



# **GSTC Accreditation Procedure**

## **version 3.0**

*March 2026*

## Document History

Version	Date of Approval	Description of Key Amendment	Affected Section/Page
1.0	1 October 2023	New Document.	N/A
1.1	29 October 2023	Document format changed. Added GSTC accreditation for destination certification. Added further descriptions to processes and procedures. Corrected grammatical errors.	Entire document
1.2	11 December 2023	Focused on the correction of grammatical errors throughout the document. Improved clarity of expressions.	Entire document
2.0	16 February 2024	Changed the order of sections to align with ISO/IEC 17011:2017. Terminology updated ("Witness Assessment" to "Witnessing"). Combined procedural provisions regarding the Destination Certification. Elaborated clauses regarding the cooperation of the endorsed National Accreditation Body. Added new sanctions item on Table 8. Corrected minor grammatical errors and changed some expressions.	Entire Document
3.0	23 February 2026	Deleted 'Note' after clause 1.4. Added explanation the decision-making personnel are impartial (clause 2.5) Revised clause to clarify oversight authority and the respective responsibilities of the NAB and GSTC (clause 5.6.2.1). Added a 'Note' after clause 7.2.2. Included a new condition addressing application rejection in clause 7.6. Terminology updated ("witnessing" to "witness assessment"). Added applicable cases under Clause 8.3 (Rejection of Application) and further clarified the associated conditions. Change in the Due date for submitting CB's response to nonconformities raised from desk assessment from three (3) working days to five (5) working days before office assessment. Extension to 60 working days for desk assessment completion by GSTC (clause 10.4). Added explanation about the CB's duty related to the desk assessment result (clause 10.5.1).	Entire Document

		<p>Added explanation regarding validity of the desk assessment result (clause 10.7)</p> <p>Added explanation for office assessment and changed expressions (clause 11.2, 11.7, and 11.8).</p> <p>Added explanation regarding validity of the office assessment result (clause 11.10)</p> <p>Added witness assessment report due date (clause 12.13).</p> <p>Changed the expression of clause 12.14 with more specific CB's duty to respond to the findings.</p> <p>Changed the expression to triggered witness assessment on Table 5.</p> <p>Added the ADMC's decision on technical scope extension (clause 15.3. c).</p> <p>Clarified the CAO's decision-making cases (clauses 15.4.3 and 15.4.4).</p> <p>Clarified the details regarding the scope extension. (Section 21).</p> <p>Added conditions for the discontinuation of the GSTC accreditation services (Section 26).</p> <p>Changed 'calendar day(s)' to 'working day(s)' related to most of the accreditation assessments.</p> <p>Changed 'conformity assessment' to 'certification activity' throughout the document.</p> <p>Changed 'accreditation report' to 'assessment report' relevant to sanctions.</p> <p>Added 'scope reduction' and added more details on 'scope extension' cases in Table 2.</p> <p>Changed from "the Assurance Panel" to "Accreditation Decision Making Committee".</p> <p>Changed from "the Assurance Director" to "Chief Assurance Officer".</p> <p>Added clauses clarifying NAB and GSTC roles for the CBs operating under NAB (Clause 5.6.2.1).</p> <p>Added clauses clarifying grievance mechanism CBs operating under NAB (Clause 24.3).</p> <p>Added new section about Discontinuation of the GSTC Accreditation Services</p>	
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## **Document Control**

This is version 3.0 of the GSTC Accreditation Procedure, 2026.

This document takes effect upon publication unless a separate transition period is specified.

Document Approval: GSTC Chief Assurance Officer

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# PART 1: ACCREDITATION PROCEDURE INTRODUCTION

## 1. Introduction

- 1.1. This Procedure specifies the requirements for Certification Body (CB) applying for or maintaining GSTC accreditation. It defines the processes for application, assessment, accreditation decisions, ongoing surveillance, changes in accreditation, complaints and appeals, reporting obligations, and sanctions.
- 1.2. This Procedures applies to Certification Bodies (CBs) accredited directly by GSTC and to those operating under a GSTC-endorsed National Accreditation Body (NAB), except where specific provisions state otherwise. Accreditation conducted by a GSTC-endorsed NAB follows the NAB's operational procedures, while GSTC retains responsibility for oversight activities and for ensuring alignment with GSTC accreditation requirements.
- 1.3. Other applicable operational activities and responsibilities of GSTC and the CB are described in the GSTC Accreditation Manuals.
- 1.4. As per the GSTC Accreditation Procedure, both accredited and applicant CBs are required to pay fees based on the GSTC Accreditation Fee Schedule for different occasions of the assessment.

## 2. Responsibility for this Procedure

- 2.1. GSTC is responsible for controlling documents that relate to this procedure.
- 2.2. GSTC will continuously review, update, and approve documents related to its accreditation activities as necessary.
- 2.3. Information about updates and/or changes in the accreditation procedure shall be available to the CBs.
- 2.4. If those changes impact the CB's accredited certification activity or GSTC's accreditation service, GSTC will set an adequate transitional period and effective date of the changes.

- 2.5. GSTC, as an Accreditation Body, undertakes all accreditation activities, including accreditation decisions. The decision-making personnel are impartial and free from Conflict of Interest (COI) in the accreditation assessment activities.

### 3. Key Policies for Accreditation Service Provision

- 3.1. **Service Language.** The language used for GSTC accreditation services is English. If a CB requests to receive accreditation services in a language other than English, the CB shall provide translation and interpretation services. The CB is responsible for ensuring that such services are fair and impartial, and do not compromise the integrity of the assessment. All related translation and interpretation costs shall be borne by the CB. In the event of any discrepancy or dispute in interpretation, the English version of the requirements shall take precedence.
- 3.2. **GSTC Accreditation for GSTC-Recognized Standard Owners.** Standard owners whose standards have been GSTC-Recognized may pursue collaboration with GSTC-accredited Certification Bodies for certification activities. In such cases, the GSTC-Recognized Standard Owner is required to operate in accordance with the GSTC-Recognized Standard Owner (RSO) and GSTC-accredited Certification Body (RSO-ACB) Framework. Accreditation is conducted following the principles outlined in this framework. For further information, refer to Annex A of the latest version of the GSTC Accreditation Manual for Certification Bodies – Industry: Hotel/Accommodation & Tour Operator, and [the latest version of the GSTC RSO-ACB Framework](#).
- 3.3. **Conducting assessments and measures for incomplete assessments.** GSTC conducts accreditation assessments according to the applicable assessment procedures and within the defined accreditation scope. Assessments may be conducted onsite, remotely, or using a hybrid approach, depending on the circumstances and feasibility. If an assessment cannot be completed within the required timeframe or is delayed beyond the surveillance period, GSTC shall apply the provisions below:

3.3.1. GSTC may extend the validity of the accreditation certificate in accordance with clause 16.5.1.1; or

3.3.2. GSTC shall initiate the appropriate sanction process, such as suspension or withdrawal, as specified in Section 23.

3.4. **Planning and adjusting individual assessment plans.** GSTC shall appoint an assessment team consisting of a team leader and, where required, assessor(s), trainee(s), or technical expert(s), and translator(s) if needed. Observers may engage in an assessment if consented to by the CB beforehand; however, they are not considered to have authorization for the assessment process. GSTC clearly defines the roles and responsibilities given to the assessment team.

3.4.1. GSTC ensures that the expertise brought to each assessment is appropriate. The assessment team shall have appropriate knowledge of the specific scope of accreditation and enough understanding to correctly assess the competence of the applicant certification body to operate within its scope of accreditation.

3.4.2. GSTC shall inform the CB of the composition of the assessment team and any observers, if applicable.

3.4.3. GSTC shall notify the CB of the proposed assessment team prior to the assessment. The CB shall review the proposed team and raise any objections based on potential conflicts of interest, impartiality concerns, or other justified reasons. Such objections shall be submitted to GSTC within five (5) working days from the date of notification. Objections submitted after this period will not be considered unless the CB provides a justified explanation and GSTC approves the late submission.

3.4.4. GSTC shall review any objection(s) and may alter the team composition if it is deemed justifiable in order to mitigate or eliminate any existing or perceived COI.

