



MEMBERSHIP

APPLICATION FORM (AUDIT FIRMS)

MEMBERSHIP FORM - PRE-SCREEN QUESTIONS

In advance of applying for Membership with APSCA, we require that each Applicant review and answer the following pre-screen questions to ensure APSCA Membership is applicable to the firm or organization seeking membership.

Responses to pre-screen questions below must be written in the English language (unless otherwise stated). APSCA will disregard anything in any other language.

Does the Applicant currently conduct social compliance audits – i.e. is your organization already working / auditing within the social compliance industry?

Yes No

If 'No' we advise you schedule a call with our Member Services Manager via director@theapsca.org to discuss your situation.

Does the Applicant meet or comply with APSCA's Independence and Integrity clauses as per APSCA's Code – Section 2.0 Independence and Integrity (2.1; 2.1.1 - 2.1.4)?

Yes No

*If 'No' we advise you **DO NOT PROCEED** with this application. Challenges will arise during review of your application if your organization is unable to demonstrate independence.*

If 'Yes' please explain how your organization complies with APSCA's Code – Section 2.0 Independence and Integrity below.

If you are unsure regarding any of the above questions and / or responses, please contact director@theapsca.org for more clarification or to request a call with APSCA to assess whether membership with APSCA is right for you.

Has the Applicant previously applied for APSCA Membership?

Yes No

If 'Yes' state when (date) and describe the outcome / result of that application, and what changes have been made (if any) from when you last applied:

MEMBERSHIP APPLICATION FORM (AUDIT FIRMS)

Applications are open to audit firms conducting independent Social Compliance audits, provided they employ at least one APSCA Certified Social Compliance Auditor (CSCA). Firms may obtain Provisional APSCA membership for a period of up to twelve (12) months without an employed CSCA. If they employ at least one auditor who is able to be enrolled with APSCA at the Registered Level immediately upon acceptance as a Member by APSCA.

Using the numbering in this Membership Application Form, Applicants are to provide all the information specified with respect to their Social Compliance business. Kindly identify each attachment by reference to the item number to which it relates in the Application Form.

Applications (including all attachments) and subsequent correspondence and discussions must be written in the English language (unless otherwise stated). APSCA will disregard anything in any other language.

A legally-authorized signatory, hereinafter called the "Signatory", must sign and date the Application Form on behalf of the Applicant. The Signatory must clearly identify his / her full name, in [a] the English language if the Signatory has an English name, [b] the Signatory's legal name, using the official system used by the local government in the country of base of the Applicant's headquarters to transliterate the Signatory's name, if the country of base uses a writing system that does not use the Roman alphabet, and [c] the local language legal name of the Signatory. The Applicant should submit this Application Form along with all required supporting attachments to applications@theapsca.org.

Audit firms should read the APSCA Membership Information and documents referred to therein before preparing and submitting any Application to APSCA. The APSCA Membership Information includes descriptions of the three categories of APSCA membership for Audit Firms and application fees.

APSCA will not process an Application unless APSCA has received all requested information with required supporting documentation and has received payment of the Application Fee. Should the Applicant wish to schedule a site visit to review documentation in exchange for providing hard copies, this can be arranged with the additional cost being borne by the Applicant. The Application fee is not refundable under any circumstances, including if the Application is rejected.

In processing the Application, APSCA or any person acting on its behalf may request clarification or additional information or documentation from the Applicant or any other party. The processing of any Application may be delayed until APSCA receives any such clarification, information, or documentation.

By submitting the Application and any subsequent information to APSCA or anyone acting on behalf of APSCA, the Applicant warrants that it has obtained all necessary permissions for APSCA to receive and disseminate that information in confidence to its personnel and advisers. The Applicant shall indemnify and keep indemnified APSCA against any claim or loss arising from any breach of that warranty.

Notes / Instructions

Unless indicated otherwise:

- The application is to be completed on behalf of the organization's social compliance business.
- All questions are solely focused on that business and each question is specific to the organization unless otherwise indicated.
- The **Applicant** refers to the organization applying for APSCA Membership.
- All documents required in support of this application are to be numbered according to the relevant question in the application form. *Example: 8.3 ABC Firm Annual Report.pdf.*
- Any questions or fields that are not applicable, mark as N/A to note 'not applicable'. This indicates that the question was not missed.

Definitions

- **Social audits / social compliance audits** may be used interchangeably.
- **Audits** refers to social compliance audits unless otherwise specified.

SECTION 1 - APPLICANT DETAILS

Information and / or documents required to produce (if any of the below are not available, explain; failure to provide could delay and / or forfeit your application).

1.1 Applicant representative contact information

Name

Name of the company in any other language that it may be known

Telephone number (including country code)

Fax number (if available)

Email

1.2 Applicant trading name (name that will appear on APSCA website)

Provide a scanned copy or photo of trading name registration in local language, with English translation (if different from the legal name below) and official logo of company – electronic format - this will be used by APSCA and uploaded on the APSCA website, if approved.

1.3 Legal and / or registered name of Applicant (if different from the trading name stated above)

Provide a scanned copy or photo of trading name registration in local language, with English translation (if from the legal name below) and electronic scanned image of company stamp and / or 'chop'

1.4A Registered address (English)

Street Address

City / Town State / Province

Country Zip / Postal Code

1.4B Registered address (local language)

Street Address

City / Town State / Province

Country Zip / Postal Code

1.5A Operational address (English), if different to registered address above

Street Address

City / Town State / Province

Country Zip / Postal Code

1.5B Operational address (local language)

Street Address

City / Town State / Province

Country Zip / Postal Code

1.6 Telephone number

Note: If dialling this number from outside of the country requires that the caller dial a number that is different than appears here, Applicant must provide details.

Country Code City Code

Telephone Number Extension

1.7 E-mail addresses

All professional e-mail addresses used by the Applicant representative completing this Application.

Email 1

Email 2

Email 3

1.8 Website addresses

Website address for the Social Compliance auditing body of the Applicant. If applicable, website address of local organization / branches in which the Applicant operates.

Website

SECTION 2 - APPLICANT PARTICULARS

2.1 Legal status (e.g. corporation, partnership, unincorporated association)
Applicant's certificate of incorporation or registration (1.2 above) should make this clear

- Private Corporation (complete Schedule 1 & 2)* *Public Corporation (complete Schedule 1 & 2)*
 Partnership (complete Schedule 1 & 2) *Unincorporated Association (complete Schedule 1 & 2)*

2.2A Date(s) of incorporation (of a company / formation of a partnership etc).
Business license or other government documentation showing the relevant dates.

DD/MM/YYYY

2.2B Date(s) of registration of a business name, association etc.
Business license or other government documentation showing the relevant dates

DD/MM/YYYY

2.3 Country and State or Province (if applicable) of **incorporation / registration / domicile.**

If Applicant's certificate of incorporation or registration (1.2 above) does not show location of legal place of business, provide other government document that does.

2.4 All taxation and other government registration number necessary to carry on business in each jurisdiction the Applicant operates and other electronic tracking number(s) specific to the Applicant and its social compliance audit business including legal tax ID, business license number, VAT tracking number.

Provide a scanned copy or photo of official issue or use of each number in local language, with English translation (other than those provided above), specifying the type of business carried on by the Applicant.

2.5 Year the Applicant commenced conducting Social Compliance audits and name of the scheme and / or clients for which the Applicant first conducted audit(s).

Provide a copy of correspondence with relevant scheme or client confirming year of that first audit.

2.7 Name and domicile of any ultimate parent company / beneficial owner.

This includes the following:

- Companies that have any level of ownership / investment in the Applicant's organization.
- Companies in which the Applicant has level of ownership / investment.
- Companies that are identified in the public domain as strategic partners of the Applicant for any third-party auditing or consulting services, either inside or outside of the social compliance space.
- Government bodies or para-governmental bodies that, other than through promulgating regulations that apply to all organizations operating in that country or region, could influence managerial decisions.

One

Company / Firm / Entity

Domicile

Nature of Business

Two

Company / Firm / Entity

Domicile

Nature of Business

Provide a scanned copy or photo of government documentation, share / ownership registry, or financial or other report identifying that ultimate parent company / beneficial owner including a list of any shareholders holding more than 5% of its shares. If any of those shareholders are corporations, provide details of their ultimate parent companies / beneficial owners. Advise whether any of those shareholders have a commercial relationship with the Applicant or its related entities and, if so, specify how the Applicant manages potential conflicts of interest and ensure its independence in the carrying out of social compliance audits.

2.8A Name, domicile, and nature of business of any subsidiary companies, firms, or other entities controlled (legally, managerially or otherwise) by the Applicant.

(If more than one (1) organization fits this description, provide information on a separate attachment.)

Organization Name

Street Address

City / Town *State / Province*

Country *Zip / Postal Code*

Services Offered

Website

2.8B How is this organization controlled by the Applicant? e.g. Legal control but no direct management; directly managed and controlled; other?

Provide a scanned copy or photo of government documentation, share / ownership registry, or financial or other report.

2.8C Are any of the above subsidiaries excluded from this Application?

If Yes, which organizations are not considered and why? Name of organization(s) excluded and identify the reason.

Yes No

2.9 Name, business address, and residential address of all directors (If the Application is a corporation) or the management committee (in other cases).

Provide a scanned copy or photo of government documentation.

First Name Surname

Business Address:

Street Address

City / Town State / Province

Country Zip / Postal Code

Residential Address:

Street Address

City / Town State / Province

Country Zip / Postal Code

First Name Surname

Business Address:

Street Address

City / Town State / Province

Country Zip / Postal Code

Residential Address:

Street Address

City / Town State / Province

Country Zip / Postal Code

First Name Surname

Business Address:

Street Address

City / Town State / Province

Country Zip / Postal Code

Residential Address:

Street Address

City / Town State / Province

Country Zip / Postal Code

First Name Surname

Business Address:

Street Address

City / Town State / Province

Country Zip / Postal Code

Residential Address:

Street Address

City / Town State / Province

Country Zip / Postal Code

First Name Surname

Business Address:

Street Address

City / Town State / Province

Country Zip / Postal Code

Residential Address:

Street Address

City / Town State / Province

Country Zip / Postal Code

2.10 Names and business addresses of any legal representatives of the Applicant (other than directors or managers named in 2.9)

Provide a scanned copy or photo of government documentation.

First Name Surname

Business Address:

Street Address

City / Town State / Province

Country Zip / Postal Code

First Name Surname

Business Address:

Street Address

City / Town State / Province

Country Zip / Postal Code

First Name Surname

Business Address:

Street Address

City / Town State / Province

Country Zip / Postal Code

First Name Surname

Business Address:

Street Address

City / Town State / Province

Country Zip / Postal Code

First Name Surname

Business Address:

Street Address

City / Town State / Province

Country Zip / Postal Code

SECTION 3 - CONTACT INFORMATION

To receive all formal notices and communications from APSCA.

3.1 Primary Contact

Name

Position

Street Address

City / Town State / Province

Country Zip / Postal Code

Work Telephone number (including country code)

Mobile / Cell number (including country code)

Email

3.2 Finance Contact (if different to above)

Name

Position

Street Address

City / Town State / Province

Country Zip / Postal Code

Work Telephone number (including country code)

Mobile / Cell number (including country code)

Email

SECTION 4 - CONFLICTS OF INTEREST

4.1 Does the Applicant have any business links or affiliations (commercial or otherwise) with other commercial entities, government bodies, or Non-Government Organizations / Civil Society Groups and / or organizations?

This includes the following:

- Companies that have any level of ownership / investment in the Applicant's organization.
- Companies in which the Applicant has level of ownership / investment.
- Companies that are identified in the public domain as strategic partners of the Applicant for any third-party auditing or consulting services, either inside or outside of the social compliance space.
- Government bodies or para-governmental bodies that, other than through promulgating regulations that apply to all organizations operating in that country or region, could influence managerial decisions.

No Yes (If yes, name the entities and relationships)

4.2 Is the Applicant an independent third-party organization?

No Yes (If yes, provide details)

4.3 Has the Applicant conducted any social compliance audits that are not independent and seen to be impartial according to the APSCA Code of Professional Conduct?

No Yes (If yes, provide details)

4.4 Does any organization that the Applicant audits have an ownership interest or management involvement in the Applicant or any related entity?

No Yes

If yes, provide details. Explain why the Applicant believes the audits are independent and how the Applicant ensures there are no perceived risks of it having conflicts of interests.

4.5 Does any government or government agency have any ownership interest or management involvement in the Applicant or any related entity?

This includes government bodies or para-governmental bodies that, other than through promulgating regulations that apply to all organizations operating in that country or region, could influence managerial decisions.

No Yes

If Yes, provide details including specifying the government. Explain why the Applicant believes the audits are independent and how the Applicant ensure there are no perceived risks of it having conflicts of interest.

4.6 Provide the organizational management structure of the Applicant, including lines of authority and responsibility.

Attached

SECTION 5 - MANAGEMENT SYSTEM – CONFLICT OF INTEREST, INDEPENDENCE & IMPARTIALITY

5.1A Attach the policy and describe the process followed if there is a request to conduct a third-party social compliance audit at a site for which the Applicant has previously provided consulting work advising the site of policies, procedures, or anything else necessary to comply with a social compliance audit, so that the Applicant would be effectively auditing work it had previously performed.

Attached

5.1B Describe the services the Applicant offers a client who could be the subject of a social compliance audit in the future and wishes to ensure its management system to would comply with a social compliance audit.

5.1C(i) Describe how the Applicant managed an incident when one of its staff connected with the audit process (e.g. involved in sales, scheduling, performing the audit, reviewing and / or finalizing the audit results / report) had a personal friendship or other relationship with the point of contact at a facility being audited or to be consulted, or with a vendor, agency, intermediary, or other party associated with the site.

5.1C(ii) Describe how the Applicant managed an incident when one of its staff connected with the audit process (e.g. involved in sales, scheduling, performing the audit, reviewing and / or finalizing the audit results / report) was threatened and / or otherwise coerced to deliver a service or publish particular audit results.

5.2 Describe the ongoing process to:

- Identify
- Analyze
- Evaluate
- Monitor
- Document

The risk to impartiality arising from auditing activities? This includes any conflict arising from firm relationships or relationship of personnel.

SECTION 6 - FINANCIALS

6.1 Business capital (state the currency) If a corporation, issued share capital.

Amount

Currency

6.2 Provide the following:

- Recent financial statement or taxation return.
- Current financial statement reviewed or audited by an external auditor demonstrating: identifying revenue and costs (fixed and variable) specifying each attributable to conducting independent Social Compliance audits.

Attached

SECTION 7 - STAFF AND COMPETENCE

7.1 Total number of employees

7.2 Number of full-time employed Social Compliance auditors who are either a CSCA or at the Registered Level (e.g. eligible to sit the CSCA exam).

For the definition of the different levels of 'Social Compliance auditors', refer to APSCA's Competency Framework pages 4 - 5.

7.2A Do you have employed RA / CSCA auditors that you intend on enrolling following the application and membership process?

If you do not have an existing enrolled RA / CSCA auditor(s) at this time, but have one who meets the criteria, please also list below (note the APSCA Member Number will not be required in these instances).

No Yes

If Yes, provide auditor details below (including the Auditor's APSCA Member Number if available). List at least 1 or up to 8 auditors who meet the criteria.

First Name Surname

APSCA Member Number

First Name Surname

APSCA Member Number

First Name Surname

APSCA Member Number

First Name Surname

APSCA Member Number

First Name Surname

APSCA Member Number

First Name Surname

APSCA Member Number

First Name Surname

APSCA Member Number

First Name Surname

APSCA Member Number

7.3 Number of part-time employed Social Compliance auditors who are either a CSCA or at the Registered Level (e.g. eligible to sit the CSCA exam).

7.4 Number of subcontractor / freelance Social Compliance auditors.

7.5 Number of consultants or contractors used for Social Compliance auditing.

SECTION 8 - SCOPE OF BUSINESS

8.1 Brief description (less than 200 words) of the Applicant and its business:

8.2 Reason why the Applicant is applying for APSCA membership (less than 50 words). This may include a quote accredited to an officer or manager.

8.3 Attach the most recent Annual Report issued by the business or any group or organisation which part of (as applicable).

Attached

8.4 The countries, states or provinces, or cities business conducts Social Compliance audits.

8.5 Any Social Compliance related business, such as training or consulting, conducted by the Applicant, provide details.

8.6 Any business activities of the Applicant other than conducting independent Social Compliance audits, specifying any public websites or documents referring to those activities.

8.7 Approximate Number of Social Compliance audits the Applicant conducted in the previous calendar year. If the Applicant did not complete a full year, state the approximate number of audits and the period (months) over which it has conducted them.

- | | |
|---|---|
| <input type="checkbox"/> <i>Less than 50</i> | <input type="checkbox"/> <i>50 -100</i> |
| <input type="checkbox"/> <i>101 - 500</i> | <input type="checkbox"/> <i>501 - 1,000</i> |
| <input type="checkbox"/> <i>1,001 - 5,000</i> | <input type="checkbox"/> <i>Greater than 5000</i> |

Period

SECTION 9 - REFERENCES

9.1 List between five - ten brand / retailers, initiatives / schemes, and others on whose behalf the Applicant (and not merely individual auditors employed by the Applicant) is approved to conduct Social Compliance audits in respect of which the Applicant conducted the most Social Compliance audits in the last calendar year, along with any more the Applicant wishes to bring to APSCA's attention in considering this Application Specify the date / year each approval was given.

Provide information (including website where applicable) evidence of each approval listed, which may include direct link to website indicating the Applicant's approval, or the name, email address and telephone number of a contact person at each organization.

For Schemes and Initiatives: List of Social Compliance initiatives recognition and accreditation e.g. but not limited to:

- BSCI / amfori
- SA8000 / SAAS
- Sedex / SMETA
- WRAP
- RBA / EICC
- Ethical Toys / ICTI Care
- The Coca Cola Company
- McDonald's
- Unilever

Please note APSCA requires responses from at least 3 - 5 references. Often references do not respond, and we need to expand who we contact. Obtaining references can often hold up the application process. APSCA recommend you notify your references of our potential contact.

| | | | |
|-------------------------|----------------------|----------------------|----------------------|
| <i>Brand / Retailer</i> | <input type="text"/> | <i>Approval Date</i> | <input type="text"/> |
| <i>Website</i> | <input type="text"/> | | |
| <i>Contact Person</i> | <input type="text"/> | | |
| <i>Email</i> | <input type="text"/> | | |
| | | | |
| <i>Brand / Retailer</i> | <input type="text"/> | <i>Approval Date</i> | <input type="text"/> |
| <i>Website</i> | <input type="text"/> | | |
| <i>Contact Person</i> | <input type="text"/> | | |
| <i>Email</i> | <input type="text"/> | | |
| | | | |
| <i>Brand / Retailer</i> | <input type="text"/> | <i>Approval Date</i> | <input type="text"/> |
| <i>Website</i> | <input type="text"/> | | |
| <i>Contact Person</i> | <input type="text"/> | | |
| <i>Email</i> | <input type="text"/> | | |
| | | | |
| <i>Brand / Retailer</i> | <input type="text"/> | <i>Approval Date</i> | <input type="text"/> |
| <i>Website</i> | <input type="text"/> | | |
| <i>Contact Person</i> | <input type="text"/> | | |
| <i>Email</i> | <input type="text"/> | | |

Brand / Retailer Approval Date

Website

Contact Person

Email

Brand / Retailer Approval Date

Website

Contact Person

Email

Brand / Retailer Approval Date

Website

Contact Person

Email

Brand / Retailer Approval Date

Website

Contact Person

Email

Brand / Retailer Approval Date

Website

Contact Person

Email

Brand / Retailer Approval Date

Website

Contact Person

Email

Brand / Retailer Approval Date

Website

Contact Person

Email

9.2 Does the Applicant conduct other types of audits which may include elements of social compliance in the scope and where social compliance auditors are utilized (e.g. Global Gap, ASC, SCAN)?

No Yes

If Yes, provide details below.

9.3 Does the Applicant conduct audits which are not connected with social compliance however use (fully or partially) social compliance auditors (e.g. ISO 9001, ISO 14001, Green building, product certification)?

No Yes

If Yes, provide details below.

9.4 Specify the % of audits conducted within the following categories.

Social Compliance Audits

Audits with elements of Social Compliance

Non-Social Compliance audits but use Social Compliance Auditors

9.5 APSCA may contact those noted above and others on whose behalf the Applicant has conducted or is currently conducting Social Compliance audits to validate information received.

Note: If APSCA is not permitted by the Applicant to contact references provided, your application cannot proceed further. Advise below if there is a reason APSCA cannot contact an organization or others listed above.

SECTION 10 - MANAGEMENT SYSTEMS

10.1 Is the Applicant certified to any international standard(s) for management systems such as ISO 9001, ISO 14001, ISO 45001, ISO 27001 or ISO 37001?

No Yes (attach copies of all current certifications / compliance statements)

10.2 Is the Applicant accredited or recognized to any international standard(s) / practices for the delivery professional audit, testing and inspection services, such as:

- ISO/IEC 17020, ISO/IEC 17021, ISO/IEC 17025 or ISO/IEC 17065
- Saas Accreditation (for delivering SA8000 certification audits)
- Others included industry specific accreditation standards focus on the ability of the organization to deliver independent third-party audit activities

No Yes (attach copies of all current certifications / compliance statements)

10.3 Attached copies of the policies and procedures which demonstrates the Applicant complies with APSCA's Code and Standards of Professional Conduct and foundational skills and functional knowledge areas within the Competence Framework.

The headings of each item, skills and knowledge are set out below. Applicants should refer to APSCA's Code and Standards of Professional Conduct and Competency Framework for details.

Explain how a policy or procedure (citing relevant sections and page numbers) satisfies each item of APSCA's Code and Standards of Professional Conduct.

Note: If a visit/ call is preferred this can be organized, additional fees may apply.

Code Topic

Integrity

- Due diligence to evaluate and manage integrity risk
- Grievance Mechanism
- Internal audit and integrity audits on auditors

Description of Management Systems

Code Topic

Conflict of Interest

Description of Management Systems

Code Topic

Impartiality / Independence

Description of Management Systems

Code Topic

Corruption and Bribery / Ethics & Integrity

- Investigation procedure with independent investigation team

Description of Management Systems

Code Topic

Confidentiality

Description of Management Systems

Code Topic

Competence

Description of Management Systems

Code Topic

Reporting and Records

Description of Management Systems

Note: Ensure you include the section / page number for each of the above to support the review process

- 10.4 Describe an incident within the last two years in respect of each of the headings in APSCA's Code of Professional Conduct and how the Applicant managed it.**

- 10.5 Attach copies of any other policies or procedures of the Applicant which relates to the carrying out of social compliance audits.**

Attached

- 10.6 Describe any material or recurring incidents of the Applicant's personnel within Social Compliance breaching any policies or procedures and the Applicant's responses to them.**

SECTION 11 - INSURANCES

11.1 Does the Applicant maintain professional indemnity / liability insurance?

No Yes (attach a copy of the Certificate of Currency)

If no, what is the capacity to pay claims for breaches of its professional and legal obligations?

11.2 Is the policy a "claims made" policy?

No Yes

If Yes, what arrangements are in place to response to claims made after the current policy term?

11.3 What activities are covered by the policy?

11.4 What is the limit of liability, per claim and in total?

11.5 What is the name of the underwriter?

11.6 What is the name of the insurance broker?

11.7 Was a risk assessment analysis carried out to determine the level of insurance?

No Yes (describe the type of risk assessment below)

11.8 Was an application for professional indemnity / liability insurance refused or accepted upon conditions?

No Yes (provide details below)

SECTION 12 - COMPLAINTS / LITIGATION

12.1 At any time, has the Applicant, its owners, officers, managers, or social compliance auditors been subject, either professionally or personally, to any:

12.1A Formal complaints or disputes (including litigation or arbitration)?

No Yes (provide details below)

12.1B Internal business investigation (including that at any businesses other than the Applicant and including any following a complaint of harassment)?

No Yes (provide details below)

12.1C Statutory or other government investigation or prosecution for an offence related to the management of a company, professional firm, or business?

No Yes (provide details below)

12.1D Personal prohibition or restriction from acting as a company officer?

No Yes (provide details below)

12.1E Suspension or other disciplinary action from a professional body or association?

No Yes (provide details below)

12.1F Complaint from the International Labour Organization, International Labor Rights Forum, or similar bodies?

No Yes (provide details below)

12.2 Has the Applicant, its owners, officers, managers, or Social Compliance auditors (or their spouses) been subject, either professionally or personally, to:

12.2A Police investigation or prosecution for the committing of a criminal offence

No Yes (provide details below)

12.2B Conviction by a court of law or equivalent tribunal for a criminal offence?

No Yes (provide details below)

12.3 Has the Applicant, its owners, officers, manager, or Social Compliance auditors been personally restricted or prohibited by any governmental or judicial act from carrying on business or working in any country or other jurisdiction?

No Yes (provide details below)

PERSONAL DECLARATION

Accompanying the Application should be a statutory declaration (or its equivalent in the Applicant's domicile) by a senior executive of the Applicant or by the person named above as the Applicant's primary contact for APSCA in the following terms:

- I certify that the Applicant has authorized me to make this declaration on its behalf.
- After making all necessary inquiries, I certify that all information provided in this Application (including attachments) is true and accurate, and not misleading in any material respect.

