

**CONFIDENTIAL**

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**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@iqm.org.my](mailto:contact@iqm.org.my) Website : <http://iqm.org.my>

**APPLICATION FOR AUDITOR CERTIFICATION – SECTOR**

**APPLYING FOR (PLEASE INDICATE):**

- |   |   |
|---|---|
| <input type="checkbox"/> INTERNAL QUALITY AUDITOR (MRCA-IA) | <input type="checkbox"/> AUDITOR (MRCA-OA)        |
| <input type="checkbox"/> PROVISIONAL AUDITOR (MRCA-PA)      | <input type="checkbox"/> 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**

**NAME : DR/MR/MRS/MS**  
 (underline surname or family name) \_\_\_\_\_

**BUSINESS ADDRESS:**  
 \_\_\_\_\_  
 \_\_\_\_\_

**DATE OF BIRTH:** \_\_\_\_\_

**PRIVATE ADDRESS:** \_\_\_\_\_

**TEL:** \_\_\_\_\_ **FAX:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**TEL:** \_\_\_\_\_ **FAX:** \_\_\_\_\_

**H/P:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**SECTOR AUDITOR TO BE APPLIED FOR:**

- |  |   |
|--|---|
| <input type="checkbox"/> 1 ISO 9001: QMS             | <input type="checkbox"/> 10 ISO 22301: BCMS                             |
| <input type="checkbox"/> 2 ISO 14001: EMS            | <input type="checkbox"/> 11 ISO 13485: Medical Device                   |
| <input type="checkbox"/> 3 ISO 22000: Food Safety    | <input type="checkbox"/> 12 ISO 15189: Medical Lab                      |
| <input type="checkbox"/> 4 HACCP                     | <input type="checkbox"/> 13 GMP for Pharma (WHO, FDA, MHRA & EC)        |
| <input type="checkbox"/> 5 ISO 50001: Energy MS      | <input type="checkbox"/> 14 ISO 10012: Measurement MS                   |
| <input type="checkbox"/> 6 ISO 27001: IT Security    | <input type="checkbox"/> 15 ISO/TS 29001: Oil & Gas Sector Specific QMS |
| <input type="checkbox"/> 7 ISO 20000: IT Maintenance | <input type="checkbox"/> 16 ISO 17025: Testing & Calibration Lab        |
| <input type="checkbox"/> 8 OHSAS 18001               | <input type="checkbox"/> 17 ISO/TS 16949: Automotive Product Quality    |
| <input type="checkbox"/> 9 SA 8000: Social System    | <input type="checkbox"/> 18 ISO 18420: QMS Educational Organisation     |

**2. INDUSTRY EXPERIENCE** (please indicate a maximum of 4 fields of experience):

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> 01 Agriculture, Forestry & Fishing            | <input type="checkbox"/> 13 Hotels & Restaurants           | <input type="checkbox"/> 25 Printing & Publishing                               |
| <input type="checkbox"/> 02 Basic Metals & Fabricated Metal Product    | <input type="checkbox"/> 14 Healthcare Services            | <input type="checkbox"/> 26 Pharmaceuticals                                     |
| <input type="checkbox"/> 03 Construction                               | <input type="checkbox"/> 15 Information Technology         | <input type="checkbox"/> 27 Public Administration                               |
| <input type="checkbox"/> 04 Chemical, Chemical Products & Fibres       | <input type="checkbox"/> 16 Machinery & Equipment          | <input type="checkbox"/> 28 Real Estate & Asset Management                      |
| <input type="checkbox"/> 05 Concrete, Cement, Lime, Plaster            | <input type="checkbox"/> 17 Mining & Quarrying             | <input type="checkbox"/> 29 Rubber & Plastic Products                           |
| <input type="checkbox"/> 06 Education & Training                       | <input type="checkbox"/> 18 Non- Metallic mineral Products | <input type="checkbox"/> 30 Shipbuilding & Marine                               |
| <input type="checkbox"/> 07 Engineering Services                       | <input type="checkbox"/> 19 Nuclear & Radiation            | <input type="checkbox"/> 31 Textiles & Leather Products                         |
| <input type="checkbox"/> 08 Electronic, Electrical & Optical Equipment | <input type="checkbox"/> 20 Oil, Gas & Petroleum           | <input type="checkbox"/> 32 Transport, Storage & Communication                  |
| <input type="checkbox"/> 09 Electricity Supply                         | <input type="checkbox"/> 21 Other manufacturing            | <input type="checkbox"/> 33 Wood & Wood Products                                |
| <input type="checkbox"/> 10 Financial Services                         | <input type="checkbox"/> 22 Other Social Services          | <input type="checkbox"/> 34 Water Supply  |
| <input type="checkbox"/> 11 Food Products & Beverages                  | <input type="checkbox"/> 23 Other Services .....           | <input type="checkbox"/> 35 Wholesale & Retail Trade                            |
| <input type="checkbox"/> 12 Green Technology & Recycling               | <input type="checkbox"/> 24 Pulp & Paper Products          | <input type="checkbox"/> 36 Waste Disposal & Environmental Improvement Services |

**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**

NAME (Dr/Mr/Mrs/Ms) : \_\_\_\_\_

BUSINESS NAME AND ADDRESS:

\_\_\_\_\_

\_\_\_\_\_

RELATION WITH THE APPLICANT: \_\_\_\_\_

\_\_\_\_\_

H/P: \_\_\_\_\_ E-mail: \_\_\_\_\_

\_\_\_\_\_

SIGNATURE: \_\_\_\_\_

FAX: \_\_\_\_\_

\_\_\_\_\_

**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: \_\_\_\_\_