

**Application form for admission to examination as
"2nd-party auditor VDA 6.2"**

Date of application _____ / _____ / _____

The managing directors or their representatives are the only persons who are authorized to apply for the participation of their auditors.

Details on the company

Name _____

Street _____

Postal code, place _____

State / country _____

Managing director/representative _____

Position / title _____

E-Mail address _____

Telephone and fax. _____

Details of applicant

Family name of the auditor _____

First name (and title) _____

Date of birth _____

Place of birth _____

Current business address of the auditor

Address _____

Place _____

Postal code _____

State _____

Country _____

Telephone _____

Fax _____

E-Mail address _____

Application form for admission to examination as "2nd-party auditor VDA 6.2"

(Please mark where appropriate and provide supporting documents)

Name: _____ First name: _____

Company: _____

1. Registration

By managing director or representative of the company for which the auditor is working

2. Proof of vocational training as QM auditor

- Qualification according to ISO 9001:2000 and ISO 19011 (EOQ training or equivalent)
- Auditor is certified or lead auditor of the automotive industry according to VDA 6.1, VDA 6.4 or ISO/TS 16949:2002

3. Proof of audit experience

- A minimum of 4 complete 2nd-party audits (minimum 10 days audit experience) as lead auditor for ISO 9001:2000, VDA 6.1, VDA 6.4 or ISO/TS 16949:2002
- Note: Audit experience as 1st-party auditor within the automotive industry can be considered.

4. Proof of vocational experience of the past five years

Please submit copies of work references / position descriptions

- Minimum of 2 years of industry experience in a service company which belongs to an industry sector with the scope of VDA 6.2
- The end of these 2 years must not have elapsed longer than 6 years ago.
- Of which a minimum of 2 year involved QM activities
- The QM activities can also be proven by a minimum of 10 system audits within service sectors or service organisations of this trade.

I herewith confirm that the details in the submitted documents are correct!

Date, name, signature applicant:

Date, name, signature managing director or representative

To be completed by VDA-QMC:

The applicant is admitted:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
The following missing or incomplete documents must be submitted as quickly as possible:		
Date:	Application examiner:	