- 3.4.5. Due to time constraints, the objections by the CB to the assessment team assigned to short-notice and unannounced assessments may not be feasible. The CB shall promptly notify GSTC of the CB audit schedule to facilitate the assessment team composition.
- 3.4.6. GSTC shall develop an assessment plan, and when applicable, a budget covering the assessment scope (activities, locations, personnel, techniques). The assessment plan shall be provided to the CB at least 7 working days prior to the assessment, except in cases of short notice or unannounced assessments.
- 3.4.7. GSTC shall specify the total labor-days required for the assessment and include this information in the assessment plan communicated to the CB.
- 3.4.8. In the case of the Witness Assessment (WA), the CB shall notify GSTC of its audit dates and audit team members at least 30 working days before the assessment and provide its audit plan at least 14 working days before the audit.
- 3.5. **Assessment Report.** A written assessment report shall be provided to the CB describing the outcome of the assessment. The report shall contain comments on competence, the scope assessed, and shall identify nonconformities, if any. The report may include the team's observations in the form of Opportunities for Improvement (OFIs), identifying areas where the CB could enhance its practices.
- 3.6. **Classification of assessment findings and corrective actions.** Assessment findings are classified as either a nonconformity (NC) or an opportunity for improvement (OFI). Table 1 below describes the CB's required responses to address nonconformities. If there is no justification for the NC, GSTC will take action as follows:
- a. For assessments related to the accreditation application (e.g., initial, renewal, or scope extension), the application will be rejected.

- b. For surveillance assessments, GSTC will initiate the procedure of suspension or withdrawal of accreditation.
- 3.7. The CB shall consistently adhere to the GSTC Accreditation Manual, the GSTC Accreditation Procedure, and associated documents, incorporating any new requirements or revisions within the deadlines specified by GSTC.
- 3.7.1. GSTC shall timely inform the CB of any changes to its requirements, the transition period, and the effective date of the changes.
- 3.7.2. GSTC shall verify that the CB conforms to the changed requirements.
- 3.7.3. In any case, the CB shall ensure compliance with the revised Accreditation Manual or Procedure once it becomes effective.
- 3.7.4. After successfully evaluating the transition to the new or revised Manual and the closure of any significant nonconformities, the certificate will be updated to reflect the reference to the new or revised Manual.
- 3.8. **Appeals.** If the applicant CB or the accredited CB disagrees with the GSTC's NCs or decision at any point in this Accreditation Procedure, they may submit an appeal in accordance with the GSTC's Grievance Procedure for Accreditation.
- 3.9. **CB's records.**
- 3.9.1. GSTC shall maintain the list of applicant CBs and accredited CBs in its internal database. The list includes information such as:
- CB name;
  - Address;
  - Accreditation status;
  - Technical/Geographical scope;
  - Date of the accreditation assessments;
  - Contact data as informed by the CB;

3.9.2. GSTC shall keep records on the CBs to show that the accreditation requirements have been successfully met. These records shall be maintained during the accredited period and for five (5) years after the CB loses its accredited status. Such records may include, but are not limited to, evidence of compliance, assessment reports, non-conformity logs, application forms, accreditation agreements, non-disclosure agreements, conflict of interest declarations, and complaints and appeals.

3.9.3. GSTC may publish assessment reports to the extent permitted by the GSTC Service Agreement.

**Table 1. Classification of assessment findings and CB's actions required**

Classification of Findings		Required Action by the CB
Finding	Criteria for Issuance	
Nonconformity	<p>Nonconforming accreditation requirements, including:</p> <ul style="list-style-type: none"> <li>● The CB's certification activity system: <ul style="list-style-type: none"> <li>○ does not address the entirety or part of the accreditation requirements;</li> <li>○ includes a process that contradicts accreditation requirements;</li> <li>○ is not specific enough to address accreditation requirements; or</li> <li>○ does not ensure a stable quality system.</li> </ul> </li> <li>● Nonconformity can be classified as either major or minor according to the latest version of the GSTC Finding Procedure.</li> </ul>	<p>For desk assessment:</p> <ul style="list-style-type: none"> <li>● The CB shall submit Root Cause Analysis (RCA), Correction (C), and Corrective Action (CA) to GSTC (assessment team) no later than five (5) working days before the planned office assessment date. Submission of RCA, C, and CA does not constitute acceptance or closure of the findings.</li> <li>● Evidence demonstrating the effective closure of the nonconformity, including the root cause analysis, corrective actions, and corrective action implementation records, shall be submitted no later than 90 working days from the date on which the NC is communicated to the CB through the assessment report.</li> </ul> <p>For other assessments:</p> <ul style="list-style-type: none"> <li>● The CB shall submit RCA, C, and CA to GSTC (assessment team) no later than 30 working days from the date on which the NC is communicated to the CB through the assessment</li> </ul>

		<p>report.</p> <ul style="list-style-type: none"> <li>Evidence of appropriate actions taken shall be submitted no later than 90 working days from the date on which the NC is communicated to the CB through the assessment report.</li> </ul>
Opportunity for improvement (OFI)	Opportunity for Improvement (OFI) is recommended for a more effective and efficient certification activity system operation, which does not fall into the classification of nonconformity.	No action is required.

*NOTE: Deviations from this rule, outlined in Table 1, may be approved by GSTC, subject to clear justification. For instance, major NCs may be closed at the Head Office (HO) during an office assessment or during a witness assessment if onsite verification is feasible. Additionally, a CB's request to conduct a witness assessment immediately after the office assessment may be approved. However, in such cases, the CB must acknowledge that an additional assessment may be necessary if the findings raised at the HO need to be verified.*

#### **4. Accreditation Scope**

- 4.1. The procedure covers the accreditation scope described in the latest version of the GSTC Accreditation Manual for Certification Bodies - Industry: Hotel/Accommodation & Tour Operator and the GSTC Accreditation Manual for Certification Bodies - Destination.

#### **5. Outline of GSTC Accreditation Process**

- 5.1. Table 2 outlines the GSTC accreditation process and lists specific procedures for each step of the process.
- 5.2. The CB is required to facilitate and collaborate in all GSTC assessments to create a positive and professional assessment environment.
- 5.2.1. The CB shall provide unrestricted access to personnel, facilities, and documents related to the certification process, their operations, including the Affiliate Offices (AOs), and the Scope of Accreditation.

5.2.2. The CB is obligated to establish binding agreements with its clients to ensure GSTC's access to observe the CB's audit activities or to conduct an on-site compliance assessment and to guarantee GSTC's access to pertinent documents.

5.3. All HO, AO, witness, and compliance assessments shall commence with an opening meeting, whether performed on-site or remotely. In the case of a desk assessment, the CB may request an opening meeting. For further details, please refer to the Opening and Closing Meeting Procedure.

5.4. All assessments shall conclude with a closing meeting. The CB shall be given the opportunity to seek clarification on findings, including NCs. Any disagreements shall be discussed and, if possible, resolved during the closing meeting. If unresolved, the disagreement shall be documented in the initial report that will be sent to the CB to allow for review of any Errors of Fact (EOF). The CB is encouraged to include their senior management in both opening and closing meetings whenever possible.

5.5. Opening and closing meetings may be conducted remotely, if necessary, with prior agreement of both parties.

**Table 2. Specific procedures for each accreditation step**

	Initial accreditation	Renewal accreditation	Technical scope extension -Tourism Activity	Technical scope extension -Reference Standard	Geographic scope extension	Scope reduction	Surveillance
Inquiry for Accreditation (Section 6)	○						
Accreditation Application (Section 7)	●	●	●	●	●	●	
Preliminary Visit (Section 9)	○						
Desk Assessment (Section 10)	●	●	●	●	●	●	○

Office Assessment (Section 11)	●	●	●			○	●
Witness Assessment (Section 12)	●	●	●	○		○	●
Reporting Assessment result (Section 14)	●	●	●	●	●	○	●
Accreditation Decision-making (Section 15)	●	●	●	●	●	○	○
Notice of Accreditation Decision (Section 16)	●	●	●	●	●	●	○
<ul style="list-style-type: none"> <li>● <i>Required or mandatory</i></li> <li>○ <i>Optional or required on condition</i></li> </ul>							

5.6. GSTC provides accreditation activities either on its own or in cooperation with National Accreditation Bodies.

5.6.1. Accreditation cooperation with the national accreditation body (NAB) shall take place according to the country where the accreditation applicant is based or another country, according to EU Regulation 765/2008.

