

# IATF 16949 3<sup>rd</sup> Party New Auditor Training & Assessment Application – Part 1 – Qualification Form

The application form must be filled out completely and signed by the sponsoring CB's official contact person. Please complete this form electronically and submit to AIAG's 3<sup>rd</sup> Party training coordinator at [thirdpartycert@aiag.org](mailto:thirdpartycert@aiag.org) with a copy of the following documents:

- Updated CV.
- Auditor or Lead Auditor ISO 9001 certificate.
- Auditor log clearly listing, at minimum, six (6) ISO 9001 audits in manufacturing industries. This must include at least three (3) as audit team leader.

Applications must be received by AIAG a minimum of five (5) weeks prior to desired Training & Assessment date.

## AUDITOR INFORMATION:

First (Given) Name: \_\_\_\_\_ Last (Family) Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_ Location (Country): \_\_\_\_\_  
Main Language: \_\_\_\_\_ Other Language: \_\_\_\_\_

## AUDITOR QUALIFICATION (please check the box(es) if applicable):

- ☐ Auditor is qualified according to ISO/IEC 17021 and the relevant accreditation body rule to perform ISO 9001 audits. ***Please attach copy of certificate.***
- ☐ Auditor certified to ISO 9001
- ☐ Lead auditor certified to ISO 9001

## AUDITOR EXPERIENCE (please check the box if applicable):

- ☐ Auditor has conducted at least six (6) ISO 9001 third party audits in manufacturing industries, with at least three (3) as audit team leader. ***Please attach copy of auditor log sheets substantiating the audits detailed by standard.***

## IATF 3<sup>rd</sup> PARTY OBSERVATION AUDIT:

Please provide details of the IATF 3<sup>rd</sup> Party Observation Audit that the auditor attended:

Date: \_\_\_\_\_ Site Name: \_\_\_\_\_  
IATF Lead Auditor: \_\_\_\_\_ Certification Body: \_\_\_\_\_



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## WORK EXPERIENCE (please check the box(es) if applicable):

- ☐ Auditor is knowledgeable in automotive core tools.
- ☐ Auditor has four (4) years full-time appropriate practical experience, including two (2) years dedicated to Quality Assurance and/or Quality Management activities within the past 15 years in an automotive manufacturing organization meeting the applicability of IATF 16949.

***Please attach auditor's CV/Resume clearly identifying the above.***

## SPONSORING CERTIFICATION BODY (Must match Official Contact form information on file with AIAG)

**This section MUST be completed by official contact person of the Sponsoring Certification Body's Contracted Office.**

Certification Body: \_\_\_\_\_ Oversight Office: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_  
E-mail: \_\_\_\_\_

*AIAG complies with required Office of Foreign Asset Control (OFAC) regulations.*

**By signing below, I certify that all of the information provided on this Form is correct. I also authorize AIAG to share this information with the IATF as needed.**

**Official Contact Person's Name (Please print):** \_\_\_\_\_

**Signature and Date:** \_\_\_\_\_