HOKLAS 018 Annex I – Scope of Accreditation Sought (for application for accreditation or extension of scope of accreditation only)

Specify as precisely as possible below the scope of accreditation sought. Please attach any relevant brochure usually sent to participants of the proficiency testing scheme. Please enter in the table below the test areas offered under the proficiency testing scheme

Name / Registration number of Proficiency Testing Provider (i.e. organisation running the scheme):

Address of Proficiency Testing Provider (i.e. organisation running the scheme):

| PROFICIENCY TESTING SCHEME AND ITEM | MEASURAND OR CHARACTERISTIC MEASURED e.g. Elements, frequency, strength | PROFICIENCY TESTING SCHEME PROCEDURE | FREQUENCY OF PROFICIENCY TESTING ROUND AND NUMBER OF PROFICIENCY TEST ITEM PER ROUND e.g. four times per year since 2016, 5 nos. of proficiency test items per round | | | | | |
|----------------------------------------|-------------------------------------------------------------------------------|-----------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|
| | | | test items per round | | | | | |
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Information of Externally Provided Products / Services

Please complete this chart for all external products / services providers with which the PT provider has arrangements for the production, testing, measurement, sampling, storage, and distribution of the proficiency test items (i.e. PT materials / samples or measurement artefacts), and for data processing.

| NAME OF PROVIDER | CONTACT INFORMATION (i.e. name of contact person, address and phone number) | DESCRIPTION OF ACTIVITY / SERVICE RENDERED | ACCREDITATION STATUS | ADDITIONAL COMMENTS |
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