If there is no such statutory declaration attached, then the signatory to this Application (on the Applicant's behalf) by signing this Application and submitting it to APSCA makes the above declaration. APSCA may at any time after receiving this Application (including any time after awarding APSCA membership to the Applicant) require the Applicant to submit such a statutory declaration.

APPLICANT'S DECLARATION

By signing this Application and submitting it to APSCA:

- The Applicant declares that the Applicant has not withheld any information from this Application that, if known to APSCA, could be reasonably foreseen to cause APSCA to refuse to grant the Applicant membership.
- The Applicant undertakes to provide true, complete, and accurate answers not misleading in any material respects to all requests from APSCA (or anyone acting on APSCA's behalf) for information or clarification about the Applicant, this Application (including attachments), or the conduct of its Social Compliance audits.
- If, at any time, the Applicant learns that any information supplied within this Application (including attachments) or in response to any requests for further information or clarification from APSCA or anyone acting on APSCA's behalf is false or misleading, then it shall immediately inform APSCA.
- The Applicant acknowledges that if any information within this Application (including attachments) or supplied in response to any requests for further information or clarification from APSCA or anyone acting on APSCA's behalf is found to be false or misleading in any material respect, APSCA may decline the Application or revoke the Applicant's Membership of APSCA, without claim for compensation.
- The Applicant acknowledges that APSCA may carry out or obtain the carrying out of background checks to verify any or all information provided in this Application (including attachments).
- The Applicant declares that it:
 - is a fit and proper audit firm to be a member of APSCA;
 - is a fit and proper audit firm to carry out Social Compliance audits on behalf of a brand/ retailer, initiative/ scheme, and others; and
 - has not committed any actions or omissions in the conduct of its Social Compliance audit business and in all other respects that would bring APSCA into disrepute in any way or may reasonably be likely to do so.
- The Applicant warrants that it can pay its debts as and when they fall due, including (whether through insurances or other financial resources) meeting the costs of any claims reasonably foreseeable to be made against it.
- From the date hereof and for as long as the Applicant is a member of APSCA, subject to the terms of any Provisional Membership, the Applicant undertakes to comply with APSCA's Confidentiality Framework Agreement, Code of Professional Conduct, Anti-Trust Compliance Policy, and By-Laws (as amended or replaced from time to time).
- Within three months of being awarded provisional membership of APSCA, the Applicant undertakes to amend and/or add to its policies and procedures how they have implemented adherence to APSCA's Code and Standards of Professional Conduct.
- For as long as the Applicant is a member of APSCA and subject to the terms of any Provisional Membership, the Applicant undertakes to maintain the Foundational Skills and conduct audits of the Functional Knowledge Areas set out in the APSCA Competency Framework.
- The Applicant acknowledges that APSCA may withdraw, suspend, or terminate any Application or Membership (Provisional or Full) if the Application for Membership (including attachments) is found to have contained any material errors or omissions or to have been misleading in any material way.

- The Applicant acknowledges that APSCA may run background checks to verify any part of the information provided in this Application (including attachments).
- The Applicant (and signatory personally) consents to APSCA retaining and storing information about the Applicant (and signatory) as required to verify the answers in this Application, manage the Applicant's profile, and monitor the Applicant's ongoing compliance with APSCA's Code and Standards of Professional Conduct, Confidentiality Framework Agreement, Anit-Trust Compliance Policy, and By-Laws (as amended or replaced from time to time).
- For as long as the Applicant is a member of APSCA and subject to the terms of any Provisional Membership, the Applicant undertakes to maintain the Foundational Skills and conduct audits of the Foundational Knowledge Areas set out in the APSCA Competency Framework.
- The Applicant acknowledges that APSCA may withdraw, suspend, or terminate any Application or Membership (Provisional or Full) if the Application for Membership (including attachments) is found to have contained any material errors or omissions or to have been misleading in any material way.
- The Applicant acknowledges that APSCA may run background checks to verify any part of the information provided in this Application (including attachments).

Date of Declaration

Signed For and On Behalf of the Applicant by its Duly Authorized Representative:

*Authorized
Signature*

Date

Print Full Name

Position / Title

Applicant Name

Please save the completed form and return with all relevant attachments to applications@theapsca.org



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SOCIAL COMPLIANCE AUDITORS

