

Accreditation Unit

Final Assessment Report^{**} According to ISO/IEC 17025: 2005

- First accreditation
 Surveillance visit
 Re-accreditation
 Expansion of scope of accreditation

Details of the Assessment Report:

Report no*.:

Report for the assessment on:

- Lead Assessor
 Lead Assessor's Assistant
 Applicant Assessor/ observer

Details of the assessor:

Name:	<input style="width: 98%; height: 15px;" type="text"/>
Institution:	<input style="width: 98%; height: 15px;" type="text"/>
Telephone/Fax:	<input style="width: 98%; height: 15px;" type="text"/>
Email:	<input style="width: 98%; height: 15px;" type="text"/>

Details of the laboratory:

Name:	<input style="width: 98%; height: 15px;" type="text"/>
Street/city:	<input style="width: 98%; height: 15px;" type="text"/>
P.O. Box:	<input style="width: 98%; height: 15px;" type="text"/>
Telephone/Fax:	<input style="width: 98%; height: 15px;" type="text"/>
Email:	<input style="width: 98%; height: 15px;" type="text"/>

Accreditation at several locations applicable:

- Yes
 No

If Yes, address of the assessed location / of the locations:

Name:	<input style="width: 98%; height: 15px;" type="text"/>
Street/city:	<input style="width: 98%; height: 15px;" type="text"/>
P.O. Box:	<input style="width: 98%; height: 15px;" type="text"/>
Telephone/Fax:	<input style="width: 98%; height: 15px;" type="text"/>
Email:	<input style="width: 98%; height: 15px;" type="text"/>

* These numbers are defined by the assessment sub-unit at the Accreditation Unit
 **This report follows the structure of the standard text (clauses 4 and 5) in the parts concerning the accreditation of laboratories.

i	Scope of accreditation			
ii	Details of the <u>assessed</u> areas (<i>physical locations, personnel involved, equipment, etc</i>) and related quality management systems documentation.			
4	Findings of the assessment relevant to the management requirements			
4.1	Organisation (Type of laboratory; 1st, 2nd, or 3rd Party, impartiality, integrity, key technical and quality staff, deputies, etc.)	C*		NC*

* C: Compliance
 * NC: Compliance

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4.2	Quality system (Quality Policy, overall quality objectives, evidence of commitment to the development and implementation of the management system and continually improving its effectiveness)	C		NC	
4.3	Document control	C		NC	
4.4	Review of requests, tenders and contracts	C		NC	
4.5	Subcontracting of tests and calibrations	C		NC	

4.6	Purchasing services and supplies	C		NC	
4.7	Service to the client (cooperation, seeking feedback using and analysing the results to improve the system)	C		NC	
4.8	Complaints	C		NC	
4.9	Control of nonconforming testing and/or calibration work	C		NC	

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4.10	Improvement	C		NC	
4.11	Corrective action	C		NC	
4.12	Preventive action	C		NC	
4.13	Control of records	C		NC	
4.14	Internal audits	C		NC	
4.15	Management reviews	C		NC	

5	General findings of the assessment relevant to the technical requirements (<i>this part,; part 5, is to be filled based on the findings of the technical assessors</i>)					
5.2	<table border="1"> <tr> <td data-bbox="244 952 1193 1019">Personnel (to include the effectiveness of the training)</td> <td data-bbox="1193 952 1254 1019">C</td> <td data-bbox="1254 952 1310 1019"></td> <td data-bbox="1310 952 1366 1019">NC</td> <td data-bbox="1366 952 1468 1019"></td> </tr> </table>	Personnel (to include the effectiveness of the training)	C		NC	
Personnel (to include the effectiveness of the training)	C		NC			
5.3	<table border="1"> <tr> <td data-bbox="244 1451 1193 1518">Accommodation and environmental conditions</td> <td data-bbox="1193 1451 1254 1518">C</td> <td data-bbox="1254 1451 1310 1518"></td> <td data-bbox="1310 1451 1366 1518">NC</td> <td data-bbox="1366 1451 1468 1518"></td> </tr> </table>	Accommodation and environmental conditions	C		NC	
Accommodation and environmental conditions	C		NC			

Procedure no.*:

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5.4	Test and calibration methods and method validation (Selection of method, lab developed method, non standard methods, validation of methods, estimation of Measurement Uncertainty, control of data)	C		NC	
5.5	Equipment	C		NC	
5.6	Measurement Traceability (Organization traceable to, description of internal and external calibration, etc.)	C		NC	

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5.7	Sampling	C		NC	
5.8	Handling of test and calibration items	C		NC	
5.9	Assuring the quality of test and calibration results	C		NC	

5.10	Reporting the results (please attach the Authorized Personnel to sign the test/ calibration reports list)	C		NC	
Did the lab participate in a Proficiency tests / inter-laboratory comparison tests?					
	Yes		No		
If so, what was the scope of the scheme? Please attach results and your evaluation as annex.					
If the Participation in such activities are considered not applicable please specify the reason.					
Remarks:					
Additional remarks and evaluation of the assessor regarding the competence of the laboratory					

Fulfilment of instructions from previous assessments		
	Yes	No
		Not applicable
Previous Assessment report no.: Date: Result of evaluation:		
Recommendations of the assessor on the result of the assessment:		
Summary of additional instructions/ requirements are stipulated as follows:		
	Deviation reports (Quality- Attached)	
	Proposed Corrective action reports (Quality - Attached)	
Results of evaluation		
1- Deviations that shall be fulfilled onsite are: Deviation(s) No.:		
2- Deviations that shall be fulfilled via documentation assessment are: Deviation(s) No.:		
3- Deviations that can be checked during the next surveillance are: Deviation(s) No.:		
4- Concerns or weak points need to be tackled during the next on site assessment are:		
<hr/> <hr/> <hr/> <hr/>		
<ul style="list-style-type: none"> Proposed date of the next surveillance: 		

Procedure no.*:

JAS

Recommendation for accreditation:

Yes

Yes upon closing the NCs

No

I hereby commit myself to follow up the fulfilment of corrective actions taken by the CAB and submit the results in "Supplement I" of this report (Evaluation of Corrective actions) within the agreed time frame with AU.

Place/Date:

Lead Assessor Signature:.....

The report has been checked by the In charge of the Assessment Sub-unit:

The report is not considered final unless "Supplement I" of this report and "Supplement I" of the technical report (Evaluation Of Corrective Actions) are attached.

Place/Date:

Signature:

Name in clear alphabets: