



ASSESSOR APPLICATION FORM

1.0 Application Process:

- 1.1 This form is applicable to express interest for all types of BAB accreditation schemes.
- 1.2 Complete and submit this form with an updated resume that details Conformity Assessment experience. Reviews of the application along with resume and supporting evidence of his/her qualifications will be done, to determine suitability.
- 1.3 The entire package will be reviewed, and a reference check completed.
- 1.4 If it is deemed that the applicant has appropriate experience in the desired field of expertise, the applicant will be provisionally enlisted in the BAB Assessor pool.
- 1.5 Note that successful completion of all of the above steps in itself does not guarantee acceptance as an assessor. BAB preserves the right to take any decision regarding BAB Assessor.

2.0 Basic Information

- 2.1 Name: _____
- 2.2 Designation: _____
- 2.3 Organization: _____
- 2.4 Contact Address: Office: _____
Personal: _____
- 2.5 Phone & Mobile: Office: _____
Personal: _____
- 2.6 Email: Office: _____
Personal: _____

3.0 Qualifications

3.1 Education: (latest first)

Degree	Institution	Passing Year	Result	Remarks

3.2 Experiences: (latest first)

Position	Organization	Duration	Major Job Responsibility

3.3 Training

Title of Training	Duration	Provider	Place	Remarks



3.4 Language skill:

Language	Reading <small>Good/ Average/ Below average</small>	Writing <small>Good/ Average/ Below average</small>	Speaking <small>Good/ Average/ Below average</small>	Listening <small>Good/ Average/ Below average</small>
Bengali				
English				
Other				

4.0 Field of Expertise (please fill up following tables as appropriate; unused table(s) can be deleted)

Table 1

<input type="checkbox"/> Testing (ISO/IEC 17025):		Duration of Expertise (in year)	Sub-field / Specific parameter of test
<input type="checkbox"/>	Chemical Testing		
<input type="checkbox"/>	Food Testing		
<input type="checkbox"/>	Biological Testing		
<input type="checkbox"/>	Microbiological Testing		
<input type="checkbox"/>	Textile Testing		
<input type="checkbox"/>	Water Testing		
<input type="checkbox"/>	Environmental Testing		
<input type="checkbox"/>	Construction Material Testing		
<input type="checkbox"/>	Physical Testing		
<input type="checkbox"/>	Electro-technical Testing		
<input type="checkbox"/>	Forensic Testing		
<input type="checkbox"/>	Mechanical Testing		
<input type="checkbox"/>	Veterinary Testing		
<input type="checkbox"/>	Other Testing field (please clearly specify here; use spaces as required)		

Table 2

<input type="checkbox"/> Calibration (ISO/IEC 17025):		Duration of Expertise (in year)	Sub-field / Specific parameter of calibration
<input type="checkbox"/>	Mass Measurement		
<input type="checkbox"/>	Length & Dimension Measurement		
<input type="checkbox"/>	Temperature Measurement		
<input type="checkbox"/>	Force and Pressure Measurement		
<input type="checkbox"/>	Volume, Viscosity and Density		



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	Measurement		
<input type="checkbox"/>	Electrical, Time & Frequency Measurement		
<input type="checkbox"/>	Other Calibration field (please clearly specify here; use spaces as required)		

Table 3

<input type="checkbox"/> Medical Testing (ISO 15189):	Duration of Expertise (in year)	Sub-field / Specific parameter of test
<input type="checkbox"/> Clinical Biochemistry		
<input type="checkbox"/> Clinical Pathology		
<input type="checkbox"/> Clinical Microbiology		
<input type="checkbox"/> Serology & Immunology		
<input type="checkbox"/> Haematology & Immunohaematology		
<input type="checkbox"/> Histopathology		
<input type="checkbox"/> Cytopathology		
<input type="checkbox"/> Genetics		
<input type="checkbox"/> Nuclear Medicine		
<input type="checkbox"/> Other Testing field (please clearly specify here; use spaces as required)		

Table 4

<input type="checkbox"/> Inspection (ISO/IEC 17020):	Duration of Expertise (in year)	Sub-field / Specific parameter
<input type="checkbox"/> Manufacturing Inspection		
<input type="checkbox"/> Installation, Design & Development Inspection		
<input type="checkbox"/> Pre & Post Shipment Inspection (PSI)		
<input type="checkbox"/> Boiler Inspection		
<input type="checkbox"/> Food Inspection		
<input type="checkbox"/> Construction Inspection		
<input type="checkbox"/> Petroleum, Gas & Mining		
<input type="checkbox"/> Chemical		
<input type="checkbox"/> Other Inspection field (please clearly specify here; use spaces as required)		

Table 5

<input type="checkbox"/> Management System Certification (ISO/IEC 17021):	Duration of Expertise	Sub-field / Specific parameter



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	(in year)	
<input type="checkbox"/> Quality		
<input type="checkbox"/> Environmental		
<input type="checkbox"/> Occupational Health & Safety		
<input type="checkbox"/> Food Safety		
<input type="checkbox"/> Information Security		
<input type="checkbox"/> Energy		
<input type="checkbox"/> IT		
<input type="checkbox"/> Automotive		
<input type="checkbox"/> Other Certification field (please clearly specify here; use spaces as required)		

5.0 Referees: (please include details of at least two referees)

Name & Designation	Organization	Contact Address with Mobile & Email	Remarks

6.0 Enclosures of Supporting Documentation:

- Updated Resume
- Certificates of Educational Qualifications
- Certificates of Professional Qualifications
- Relevant Training Certificates

I hereby declare all information/ supporting documents provided herein are true/authentic to the best of my knowledge.

Signature of applicant

_____/_____/_____
Date of Application

For BAB Use Only	
Date of Receipt	
Enclosure of supporting documents	Yes/No
Remarks	
Signature	

Please return filled in form to info@bab.org.bd or send by post to the following address:

Bangladesh Accreditation Board (BAB)
Assessor & Training Division
91, Motijheel C/A, (5th Floor), Dhaka-1000