMS ISO 13485: Medical Device ISO 15189: Medical Lab GMP for Pharma (WHO, FDA, MHRA & EC) ISO 10012: Measurement MS ISO/TS 29001: Oil & Gas Sector Specific QMS ISO 17025: Testing & Calibration Lab
7 8	OHSAS 18001		ISO 17025: Testing & Calibration Lab ISO/TS 16949: Automotive Product Quality
9	SA 8000: Social System	18	ISO 18420: QMS Educational Organisation

2.INDUSTRY EXPERIENCE (please indicate a maximum of 4 fields of experience): □ 13 Hotels & Restaurants Printing & Publishing O1 Agriculture, Forestry & Fishing 25 Basic Metals & Fabricated 02 □ 14 Healthcare Services 26 Pharmaceuticals Metal Product O3 Construction 15 Information Technology 27 **Public Administration** D 04 Chemical , Chemical Products Real Estate & Asset Management 16 Machinery & Equipment 28 & Fibres D5 Concrete, Cement, Lime, Rubber & Plastic Products □ 17 Mining & Quarrying 29 Plaster □ 06 Education & Training □ 18 Non- Metallic mineral Products 30 Shipbuilding & Marine □ 19 Nuclear & Radiation □ 07 Engineering Services 31 **Textiles & Leather Products** □ 08 Electronic, Electrical & Optical **2**0 Oil, Gas & Petroleum 32 Transport, Storage & Communication Equipment □ 09 Electricity Supply 21 Other manufacturing 33 Wood & Wood Products 10 Financial Services 22 Other Social Services 34 Water Supply □ 11 Food Products & Beverages □ 23 Other Services 35 Wholesale & Retail Trade Waste Disposal & Environmental □ 12 Green Technology & Recycling 24 Pulp & Paper Products 36 Improvement Services

3. TEC	3. TECHNICAL AND ACADEMIC QUALIFICATION (enclose certified duplicate)					
YEAR	AWARD	COURSE/SUBJECTS	EDUCATIONAL ESTABLISHMENT	QUALIFYING AUTHORITY		

4. PROFESSIONAL MEMBERSHIP (enclose certified duplicate)				
PROFESSIONAL ASSOCIATION	DATE ELECTED	GRADE		

5. AUDITOR TRAINING COURSE & EXAMINATION (enclose certified duplicate)				
DATE COMPLETED	COURSE LENGTH (Hours)	ORGANISATION CONDUCTING THE COURSE	AUDITOR EXAM. RESULT	

6. WORKING/QUALITY EXPERIENCE

LIST YOUR POSITION AND WORK EXPERIENCE STARTING WITH THE MOST RECENT YEARS.

All auditor grades should show 4 years industry and 2 years quality experience. Note : Industry and quality experience can be concurrent

FROM MONTH/YEAR	TO MONTH/YEAR	POSITION HELD	EMPLOYER	RESPONSIBILITIES

(COPY THIS PAGE IF THERE IS INSUFFICIENT SPACE)

7. SPONSOR

The sponsor *must* have not less than *two (2)* years personal knowledge of the applicant and his/her work. They should check the application for completeness and accuracy of **all** statements before signing the declaration below:

SPONSOR

8. DECLARATION BY APPLICANT:

In connection with my application for Auditor Certification, I hereby declare that the information provided on this form is correct to the best of my knowledge. I undertake to observe the Code of Conduct for Auditors. Upon successful certification, I agree to the publication of my name, business address, industry and certification details in a register of Certified Auditors.

Signature of Applicant: _____ Date: _____