|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Sheet-no.: |  | of |  | Sheets |

|  |  |
| --- | --- |
| Assessed test method/s:(if so, short title of the method) |  |
| [ ]  Standard method | [ ]  In house-method | Internal identification (SOP): |
| Parameter / Matrix: |  |
| Key method for[[1]](#footnote-1): |  |
| Testing personnel involved:(name, function) |  |
| Equipment:(e.g. manufacturer, type) |  |
| Equipment location: | Technical logbook available? [ ]  Yes [ ]  NoMaintenance book available? [ ]  Yes [ ]  No | G[[2]](#footnote-2) |
| Calibration: |  |  |
| Reference materials: |  |  |
| Internal quality control: |  |  |
| External quality control:(e.g. interlaboratory tests, proficiency tests, interlaboratory comparisions) |  |  |
| Validation / verification: |  |  |
| Traceability on the basis of a test order:(vertical assessment) |  |  |
| Traceability: |  |  |
| Handling and storage of samples: |  |  |
| Test report: |  |  |
| Archiving / data protection: |  |  |
| Comment: (if necessary, use the back side) |
|  | Signature[[3]](#footnote-3): |  |
| Place: |  | Date: |  | Name: |  |

1. Representatively for the following areas of the scopes / Annex to the Accreditation [↑](#footnote-ref-1)
2. Grading: **1 - No** non-conformity **2 - Non critical** non-conformity **3 - Critical** non-conformity [↑](#footnote-ref-2)
3. Fill in the name of the assessor irrespective if the form is used electronically or handwritten. [↑](#footnote-ref-3)