5.6.2. If cooperating with the NAB, the GSTC Accreditation Procedure will be aligned with the NAB's procedures, as shown in Table 3 below, and GSTC will be in charge of reviewing applications and oversight of NAB's assessment activities.

5.6.2.1. The accreditation decision, however, remains the sole responsibility of the NAB, which is required to keep GSTC informed of such decisions and any related developments. GSTC is also responsible for informing the NAB of any relevant information and developments relating to the GSTC requirements. For clarity, the NAB is responsible for conducting

all accreditation assessment activities in accordance with its operational procedures, while GSTC also has the authority to carry out oversight activities for CBs under the NAB.

**Table 3. Responsibility of the GSTC-endorsed NAB and GSTC per Accreditation Activity**

Activity	For CBs under the NAB Accreditation	For CBs under the GSTC Accreditation
Application for Accreditation	GSTC and the Endorsed NAB (GSTC will pre-review the application and pass it to the NAB when the application has all the required documents.)	GSTC
Desk Assessment	NAB	GSTC
Office Assessment	NAB	GSTC
Witness Assessment	NAB	GSTC
Accreditation Decision	NAB	GSTC
Regular or extra surveillance assessment	NAB	GSTC
Oversight activity	GSTC	

*Note: CBs refer to both the applicant and accredited CBs.*

## 6. Inquiry for Accreditation

6.1. GSTC will provide detailed responses to inquiries for the accreditation procedures, fees, labor days, etc. GSTC shall also respond to questions about the contents of the GSTC Accreditation Manual. The GSTC accreditation information is publicly available on the GSTC website and can also be requested through [accreditation@gstc.org](mailto:accreditation@gstc.org).

## PART 2: APPLICATION FOR ACCREDITATION

### 7. Application for Accreditation

7.1. An authorized representative of the applicant CB shall submit a formal application using the GSTC Accreditation Application Form, along with the GSTC Accreditation Application Checklist with reference documents, and send it to GSTC at [accreditation@gstc.org](mailto:accreditation@gstc.org) for initial accreditation.

7.1.1. **Application conditions for all applicants.** GSTC requires all applicants to meet the following conditions; otherwise, the application will be rejected. The applicant CB shall:

- a. be a legal entity that can be legally responsible for its certification activity;
- b. provide relevant information for the CB's certification activity system according to the GSTC accreditation requirements;
- c. have access to a sufficient number of competent personnel for managing and supporting the GSTC certification activities in accordance with the scope of accreditation; and
- d. ensure that its impartiality risks are identified and controlled in order to minimize them.

7.1.2. **Additional application conditions for initial accreditation.** An applicant for initial GSTC Accreditation shall comply with the following additional conditions:

- a. The applicant shall have experience in the operation of its certification activity system, having at least one internal audit and management review conducted, and at least one certification activity completed, including a **simulated certification activity**.

Note: **Simulated certification activity** means that a certification activity has been completed following the CB's service procedures from the beginning (e.g., submission of the certification application) to the end (e.g., issuance of a certificate), based on a virtual scenario for certification activity.

- b. At least two auditors (or a person who conducts certification activity and a person who reviews the audit result) are available for each accreditation scope applied for, regardless of their type of contract.

## 7.2. Other Application Inquiries

7.2.1. **Reaccreditation.** An applicant for renewal of an existing GSTC accreditation shall comply with the following additional conditions:

- a. The application shall be submitted approximately nine (9) months before the expiration of the accreditation cycle to allow for timely renewal assessments; and
- b. GSTC shall confirm the completion of all planned surveillance activities and that any corrective actions taken by the CB have been implemented effectively.

7.2.2. **Extension or reduction of accreditation scope by the accredited CB.** A CB can apply for an extension or reduction of accreditation scope at any time during the Accreditation Cycle. The extension or reduction shall be assessed by following Part 6 (Sections 21 and 22).

Note: *If a certification body accredited for one of the tourism activities under "the GSTC Accreditation Manual For Certification Bodies - Industry" intends to apply for accreditation for Destination certification, or vice versa, it must submit a new accreditation application rather than a scope extension application.*

7.2.3. If an applicant CB requests to reduce its technical scope (e.g., tourism activities or reference standards) after one of the assessments (such as desk review, office assessment, or witness assessment) has been

successfully completed, the results of those assessments will remain valid for a maximum of two (2) years. During that period, the applicant CB may request the process to extend back to its original technical scope, and the previous assessments will be considered. After the two-year validity period has expired, the applicant CB will need to restart the process and undergo all the corresponding assessments.

*Note: If changes are made to the applicant's documentation or the GSTC Accreditation Manual within two (2) years, GSTC reserves the right to request the applicant make the corresponding changes and proceed with the remaining assessment process. Depending on the extent of the change, GSTC also reserves the right to initiate the applicant's accreditation assessment process anew.*

- 7.3. All information GSTC requests, including the application form, application checklist, and supporting documents, shall be submitted in English.
- 7.4. Within a period of 10 working days from receiving the application and supporting documentation, GSTC will confirm receipt and perform a screening.
  - 7.4.1. Additional information and/or clarification may be requested from the applicant CB.
  - 7.4.2. The applicant shall pay the application fee invoiced with the application. If the fee is not paid, the reception of the application can be denied. Payment is required within **30 calendar days** of the issue date of the invoice.
- 7.5. At any point in the application and initial assessment process, GSTC shall reject or terminate the assessment process in case of evident fraudulent behavior or lack of compliance with regulations.
- 7.6. GSTC reserves the right to reject an application if the certification body has a history of legal disputes with GSTC that have escalated to prosecutors or courts, or if there is concrete evidence from past interactions that would indicate a potential risk to GSTC's integrity or credibility.

7.7. GSTC will carry out the initial accreditation assessment of the applicant certification body on time. Where GSTC cannot conduct the initial assessment in a timely manner, this will be communicated to the applicant certification body.

## **8. Review of Documented Information**

8.1. GSTC receives and reviews the application documents to ensure that all the necessary information has been provided.

8.2. GSTC considers the application process finalized after the CB has submitted the application or other additional information and made a full payment of the application fee. GSTC shall initiate the application review process within 10 working days after finalizing the application.

8.3. Rejection of Application

8.3.1. GSTC reserves the right to reject an application or revoke an initial accreditation assessment process if it identifies unlawful conduct or intentional non-compliance on the part of the certification body or its representatives, regardless of the stage of the initial accreditation process.

8.3.2. GSTC shall reject an application if any of the following cases apply:

- a. Legal compliance issues are identified;
- b. Intentional provision or concealment of material information related to the accreditation requirements;
- c. Repeated non-compliance indicating intentional disregard for requirements;
- d. Regulatory and safety restrictions that could hinder GSTC's implementation of its oversight, accreditation, or services;
- e. The risk associated with the business relationship with the applicant is deemed unacceptably high;

*Example: Such risk may include, but is not limited to, risks identified through due diligence, associations with illicit*

*businesses, ongoing or escalated legal disputes with GSTC, conflicts of interest, ethical misconduct, corruption, threats, lack of professional competence, procedurally improper audits, or harassment or intimidation of GSTC personnel;*

- f. The CB has damaged or is highly likely to negatively impact the GSTC reputation or the credibility of the GSTC Certification.

*Example: Such impact may include, but is not limited to, making or supporting false or misleading negative public statements about GSTC, the GSTC system, programs, processes, teams, or individuals*

8.3.3. GSTC shall provide justification to the CB for the reasons for the rejection of the application.

8.3.4. Should the CB decide to reapply for accreditation following a rejection, the application process is re-implemented (see 7.1). GSTC reserves the right to enforce an interval period of up to 2 years before reviewing a new application from a previously rejected entity.

