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**GSTC Accreditation Application Form**

**v1.0**

Approved by: Assurance Director

Date of Approval: 30 September 2023

1. **GENERAL INFORMATION**

| **1.1 The official name under which the applicant Certification Body (hereinafter referred to as the "applicant CB") is legally registered, including any trade or commercial name if applicable.** | | | |
| --- | --- | --- | --- |
| Legal name of the applicant CB: | | | |
| Commercial or trading name of the applicant CB: | | | |

| **1.2 If the applicant CB has a parent company, please provide the legally registered name and any trading or commercial name of the parent company. If not applicable, simply state "Not applicable."** | |
| --- | --- |
| Legal name of the mother company:  Commercial or trading name of the mother company: | |

| **1.3 Please provide details regarding the legal status of the applicant CB. Additionally, ensure you include evidence of the applicant CB's legal status, such as a certificate of registration or an extract from the commercial register, when submitting this application.** | |
| --- | --- |
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| **1.4 Is the applicant CB affiliated with a government entity (e.g., government agency, government institution, government-appointed body, etc.)?** | |
| --- | --- |
| ☐ No. | |
| ☐ Yes. Please explain the relationship: | |

| **1.5 Ownership Description:**  *Kindly provide a breakdown of the ownership structure of the applicant CB, indicating approximate ownership percentages.* | |
| --- | --- |
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| **1.6 Head Office Address:**  *The Head Office (HO) refers to the organizational unit or office designated as the primary or central office by the top management of the applicant CB.* | |
| --- | --- |
| Street:  Zip/Postal Code:  City:  Country:  E-mail:  Telephone:  Website: | |

| **1.7 Billing address if different from the address in section 1.6:** | |
| --- | --- |
| Street:  Zip/Postal Code:  City:  Country:  E-mail:  Telephone:  Website: | |

| **1.8 VAT Number** | |
| --- | --- |
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1. **APPLICANT CB DETAILS**

| **2.1 Name of the Legal Representative:** | |
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| **2.2 Name of the Chief Executive Officer (CEO):** | |
| --- | --- |
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| **2.3 Contact Person Information:**  *GSTC will direct all correspondence related to this application to the designated contact person.* | |
| --- | --- |
| Name:  Title:  Phone:  E-mail: | |

| **2.4 Is the applicant CB affiliated with foreign entities or subsidiaries?** | |
| --- | --- |
| ☐ No *(proceed to question 2.5)*  ☐ Yes *(answer questions 2.4.1 – 2.4.4)* | |
|
| **2.4.1 Please describe the nature of the relationship between the applicant CB and these foreign entities or subsidiaries.** | |
| **2.4.2 Do any of these entities or subsidiaries engage in Key Certification Activities? If so, please specify which activities.** | |
| **2.4.3 Provide details on the applicant CB's procedures for overseeing Key Certification Activities undertaken by foreign entities or subsidiaries.** | |
| **2.4.4 Are these foreign entities or subsidiaries operating from fixed locations or remotely? Additionally, are their personnel working from fixed offices or remotely?** | |

| **2.5 Is the applicant CB an Affiliate Office (AO) of a CB that is already Accredited by the GSTC?** | |
| --- | --- |
| ☐ No.  ☐ Yes. *Please specify the name of the CB:* | |

| **2.6 Does the applicant CB have one or more Affiliate Offices (AO) that are part of the scope of this application?** | |
| --- | --- |
| **☐** No  ☐ Yes.*Please provide details below for each AO:* | |
| Name of the AO:  Address of the AO:  Countries where the AO operates:  Key Certification Activities conducted by the AO:  Legal status of the AO: | |

| **2.7 What is the applicant CB office language and the language of the Quality Management System (QMS)?** | |
| --- | --- |
| Office language:  Language of QMS: | |

| **2.8 Does the applicant CB wish to submit documents in a language different from English?**  *Please be aware that GSTC may consider applications in languages other than English at its discretion. It's important to note that there may be translation costs involved, and GSTC reserves the right to decline applications that are not in English.* | |
| --- | --- |
| ☐ No, all documentation will be submitted in English.  ☐ Yes, documentation will be submitted in another language (indicate language): | |

1. **APPLICANT CB’S QUALITY MANAGEMENT SYSTEM**

| **3.1 Does the applicant CB have a Governance Body (e.g. certification committee, impartiality mechanism, board of directors) that ensures the integrity of its certification system?** *If so, please name it/them:* | |
| --- | --- |
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| **3.2 Does the applicant CB employ, or have access to, sufficient human and technical resources to carry out certification services for the program(s) it is applying for?** *Please provide a summarized description of the resources allocated to these program(s):* | |
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| **3.3 Indicate how the applicant CB's management system addresses general management system documentation (e.g. manual, policies, definition of responsibilities; control of documents; control of records; management review; internal audit; corrective actions and preventive actions):** | |
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| **3.4 Does the applicant CB have a quality manual?** | |
| --- | --- |
| ☐ No  ☐ Yes. *If yes, please provide the quality manual in electronic form, as well as any additional documentation developed specifically for the program(s) being applied for (e.g. program manual, auditor handbook).* | |

1. **THIRD-PARTY ACCREDITATIONS AND SERVICES PROVIDED**

| **4.1 Is the applicant CB accredited by another accreditation body (e.g. national accreditation body or others)?** | |
| --- | --- |
| ☐ No  ☐ Yes. If yes, please provide the following details: | |
| Name of the accreditation body:  Accreditation Scope:  Link to the certificate(s) (if available online): | |

| **4.2 Does the applicant CB offer or provide consultancy, training, and other activities or services?** | |
| --- | --- |
| ☐ No  ☐ Yes. Please explain: | |

1. **INTEGRITY**

| **5.1 In the last 10 years, has your organization or any of its agents (such as beneficial owners, leadership team, staff, contractors, etc.) faced accusations or undergone investigations related to fraud, corruption, or any other unlawful or unethical conduct?**  *Please provide details about any allegations or investigations involving your organization or personnel. This encompasses accusations or investigations regarding false claims, bribery, conflicts of interest, social issues, or other fraudulent activities. Additionally, include any known history of disputes or incidents involving GSTC.*  *Note: Failure to disclose any information concerning your company or staff's involvement in fraudulent or unethical activities that could impact the reputation or credibility of GSTC may lead to the rejection of your application.* | |
| --- | --- |
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| **5.2 Does the applicant CB require prior approval from legal authorities before conducting certification activities? If so, please furnish any pertinent documentation.**  *CBs must adhere to all legal obligations in the regions where they operate or intend to operate. Applicant CBs should understand the legal framework and operational context, ensuring compliance with applicable laws and protocols. In regions where specific legal requirements exist (e.g., China), please provide copies of all documents validating compliance.*  *Please note that the absence of verifiable documentation confirming adherence to all legal obligations may lead to the rejection of your application.* | |
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| **5.3 Does the applicant CB have any policies and/or procedures established to uphold ethical and responsible business conduct?**  *Please provide copies of company policies or procedures related to corporate social responsibility and ethical behavior. This may encompass a company Code of Conduct, Whistleblowing procedure, or any other internal systems designed to prevent fraud and corruption and promote responsible business conduct.* | |
| --- | --- |
|  | |

1. **SCOPE OF APPLICATION**

| **6.1 Which technical scope(s) does the applicant CB apply for accreditation?** *Accreditation will only be considered for the specific technical scope(s) mentioned in the application.* | |
| --- | --- |
| GSTC Criteria for Hotel and Accommodation (H) | ☐ |
| GSTC Criteria for Tour Operator (TO) | ☐ |
| GSTC Criteria for Destination (D) | ☐ |

| **6.2 Geographical scope of application**  *Please provide a list of countries or regions in which the applicant CB intends to offer certification services and can demonstrate adequate organizational capacity.* | |
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1. **DOCUMENTS TO BE ATTACHED TO YOUR APPLICATION**

Please ensure that all required documents are included in your application to facilitate the accreditation process.

**Mandatory Documents:**

* Evidence of professional indemnity insurance.
* Evidence of legal status (e.g. certificate of registration, extract of commercial register).
* List of Affiliate Offices (if applicable).
* QMS documentation.
* Applicants whose geographical scope includes China or that have declared an Affiliate Office in China (Question 2.6) shall additionally submit:

a) CNCA registration or evidence of being in the registration process.

b) Business license, evidence of resources registered with CSCA, results of CB internal audit, and contract between the applicant CB and the Affiliate Office (if applicable).

**Recommended Documents:**

* Specific documents required in the GSTC Accreditation Manual
* Accreditation/approval certificate(s) or relevant links.
* Prior approval from national authorities.
* Policies and/or procedures to ensure ethical and responsible business conduct.

**APPLICANT AGREEMENT**

I acknowledge and agree to the following terms and conditions in relation to my application for accreditation with GSTC:

GSTC's Evaluation and Discretion:

I understand that GSTC evaluates the eligibility of the CB to become an applicant CB but does not guarantee acceptance as an official applicant.

The acceptance of the CB as an official Applicant for the Accreditation Program is at GSTC's absolute discretion.

Cooling-off Period:

If the application is rejected, GSTC may impose a cooling-off period until a new application for accreditation can be submitted.

Nature of GSTC Accreditation:

I acknowledge that GSTC accreditation does not constitute an accreditation within the meaning of Regulation (EC) No. 765/2008.

GSTC's accreditation is based on privately set standards and should not be construed as attestation regarding compliance with public authorities' standards or regulations.

Application Fees:

I agree to pay the full fees for application processing as specified in the GSTC Fee schedule. These fees will not be reimbursed if the application is not accepted.

Ongoing Fulfillment of Accreditation Requirements:

I commit to continually meeting the GSTC Accreditation Requirements, for all desired certification schemes and scopes.

Confidentiality:

I agree to maintain the confidentiality of all business and personal information received during the application process, except where such information is publicly available or in the public domain.

Governing Law:

I acknowledge that this application and any ensuing agreements between GSTC and the CB are governed and interpreted by the laws of the USA.

Personal Data:

I understand that the collection and processing of personal data provided in this form and throughout the application process are necessary for GSTC's legitimate interests in evaluating and processing my accreditation application.

I further understand that personal data may be retained by GSTC throughout the application process, and if applicable, during accreditation and surveillance activities until the CB requests its removal or the working relationship with GSTC ceases to be active.

By submitting this application, I affirm my understanding and acceptance of these terms and conditions.

| **Place, Date** | **Place, Date** |
| --- | --- |
| **Full Name and Position of the GSTC Authorized Representative** | **Full Name and Position of the CB Authorized Representative** |
| **Signature for and on behalf of GSTC** | **Signature for and on behalf of the CB** |

\*Please be aware that the signature(s) on the application must match those of the individual(s) authorized to represent, as indicated in the extract from the commercial register.

| **Important Information for the Applicant:**  GSTC places the utmost importance on maintaining the confidentiality of business and personal information. All data received during the application process is treated as confidential, provided it is not already publicly available or generally accessible to third parties. GSTC's employees are bound by specific contractual agreements that compel them to uphold confidentiality. We protect confidential information through controlled access and secure storage measures. Please review the GSTC Privacy Policy for further details." |
| --- |

**FOR GSTC INTERNAL USE ONLY – please leave blank**

|  | **Yes** | **No** | **Comments** |
| --- | --- | --- | --- |
| Competence to carry out assessments relevant to the applied scope | ☐ | ☐ |  |
| Availability of qualified personnel and experts | ☐ | ☐ |  |
| Capability to promptly conduct program-specific document reviews and initial on-site assessments | ☐ | ☐ |  |
| Identification of any hindrances or obstacles | ☐ | ☐ |  |
| Additional Comments |  | | |

| **GSTC Program Manager's Name** |  |
| --- | --- |
| **Date and signature:** |  |