



ARCS
INTERNATIONAL
ASSESSOR REGISTRATION &
CERTIFICATION SCHEME

**INTERNATIONAL ASSESSOR REGISTRATION AND
CERTIFICATION (ARCS) SCHEME**

**Assessor Registration and Certification
Application Form**

Table of Contents

1. ASSESSOR REGISTRATION OR CERTIFICATION	2
2. CONTACT DETAILS	3
3. DECLARATION	4
4. APPLICANT SPONSORS	5
5. INDUSTRY EXPERIENCE.....	6
6. EDUCATION AND TRAINING	7
7. MEMBERSHIP OF PROFESSIONAL BODIES	8
8. PRESENT POSITION	9
9. CODE OF CONDUCT	11
10. WORK EXPERIENCE.....	12
11. ASSESSMENT LOGS	13
12. FEES.....	14
13. REVISION HISTORY	15

PLEASE READ ALL NOTES

-) Supply all the information requested in this form
-) This form must be completed in full, however additional information supporting the application may be appended or attached
-) Copies of qualifications and assessor training certificates must be attached to this application
-) Work experience must be verified by the sponsor

FORWARD THIS APPLICATION TO

Director of Certification

At the address provided on the web site

1. ASSESSOR REGISTRATION OR CERTIFICATION

I apply for registration or certification with the

International Assessor Registration and Certification Scheme (ARCS)

Please select the grade

- Registered Assessor
- Certified Assessor
- Certified Lead Assessor
- Certified Principal Assessor

If renewal, please fill in your current Assessor ID _____

2. CONTACT DETAILS

Family Name:	First Name
Initials: Title:	Date of Birth: (yyyy-mm-dd)
LinkedIn URL:	
Private Address	Business Address
.....
.....
.....
.....
.....
Postcode/Zip.....	Postcode/Zip.....
Country	Country
Phone: +.....	Phone: +.....
Email:	Email:

3. DECLARATION

I have read and agree to abide by the Code of Conduct. (mandatory)

I declare that the information provided is correct to the best of my knowledge. (mandatory)

I agree to the publication of my first name, family name, country, and certification details (assessor grade and registered models) to be included in any assessor directory listing on the ARCS web site. (optional)

I agree to the publication of my LinkedIn URL (if provided) to be included in any assessor directory listing on the ARCS web site, so I may be contacted by third parties (your email address will never be shared). (optional)

I agree to inclusion of my email address on the ARCS / SPICE User Group mailing list. I understand that I may unsubscribe at any time. (mandatory)

Date:

Signature of Applicant:

4. APPLICANT SPONSORS

Each applicant shall be sponsored by either their employer or by **two other** people who have a business relationship with the applicant.

Sponsors are responsible for providing independent verification of the information contained in this application. In doing so, sponsors are requested to:

1. Ensure that the information contained in the application detailing work experience of the applicant is accurate
2. Only sponsor an applicant where information can be verified from personal knowledge or where objective evidence has been reviewed

APPLICANT SPONSOR	APPLICANT SPONSOR
Full Name:	Full Name:
Relationship to applicant:	Relationship to applicant:
Business Name and Address	Business Name and Address
Postcode/Zip.....	Postcode/Zip.....
Country	Country
Phone: +.....	Phone: +.....
Email:	Email:

5. INDUSTRY EXPERIENCE

The industry fields selected must correspond with verified work and assessment experience included in this application.

Mark the appropriate fields			Mark the appropriate fields			Mark the appropriate fields		
<input type="checkbox"/>	00	Other	<input type="checkbox"/>	10	Finance (excluding banking)	<input type="checkbox"/>	20	Public utilities (gas, water. Electricity)
<input type="checkbox"/>	01	Aerospace	<input type="checkbox"/>	11	Health and pharmaceutical	<input type="checkbox"/>	21	Research
<input type="checkbox"/>	02	Automotive	<input type="checkbox"/>	12	Information Technology / software	<input type="checkbox"/>	22	Retail
<input type="checkbox"/>	03	Banking	<input type="checkbox"/>	13	Insurance	<input type="checkbox"/>	23	Robotics / Artificial intelligence
<input type="checkbox"/>	04	Construction	<input type="checkbox"/>	14	Leisure and tourism	<input type="checkbox"/>	24	Space
<input type="checkbox"/>	05	Consumer goods	<input type="checkbox"/>	15	Manufacturing	<input type="checkbox"/>	25	Telecommunications
<input type="checkbox"/>	06	Defence	<input type="checkbox"/>	16	Media (television, radio)	<input type="checkbox"/>	26	Travel
<input type="checkbox"/>	07	Distribution/logistics	<input type="checkbox"/>	17	Medical Devices		27	
<input type="checkbox"/>	08	Education	<input type="checkbox"/>	18	Petroleum		28	
<input type="checkbox"/>	09	Enterprise systems	<input type="checkbox"/>	19	Public administration		29	

8. PRESENT POSITION

Name of Employer:

Department/Business unit:

Title of your position:

Person you are reporting to:

9. CODE OF CONDUCT

By signing the application declaration the applicant agrees to abide by the Code of Conduct and shall:

1. Exercise honesty, objectivity, and diligence in the performance of their duties and responsibilities.
2. Exhibit loyalty in all matters pertaining to the affairs of their organization or to whomever they may be rendering a service. However, they shall not knowingly be party to any illegal or improper activity.
3. Not engage in acts or activities that are discreditable to their profession or their organization.
4. Refrain from entering any activity that may be in conflict with the interest of their organization or would prejudice their ability to carry out objectively their duties and responsibilities.
5. Not accept anything of value from an employee, client, customer, supplier, or business associate of their organization that would impair or be presumed to impair their professional judgment and integrity.
6. Undertake only those services that they can reasonably expect to complete with professional competence.
7. Be prudent in the use of information acquired in the course of their duties. They shall not use confidential information for any personal gain nor in any manner that would be contrary to law or detrimental to the welfare of their organization.
8. Reveal all material facts known to them that, if not revealed, could either distort reports of operation under review or conceal unlawful practices.
9. Continually strive for improvement in their proficiency, and in the effectiveness and quality of their service.
10. In the practice of their profession, shall be ever mindful of their obligation to maintain the high standards of competence, morality, and dignity promulgated by this code of ethics.
11. Maintain and improve their professional competency through continuing education.
12. Cooperate in the development and interchange of knowledge for mutual professional benefit.
13. Maintain high personal standards of moral responsibility, character, and business integrity.
14. Not to act in any way that would prejudice the reputation of INT-ACS or the assessor certification process and to cooperate fully with any enquiry in the event of any alleged breach in this code

10. WORK EXPERIENCE

Please supply a short curriculum vitae that contains for each employer/position

-) Dates (from/to)
-) Employer (name, location, country)
-) Job role
-) Summary responsibilities

11. ASSESSMENT LOGS

Please supply assessor logs to support your assessment experience

An assessor log template can be downloaded from the ARCS web site.

12. FEES

Do not send any fees with your application.

13. REVISION HISTORY

Version	Section	Change summary
1.0 2018-06-01		Published