8.4. If, during the application process, the CB wishes to withdraw for any reason, it shall notify GSTC in writing. However, the paid application fee is non-refundable.

8.5. Modifications to the current or applied accreditation scope can only occur upon the CB submitting a formal application for scope extension or reduction, as outlined in Section 21 for Scope Extension and Section 22 for Scope Reduction.

8.6. GSTC may propose a reduction in the accreditation scope based on the results of a relevant assessment, as detailed in Section 22.

8.7. If there are significant changes in any aspect of the applicant's status or operations during the application process, GSTC reserves the right to mandate the submission of a new application, along with the payment of a new application fee. Significant changes include but are not limited to alterations to the CB's structure, ownership, or procedures, which may require

new documentation and processes, thereby extending the time needed for the GSTC Accreditation assessments.

- 8.8. **GSTC resource review.** GSTC reviews its resources to determine whether appropriate assessments and accreditation decision activity can be conducted at the proposed time or within the proposed deadline, considering the resources of GSTC. GSTC will consult with the CB to determine an appropriate adjustment in assessment or accreditation decision-making date.

## **PART 3: ASSESSMENTS**

### **9. Preliminary Visit**

- 9.1. Upon the applicant's request, GSTC can plan and conduct a one-day preliminary visit in consultation with the applicant and at their expense.
- 9.1.1. GSTC will charge for the preliminary visit at the GSTC's standard current daily rate.
- 9.2. A preliminary visit may also be decided by GSTC in the following situations:
- a. During the application process, the applicant CB has not conducted any tangible certification activities or services.
  - b. GSTC deems it necessary after identifying issues or significant deficiencies in the provided information that raise concerns about the CB's capability to meet the accreditation requirements.
- 9.3. The purposes of a preliminary visit are to:
- a. evaluate the suitability of the applicant's Quality Management System (QMS);
  - b. confirm the Scope of Accreditation;
  - c. assess the readiness of the CB for the accreditation process;
  - d. verify the submitted documentation; and

- e. provide the applicant with a better understanding of the GSTC accreditation process;
- 9.4. An official report will not be issued to the CB, but brief results in free form can be made and delivered to the CB upon request.
- 9.5. Throughout this process, GSTC shall exercise due care to avoid consultancy.
- 9.6. As long as no conditions for rejection of application (see Clause 8.3) apply during the preliminary visit, the result of the preliminary visit will not have any impact on consecutive official accreditation assessment processes.
- 9.7. Upon completion of the preliminary visit, the applicant may request a change in the desired assessment dates.

## 10. Desk Assessment

- 10.1. Upon accepting the application, GSTC shall request a final Accreditation Application Checklist. If any supplementation is deemed necessary based on the originally submitted checklist, the CB shall update and resubmit the checklist along with the required supporting documents to demonstrate compliance.
- 10.2. After reviewing the accreditation application along with the checklist and required documents, GSTC shall carry out three types of assessments in the specified sequence: Desk Assessment, Office Assessment, and Witness Assessment.
- 10.3. **Desk assessment objectives.** Desk assessment is an evaluation of the documented management system of the CB in order to review the following and determine that the CB is ready for office assessment:
- a. Review the CB's management system documented information;
  - b. Evaluate the CB's documented procedures and records to determine the preparedness for office assessment;
  - c. Review the CB's status and understanding of accreditation requirements;

- d. Obtain necessary information regarding the applied accreditation scope, including the CB's offices, personnel, and levels of controls;
  - e. Review the office assessment team allocation;
  - f. Provide a focus for office assessment and determine affiliate offices assessment if applicable; and
  - g. Evaluate if the internal audits and management reviews are being planned and performed
- 10.4. The desk assessment should be scheduled to be completed within **60 working days** of receiving the outlined documents.
- 10.5. **Reporting desk assessment result.** Upon completion of the document review, the Assessment Team shall write a report detailing identified concerns or observations for documentation gaps, unclear procedures, or potential nonconformities. The CB shall be formally notified of these issues in writing and will be required to address them prior to the conducting of the Office Assessment.
- 10.5.1. The CB shall submit the RCA, C, and CA to GSTC no later than five (5) working days before the planned office assessment date. GSTC shall review the submitted information to determine whether the CB is sufficiently prepared to proceed to the office assessment.
- 10.5.2. GSTC may proceed with the office assessment before all desk assessment nonconformities are fully closed, provided that the risks associated with the open findings are assessed as low and the CB has demonstrated adequate understanding, planning, and commitment to implement the corrective actions.
- 10.6. **Verification of the identified issues shall be conducted during the Office Assessment.** Based on the scope and severity of the findings, if the submitted RCA, C, and CA are incomplete, inadequate, or indicate insufficient preparedness to proceed, GSTC shall postpone the Office Assessment until the CB provides satisfactory information or evidence acceptable to the Assessment Team.

10.7. **Validity of the desk assessment results.** The final desk assessment results, once all NCs from the desk assessment have been closed and the applicant CB is ready to move to the next type of assessment, will remain valid for a maximum of **six (6) months**. Suppose the applicant certification body doesn't take the necessary steps to proceed to the office assessment phase within six months of receiving the final desk assessment results from GSTC. In that case, those results will be invalid, and the applicant certification body needs to start the application process again, including completing the application form and repaying the application fee.

## 11. Office Assessment

11.1. **Office assessment objectives.** The office assessment is intended to verify the competence of the CB in conducting the certification activity for GSTC in compliance with all accreditation requirements.

11.2. **Planning of office assessment.** The timing of the office assessment is determined in consultation with the CB, taking into account the CB's availability.

11.2.1. If the CB requests a change to previously agreed assessment dates resulting in the cancellation or modification of pre-booked travel or accommodation arrangements, the CB shall cover any non-refundable or incurred costs associated with those changes.

11.2.2. For the accredited CB, the office assessment shall be conducted as a surveillance or renewal assessment.

11.2.2.1. The surveillance office assessment plan will be shared with the CB at least **two (2) months** before the actual assessment.

11.2.2.2. The first HO surveillance assessment should be carried out within **six (6) months** after the Initial accreditation.

11.2.2.3. The following surveillance office assessment will be conducted within a year of the previous office assessment.

- 11.2.3. The renewal office assessment plan will be shared with the CB at least **nine (9) months** before the end of the accreditation cycle.
- 11.2.4. For the applicant CB, the office assessment shall be conducted as a part of the initial accreditation assessments.
- 11.2.4.1. The initial office assessment plan will be shared with the CB after the applicant CB successfully completes the desk assessment.
- 11.2.5. The initial and the renewal office assessment may proceed before all NCs issued from the desk assessment are closed, if the GSTC assessment team considers it appropriate and effective to review the CB's CA plan during the office assessment.
- 11.3. It is recommended that CBs take the following actions in preparation for the GSTC office assessment:
- a. review and acknowledge the office assessment plan;
  - b. prepare top management interview;
  - c. allocate responsible person(s) per assessor;
  - d. confirm availability of all documents and records required for the accreditation requirements; and
  - e. prepare office equipment required.
- 11.4. An office assessment shall be conducted at primary offices, such as the Head Office (HO) and Affiliate Office (AO) that perform key functions of certification activities. Any other offices that perform key functions, or for which GSTC has concerns, must also undergo an office assessment within the accreditation cycle.
- 11.4.1. The frequency of office assessments for each type of CB office is listed in Table 4.
- 11.4.2. An office assessment may be conducted onsite or remotely. Remote auditing methods can be used under conditions regarding the available technologies and methods, and both parties' abilities. Both

parties shall agree on the remote auditing.

- 11.5. No later than **30 working days** prior to the assessment, the following documents are submitted by the CB:
- a. documentation for the assignment of organizational roles, responsibilities, and authorities within the CB;
  - b. auditors or personnel involved in the GSTC certification program;
  - c. competence requirements and documentation of their qualifications;
  - d. quality management manual or procedures following the requirements set out in the GSTC Accreditation Manual;
  - e. list of certificates issued and documentation of relevant audits; and
  - f. other information requested by GSTC.

*Note: If there are no changes in the relevant documents and they are already submitted to GSTC, the CB does not need to resubmit them, unless GSTC requests them again.*

- 11.6. **Performance of office assessment.** Office assessment shall include official opening and closing meetings under the responsibility of the assessment team leader.

11.6.1. Throughout the office assessment, various activities, according to the assessment plan, will take place. These activities include the opening meeting, top management interview, document review, assessment team meeting, wrap-up meeting, and closing meeting.

11.6.2. The top management of the CB is expected to engage with the assessment process.

- 11.7. **Reporting the office assessment result.** At the end of the office assessment, the assessment team shall present their preliminary findings during a closing meeting. These findings will be discussed and agreed upon with authorized personnel. Any findings not agreed upon will be documented in the assessment report.

- 11.7.1. The GSTC assessment team will send the CB the office assessment report within **21 working days** from the date of the office assessment closing meeting.
- 11.8. **Actions to be taken for nonconformities.** The classification of possible office assessment findings and the corrective actions to be taken by the CB are shown in Table 1.
- 11.8.1. Before proceeding with a witness assessment, all major NCs shall be closed, and RCA, time-framed C, and CA or CA plan for minor NCs shall be submitted.
- 11.8.2. However, GSTC may proceed with a witness assessment provided that the assessor has approved proceeding with the witness assessment based on the submitted RCA and CA plan(s).
- 11.9. **Impact of office assessment results.** If the NC(s) found by the office assessment is deemed to be a serious imperfection for the CB's certification activities, then GSTC can take actions such as reassessment, follow-up assessment, additional witness assessment, rejection of accreditation application, suspension, or withdrawal of accreditation if determined necessary.
- 11.9.1. The CB shall complete the correction and/or corrective action and submit the results to GSTC within the time limit agreed upon with the evaluation team as provided in Table 1.
- 11.9.2. If the assessment team finds that the correction and/or corrective action submitted by the CB are not satisfactory, it will require submission of additional corrections and/or corrective action with one more chance within **30 working days**. If the result of the additional correction and/or corrective action is not submitted within the specified period, or if the additional correction and/or corrective action are not satisfactory, GSTC can discontinue the accreditation process and take measures such as rejecting the accreditation application or implementing sanctions.

11.10. **Validity of the office assessment results.** The final office assessment results, once all NCs from the office assessment have been closed and the applicant CB is ready to move to the next type of assessment, will remain valid for a maximum of **six (6) months**. Suppose the applicant certification body doesn't take the necessary steps to proceed to the witness assessment phase within six months of receiving the final office assessment results from GSTC. In that case, those results will be invalid, and the applicant certification body needs to start the application process again, including completing the application form and repaying the application fee.

**Table 4. Office assessment frequency for each type of CB office**

Type of CB's office	Assessment Frequency
Head office	Initial accreditation Every surveillance Accreditation renewal assessment
Affiliate office*	Initial accreditation Once per accreditation cycle per affiliate office
<p>* The affiliate office is responsible for performing crucial functions, overseeing personnel engaged in key functions, and/or maintaining records related to those key functions.</p> <p><i>Note: Key functions are specified in IAF/ILAC A5, clause 7.5.</i></p>	

## 12. Witness assessment

12.1. GSTC shall conduct a witness assessment defined in the assessment plan, according to the latest version of the GSTC Surveillance and Sampling Procedure.

12.2. **Witness assessment objectives.** Witness assessment carried out by GSTC is in accordance with ISO/IEC 17011:2017, Clause 7.4.7, to achieve the following objectives:

- a. On-site verification of the effective implementation of the CB's certification activity and determination of certification scope assignment by the CB;

- b. Evaluation of the CB's audit team and their conformance with CB's procedures and GSTC requirements; and
  - c. Obtaining a representative sample of the competence of the CB across the accreditation scope.
- 12.3. The types, purposes, and timings of the witness assessment are listed in Table 5.
- 12.3.1. GSTC reserves the right to conduct the additional witness assessment or alter the sequence of the witness assessment. In such cases, a justification shall be provided.
- 12.4. **Planning of witness assessment.** The timing of the witness assessment is determined in consultation with the CB, taking into account the CB's availability.
- 12.4.1. The CB will compensate for the financial loss incurred due to the changes in the assessment team's pre-booked travel arrangements, which were caused by the CB's alteration of the previously agreed office assessment dates.
- 12.4.2. For the accredited CB, a witness assessment shall be conducted as a surveillance or renewal assessment.
- 12.4.2.1. The surveillance witness assessment plan will be shared with the CB at least **two (2) months** before the actual assessment.
  - 12.4.2.2. The first witness assessment, as a surveillance assessment, shall be conducted after the first surveillance office assessment.
  - 12.4.2.3. The surveillance witness assessment for each accredited tourism activity may be conducted annually; however, GSTC may adjust the frequency based on the previous assessment results or other relevant factors.
- 12.4.3. For the applicant CB, the witness assessment shall be conducted as a part of the initial accreditation assessments.

- 12.4.3.1. The initial witness assessment plan will be shared with the CB after the applicant CB successfully completes the office assessment.
    - 12.4.4. GSTC may conduct the office assessment together with the initial or renewal witness assessment when both assessments can be performed in the same or nearby region and when the combined approach is justified, does not compromise assessment rigor or impartiality, and supports efficient and responsible use of resources.
    - 12.4.5. The initial and renewal witness assessment may be conducted before all NCs from the office assessment are closed, if the GSTC assessment team considers it sufficient to check and observe the CB's CA plan during the witness assessment. Even under such circumstances, however, this does not imply automatic closure of the NCs.
    - 12.4.6. The CB shall bear the cost of utilizing technical expert(s) if GSTC brings technical expert(s) for effective witness assessment.
  - 12.5. It is the duty of the CB to inform its client, to explain the witness assessment procedure, and to obtain the documented client's agreement to the procedure. The CB is not expected to change its audit team, plan, or duration due to the witness assessment. If such changes occur, the CB shall provide appropriate justification to GSTC.
    - 12.5.1. It is the responsibility of the CB's client to inform the audit team and the GSTC assessment team of all the applicable safety and security requirements in advance.
  - 12.6. **No later than 30 working days** prior to the assessment, unless agreed otherwise with GSTC, the CB shall provide to GSTC:
    - a. audit plan with reference to audit objectives, audit team, locations, dates, and expected duration of audit activities to be conducted;
    - b. audit report from the previous audit (if applicable);
    - c. relevant to the audit complaints file (if applicable); and

- d. any other files requested by the GSTC assessment team.
- 12.7. Audit planning should be sufficiently flexible to permit any changes that arise as the audit activities progress.
- 12.8. During the witness assessment, the GSTC assessment team's activities are restricted to those of an observer without influencing the conduct of the certification activities by the CB's audit team. The GSTC assessment team will not directly ask CB's client questions nor provide any opinions to the audit team or client at any time. However, access to the client's documentation reviewed by the audit team shall be promptly provided to the GSTC assessment team upon request.
- 12.9. Witness assessment results will be delivered to the CB's audit team during the official closing meeting between GSTC and the CB.

*NOTES: The closing meeting will not include the CB's client.*

- 12.9.1. The GSTC assessment team may request and review the completed audit report and then confirm the results of the witness assessment.
- 12.10. Certain types of CB audits may not be suitable for an initial witness assessment, and GSTC may reject them upon justification.
- 12.11. If the required witness assessment does not proceed by the due date for surveillance and renewal of accreditation, GSTC may dismiss the application or initiate an accreditation scope reduction or withdrawal process. However, the CB can officially submit a reason for postponing the witness assessment to GSTC, and the due date may be extended for an additional 3 months or longer only if the reason is proven valid.
- 12.12. **Reporting witness assessment result.** At the end of the witness assessment, the GSTC assessment team shall present their preliminary findings during the closing meeting. These findings will be discussed and agreed upon with the audit team. Any findings not agreed upon will be documented in the assessment report.
  - 12.12.1. The assessment team will send the report in **21 working days** from the date of the witness assessment closing meeting.

- 12.12.2. The CB shall provide the requested audit records and related documentation within 7 calendar days upon the assessor's request for report preparation.
- 12.13. The classification of the possible witness assessment findings and the corrective measures to be taken by the CB are listed in Table 1.
- 12.13.1. In order to proceed with the subsequent process, such as the review for accreditation decision-making, all NCs shall be closed.
- 12.13.2. In the case of surveillance, the deadline for closing all the NCs is as described in Table 1, unless a different deadline is agreed upon by GSTC and the CB.
- 12.13.3. The CB shall promptly address any requests for clarification, additional documents, and/or information related to any NCs within the deadlines specified by GSTC.
- 12.14. **Impact of witness assessment results.** If the NC is found and is considered to be a significant deficiency for the CB's certification activity, GSTC can take actions such as follow-up assessment, additional witness assessment activities, rejection of accreditation application, suspension, or withdrawal of accreditation as determined necessary.
- 12.14.1. The CB shall complete the corrective action and submit the results to GSTC within the time limit agreed upon with the evaluation team as provided in Table 1.
- 12.14.2. If the assessment team finds that the correction and/or corrective action submitted by the CB are not satisfactory, it will require submission of additional corrections and/or corrective action or taking corrective action with one more chance within a 30-day deadline. If the result of the additional correction and/or corrective action is not submitted within the specified period, or if the additional correction and/or corrective action are not satisfactory, GSTC can discontinue the accreditation process and take measures such as rejecting the accreditation application or imposing sanctions.

**Table 5. Purpose and timing per type of witness assessment**

Type	Purpose	Timing
Initial Witness Assessment	Initial accreditation	Typically, within 3 months from the end date of the office assessment for initial accreditation, but the assessment schedule will be agreed upon between GSTC and the CB.
	Accreditation scope extension	Typically, within 3 months from the end date of the office assessment for accreditation scope extension, but the assessment schedule will be agreed upon between GSTC and the CB.
Regular Witness Assessment	Surveillance	Until the end of the due date of each annual surveillance cycle.
	Accreditation renewal	No later than 2 months before the expiration date of the accreditation validity period.
Triggered Witness Assessment	To confirm CB's overall competence for its accreditation scope, when there is a concern raised by GSTC or other stakeholder(s)	When GSTC determines that the concern is valid, a witness assessment is necessary within a valid period of accreditation.
Additional Witness Assessment	To confirm CB's overall competence for its accreditation scope, when the previous witness assessment did not confirm CB's competence.	GSTC will define the time based on the previous assessment results.

### 13. Reassessment and Follow-up Assessment

#### 13.1. Reassessment

13.1.1. If the GSTC assessment team comes across a critical NC during its assessments, which makes it impossible for the team to continue, the assessment team will immediately inform the CB and discontinue the

assessment. In such a case, GSTC will arrange for a partial or full reassessment, per the guidelines given in Table 6.

13.1.2. If the reassessment is not made within the time limit, even though the assessment has been discontinued due to the conditions listed in Table 6, the accreditation application may be rejected, or existing accreditation may be suspended or withdrawn.

13.1.3. The CB shall pay all fees incurred for accreditation processes conducted prior to the discontinuance.

13.2. Follow-up assessment

13.2.1. A follow-up assessment is conducted to confirm additional information that couldn't be verified during regular assessments. This evaluation will follow the objectives and methods listed in Table 7 below.

13.2.2. If the CB is responsible for the cause of a follow-up assessment, the associated fee shall be covered by the CB.

**Table 6. Classification, conditions, and methods of reassessment**

Classification	Conditions	Reassessment timing and methods
Partial reassessment	For a specific accreditation standard or scope that affects a part of the system of the CB: <ul style="list-style-type: none"> <li>- these requirements are not fully addressed; and</li> <li>- the part of the certification activity system concerned cannot be validated.</li> </ul>	Reassess the requirements or scope of the nonconforming part after one month from the assessment discontinuance and within three months thereafter.
Full reassessment	For a specific accreditation standard or scope that affects a part of the system of the CB: <ul style="list-style-type: none"> <li>- these requirements are not addressed at all; and</li> <li>- the part of the certification activity system concerned cannot be validated.</li> </ul>	Reassess the requirements or scope of the nonconforming part after three months from the assessment discontinuance and within three months thereafter.

*Note: The reassessment schedule may be determined by agreement between GSTC and the CB.*

**Table 7. Objective, method, and duration/frequency of follow-up assessments**

Objective	Method	Duration/Frequency
To confirm the validity of the results of the corrective action submitted by CB for any nonconformities found during the assessment process	Desk assessment at the GSTC office	N/A
	Office assessment at the CB	0.5 ~ 1.0 LD* (Determined by GSTC)
	Witness assessment involving the CB's client	Depending on CB's audit plan
To review the potential impact of CB's reported changes	Desk assessment at the GSTC office	N/A
	First visit to the CB	0.5 LD
	Additional visit to the CB	1.0 ~ 2.0 LD (determined by the first visit)
Responding to the decision of the GSTC accreditation decision-making committee	Office assessment at the CB	1.0 ~ 2.0 LD
	Witness assessment involving the CB's client	At least once (depending on the CB's audit plan)
To confirm the validity of the results of the corrective action against the sanctions imposed	Office assessment at the CB	0.5 ~ 1.0 LD (determined by GSTC)
	Witness assessment involving the CB's client	Depending on CB's audit plan

Note: No charge of assessment fees for the desk assessment at the GSTC office.

\* LD(Labor Day) is the time spent on the assessment task per the GSTC Assessor.

#### 14. Reporting Assessment Result

- 14.1. For all types of assessment, whether performed on-site or remotely, a closing meeting shall take place between the GSTC assessment team and the CB. During this meeting, the GSTC assessment team shall present the findings identified during the assessment and provide details of any nonconformities. The CB shall be given the opportunity to seek clarification on the findings, including any nonconformities and their justification.

- 14.2. For all types of assessments, a written report on the outcome of the assessment shall be sent to the CB. The report shall contain comments on conformity, the scope assessed and identified NCs.
- 14.3. The CB shall have ten (10) working days to file the EOF to GSTC from the date on which the NC is communicated to the CB through the assessment report.
- 14.4. Each report undergoes a Technical Review (TR) that might result in modification of the grading and/or wording of the report. If the report differs from the outcome delivered at the closing meeting, the GSTC assessment team will provide an explanation to the CB in writing. The process of the TR might last up to an additional three weeks.
- 14.5. The CB shall return the report to GSTC after having filled it out adequately with RCA, C, CA, and/or CA plan. Additional information can be found in the GSTC Findings Procedures.

## **PART 4: ACCREDITATION DECISION-MAKING**

### **15. Accreditation Decision-Making**

- 15.1. GSTC makes accreditation decisions for initial accreditation, extension/reduction of accreditation scope, and suspension/withdrawal of accreditation based on the result of accreditation assessments and review of other related information.
- 15.2. GSTC operates as an independent body consisting of external professionals in order to maximize objectivity and impartiality in the accreditation decision-making process.
- 15.3. The Accreditation Decision-Making Committee (ADMC) is responsible for the following decisions:
  - a. initial accreditation;
  - b. accreditation renewal (reaccreditation);

- c. technical scope extensions for reference standards and tourism activities; and
- d. sanctions, including withdrawal and suspension.

15.3.1. When rendering the accreditation decision, the ADMC serves as a representative of GSTC, and the decision is thereby ascribed to GSTC. No legal or contractual relationship is established between the ADMC and the CB.

15.3.2. The ADMC is granted access to all assessment reports and nonconformities (NCs) issued, including those from both GSTC and the CB's responses to the NCs.

15.3.3. An accreditation decision made by the ADMC is grounded in the findings presented in the accreditation report, prepared by the GSTC assessment team. While the accreditation report may provide recommendations on how to proceed, it is essential to underscore that any such recommendations are advisory in nature and do not impose binding obligations on the ADMC.

15.3.3.1. The information provided to the ADMC for review in the accreditation report includes at least the following:

- Internal and unique identification of the CB;
- Date(s) and type(s) of assessment(s) (e.g. initial accreditation);
- Name(s) of the assessor(s) and/or other people involved in that particular assessment;
- Unique identification of all locations assessed;
- Scope of accreditation;
- Assessment report(s);
- A statement on the adequacy or otherwise of the organization and procedures adopted by the CB to give confidence in its competence, as determined through its fulfillment of the requirements for accreditation;

- Enough information to demonstrate a satisfactory response to all nonconformities;
  - Where relevant, any further information that may assist in determining the competence of the certification body as determined through conformity with GSTC requirements; and
  - A recommendation as to the accreditation decision for the proposed scope.
- 15.4. Other accreditation decisions, which do not necessitate an accreditation report, are delegated as follows;
- 15.4.1. Decisions regarding the maintenance of accreditation are delegated to the Chief Assurance Officer (CAO).
- 15.4.2. Decisions regarding the extension or reduction of geographical scope are delegated to the CAO.
- 15.4.3. Decisions regarding the extension of the technical scope by adding the relevant GSTC Standard are delegated to the CAO.
- 15.4.4. Decisions regarding the reduction of the technical scope by removing a reference standard are delegated to the CAO.
- 15.4.5. Decisions where the CB voluntarily requests a reduction of scope, suspension, or withdrawal of accreditation are delegated to the CAO.
- 15.4.6. Other decisions, such as pausing or terminating the accreditation process, can occur during the accreditation cycle or assessments and can be made by the CAO.
- 15.5. If a major NC emerges during the accreditation assessment or is subject to investigation during a renewal process, the ADMC review will be delayed until the investigation concludes. The CB's accreditation will remain in effect throughout this period.
- 15.6. The ADMC shall convey its decision to the GSTC assessment team within 30 calendar days of receiving the final accreditation report. If additional material is requested by the ADMC or if further review is necessary, the deadline may be extended. GSTC shall inform the CB of this decision in writing within five (5)

working days of the ADMC decision, providing a copy of the final accreditation report.

- 15.7. For all accreditation decisions, GSTC reserves the right to stipulate additional requirements and conditions for the CB to address and mitigate ongoing risks to the integrity of their accreditation.
- 15.8. The CB may appeal the accreditation decision in accordance with the GSTC Grievance Procedure for Accreditation.
- 15.9. In the event that GSTC fails to adhere to a procedural provision, it does not invalidate an accreditation decision. The validity of the decision remains intact despite any procedural shortcomings.
- 15.10. If the accreditation cycle expires before the completion of the decision-making process due to the CB's failure to demonstrate conformance, the CB shall be suspended. GSTC may lift the suspension without the ADMC's involvement once the CB complies with the NCs, allowing the reaccreditation process to continue.
- 15.11. If the accreditation cycle expires before the completion of the decision-making process due to reasons beyond the control of the CB, the CB's accreditation will remain valid until further notice by GSTC.
- 15.12. The effective date of initial accreditation will be the date after the accreditation decision by the ADMC.
- 15.13. Where GSTC uses the results of an assessment already performed by another accreditation body, GSTC will make sure to have the certainty that the other accreditation body was operating following the requirements of this document.

## **16. Accreditation Information**

- 16.1. Accreditation is granted in the form of an Accreditation Certificate, signed by the CEO of GSTC, with general requirements.

- 16.1.1. The ADMC's accreditation decision will be publicly posted on the GSTC website.
- 16.1.2. All accreditation decisions take effect on the date of notification. However, in the case of an accreditation decision involving a registration fee request, such as an initial or renewal accreditation, an accreditation certificate will be issued after the required fee is paid in full.
- 16.2. Requirements for the Certificate of Accreditation:
  - 16.2.1. The certificate includes the GSTC logo, name, and legal entity name (if different), and address of the CB, unique identification number, scope of accreditation granted, standard used for the certification, and accreditation period.
  - 16.2.2. The certificate belongs to GSTC. A digital copy of the certificate is distributed to the accredited CB through email and is made publicly accessible on the GSTC website.
  - 16.2.3. The CB shall ensure that all claims related to accreditation fall within the scope of the GSTC Accreditation Certificate.
- 16.3. The CB shall use only the GSTC logo and the GSTC Accreditation Symbol as outlined in the GSTC Certification Body Licensing Agreement.
- 16.4. Once the certificate is issued, GSTC will retain the database for market access, and clients will be permitted to use the logos on their website and in their organizational operations in accordance with the Logo Usage Procedure.
- 16.5. Renewal of accreditation per scope
  - 16.5.1. The accreditation for the CBs is renewed every five years subsequent to a reaccreditation assessment and an accreditation certification decision, both of which must occur prior to the expiration of the current cycle.

16.5.1.1. The validity of the accreditation certificate may be extended accordingly under various circumstances, including but not limited to:

- a. Administrative delays: If there's a backlog in processing re-accreditation applications or decisions due to high volume or staffing issues.
- b. Additional information requests: When further documentation or clarification is required to the CB by the ADMC before making a decision.
- c. Force majeure events: Unforeseen circumstances such as natural disasters, pandemics, or other significant disruptions that may affect the normal functioning of the accreditation process.
- d. Scheduling conflicts: When there are difficulties in convening the accreditation decision-making body within the standard timeframe.
- e. Technical reviews: If complex technical issues arise during the assessment that require additional expert consultation or review.

16.6. If the applicant CB cannot achieve the accreditation within two years of GSTC receiving the application, GSTC shall halt and withdraw the accreditation process. A complete reapplication may be necessary in such cases.

16.6.1. GSTC may allow a delay and provide additional months to complete the process if there are valid reasons.

## **PART 5: ACCREDITATION CYCLE**

### **17. Surveillance Assessments**

- 17.1. Surveillance assessments are conducted to confirm ongoing compliance with GSTC accreditation requirements and determine whether accreditation is maintained.
- 17.2. Surveillance is conducted according to the prescribed timing and frequency by combining desk assessment, office assessment, and witness assessment, as shown in Table 5.
- 17.3. Each desk, office, and witness assessment shall follow Sections 10-12 in this document.
- 17.4. For every surveillance assessment, GSTC shall include a recommendation in the final assessment report indicating whether the evidence supports the continuation, suspension, or reduction of accreditation scope.
- 17.5. An annual surveillance assessment will encompass office and witness assessments, contingent upon the scope of accreditation. Nevertheless, GSTC reserves the right to restrict the assessment to the quantity and type of evaluations, as dictated by the circumstances.
- 17.6. Other types of assessments, such as desk or follow-up assessments, may also be conducted if deemed necessary.
- 17.7. A preliminary assessment program for the accreditation cycle shall be provided to the CB after the accreditation decision. This program will outline the deadline time for surveillance assessment and expected office, witness assessment, and/or compliance assessments for each scope.
- 17.8. A revised annual assessment program for the upcoming surveillance year shall be provided to the CB at a minimum of 3 months before the surveillance date.

- 17.9. GSTC may conduct an additional assessment outside the regular surveillance program to investigate incidents or complaints, review the outcomes of consecutive assessments, or address other circumstances deemed necessary.
- 17.10. In addition to scheduled surveillance assessments, GSTC reserves the right to conduct unannounced assessments when concerns arise regarding heightened risk, potential violations, or neglect of accreditation requirements.
- 17.11. The CB shall ensure that GSTC can carry out witness and compliance assessments on a sample of the CB's clients as selected by GSTC.
- 17.12. In cases where justification exists, intervals for office assessments may be extended. During the intervening year without an office assessment, the CB shall be asked to submit documentation for compliance with GSTC requirements, including internal audit reports and management review minutes. Moreover, the CB shall notify GSTC of any changes to the organization's Quality Management System. GSTC reserves the right to request additional information at any point in time.
- 17.13. GSTC accreditation may be suspended or withdrawn if the assessment reveals a significant violation of the accreditation requirements or if any NCs have not been properly addressed.
- 17.14. GSTC accreditation may be invalidated if the assessment is not completed within the validity period of the accreditation or the periodic surveillance cycle and time limit set by GSTC due to the delay of certain assessment steps.
  - 17.14.1. The CB shall ensure that all applicable assessments are completed within the scheduled periodic surveillance cycle. A sanction may be taken if the assessment is not completed in time or if there is no valid justification for the delay.

## **18. Maintaining Accreditation**

- 18.1. The accredited CB shall comply with the requirements for the responsibility of the accredited CB listed in this clause below to maintain its accredited status. During the accreditation cycle, GSTC will conduct a series of surveillance

activities to confirm the CB's continued conformity and effectiveness of its implementation of the GSTC accreditation requirements.

18.1.1. Responsibilities of the accredited CB

- a. Continued conformity to the GSTC accreditation requirements: The CB shall ensure its continued conformity to the recent version of the GSTC accreditation requirements applicable to its accreditation scope, including any changes or additions.
- b. Cooperation with GSTC's follow-up activities: GSTC conducts follow-up activities to confirm whether the accredited CB is consistently complying with accreditation requirements. The CB is responsible for ensuring ongoing compliance by actively cooperating with GSTC's follow-up activities.
- c. Cooperation with GSTC's responses to the complaints and appeals raised by the CB's clients: The CB's stakeholders may file a complaint or appeal to a CB or to its certification activities, in which case GSTC will follow the complaints and appeals handling procedures outlined in the GSTC Grievance Procedure for Accreditation. The CB shall immediately submit a record of action for all disputes, complaints, and appeals raised by its stakeholders, including certified organizations.
- d. Reporting required information: The CB shall report the information requested by GSTC. This reporting includes information on changes in the CB and the performance of certification activities accredited by GSTC.
- e. The CB shall immediately notify GSTC of any changes in status, operating activities, or relevant personnel that may affect its accreditation.
- f. Accreditation fee payment: A CB applying for or maintaining a GSTC accreditation shall pay the accreditation fee as specified in the GSTC Accreditation Fee Schedule.

18.2. GSTC's regular surveillance activities consist of periodic surveillance assessments and additional follow-up or special assessments conducted as needed. Beyond these, GSTC may also conduct special surveillance activities such as requests for documents or information, investigations, visits, and interviews if deemed necessary.

## **19. Reaccreditation Assessment**

19.1. The purpose of the reaccreditation assessment is to renew the accreditation cycle, validate the competence of the CB, and comprehensively evaluate the CB's management and certification system, taking into account all assessment knowledge and information gathered during the accreditation cycle.

19.2. Reaccreditation assessment is conducted by combining desk, office, and witness assessments.

19.3. A reaccreditation assessment for the CB should begin around 9 months prior to the end of the current accreditation cycle. The date of the closing meeting for the reaccreditation assessments serves as the deadline for addressing NCs requiring a response from the CB before renewing the accreditation cycle.

19.3.1. All major NCs identified during the assessments shall be closed;

19.3.2. Other open NCs shall not hinder the reaccreditation process unless they raise significant doubt about the CB's competence to carry out certification activities or present a risk to the integrity of certification decision-making.

19.4. Once all major NCs are closed, GSTC shall prepare the accreditation report for the ADMC.

19.5. The procedures for accreditation decision-making and notice of the decision are outlined in Sections 15 and 16.

## 20. Changes in Accreditation

- 20.1. GSTC will issue a new accreditation certificate if there are changes in the information specified on the certificate or if there is a matter that has a significant effect on the performance of the accredited certification activity.
- 20.2. Types of changes in accreditation are as follows:
  - a. Changes in CB information: changes in the CB's legal status, ownership, organizational structure, management system, etc.
  - b. Changes in CB accreditation information: changes in accreditation scope, etc., of the CB.
  - c. Request for a temporary suspension of the CB's accredited activity.
- 20.3. CBs shall report to GSTC within 30 calendar days of any changes to the following CB information, including the CB's Affiliate Office(s):
  - a. legal status;
  - b. top representative, directors, or shareholders;
  - c. important policies or procedures, including the certification fee schedule and certification labor days;
  - d. name, postal address, website, telephone number, etc.;
  - e. any changes in a. to d. (listed above) for permanent offices conducting key functions (see Table 4);
  - f. countries in which the CB operates from a fixed office location (Affiliate Office) or has remote personnel that performs any certification activities; or
  - g. new or revised contracts with foreign entities or subsidiaries that perform any certification activities.
- 20.3.1. Failure to notify GSTC of the changes in a timely manner may result in sanctions.
- 20.4. If a CB intends to apply for an extension of the accreditation scope, GSTC shall follow the procedure in Section 21.

- 20.5. If a CB intends to apply for a voluntary reduction of the accreditation scope, GSTC shall follow the procedure in Section 22.
- 20.5.1. If GSTC determines that the received request significantly impacts the CB's accredited certification activity, GSTC may conduct a follow-up assessment as described in Section 13.
- 20.5.2. After the reduction process is completed, GSTC will announce the name of the CB and the voluntary accreditation reduction on the GSTC website.
- 20.6. If a CB wishes to withdraw its GSTC accreditation voluntarily, it must settle any outstanding accreditation fees and follow the official withdrawal process established by GSTC.
- 20.7. If a CB requests a temporary pause, GSTC will disclose the CB's name, accreditation scope, and duration of the pause without the ADMC's decision.

## **PART 6: EXTENDING AND REDUCING ACCREDITATION**

### **21. Scope Extension**

- 21.1. A CB may apply for technical and geographical scope extensions at any time during the accreditation cycle.
- 21.2. Applications shall be submitted directly to GSTC at [accreditation@gstc.org](mailto:accreditation@gstc.org).
- 21.3. Applications for scope extensions may be considered during scheduled surveillance office assessments, provided they are submitted to GSTC at least 90 working days prior to the planned assessment.
- 21.4. After the application has been reviewed, GSTC shall determine the duration and type of assessment needed.
- 21.4.1. Technical scope extension for an additional tourism activity: Desk assessment, office assessment, and witness assessment shall be required for a technical scope extension to include an additional tourism activity.

21.4.2. Technical scope extension for an additional reference standard: A desk assessment shall be required for a technical scope extension to include an additional reference standard.

21.4.2.1. The desk assessment evaluates the CB's implementation capacity. The results of the desk assessments will be used to determine whether a witness assessment is necessary in addition to the gap analysis described in clause 21.4.2.2.

21.4.2.2. The requirement for a witness assessment will be decided through a gap analysis that considers:

- a. structural similarities between the GSTC Standard and the GSTC-Recognized standard;
- b. implementation preparation level for the new scope by the CB (e.g., updated procedures, staff training, etc.); and
- c. risk level related to the CB's implementation of the new standard (e.g., complexity, performance history, differences in interpretation).

21.4.3. Geographical scope extension: A desk assessment shall be required for a geographical scope extension.

21.4.3.1. For a geographical scope extension, the CB shall provide documentation demonstrating that it has sufficient resources and operational capability to conduct certification activities in the proposed countries. This documentation shall include, as applicable:

- a. information on competent personnel;
- b. language capability;
- c. management system adjustments;
- d. details of affiliate offices or subcontractors; and
- e. arrangements to cover potential liabilities arising from certification activities in the new locations.

21.4.3.2. The CB shall demonstrate its legal eligibility to operate in the proposed countries. Based on the evaluation of these

resources and conditions, GSTC may require additional documentation, clarifications, or assessments (including a witness assessment) to confirm the CB's readiness.

21.5. Decisions regarding scope extensions will be handled as follows:

21.5.1. For a technical scope extension, the accreditation report shall be prepared for the ADMC per Section 15.

21.5.2. For an extension of geographical scope, the CAO shall make the decision without the ADMC's involvement.

21.5.3. Following a positive decision on the scope extension, GSTC updates the certificate on the website and directly provides the CB with the revised version containing the new technical and/or geographical scope.

## **22. Scope Reduction**

22.1. A reduction in technical and/or geographical scope may be recommended by GSTC or voluntarily requested by CBs.

22.2. GSTC may recommend a scope reduction to the CB based on findings from surveillance or reaccreditation assessments or other incidences of identified legal non-compliance.

22.2.1. Decisions on technical scope reduction shall be made by the ADMC based on the accreditation report and the GSTC's recommendation.

22.2.2. Decisions for geographical scope reduction shall be made by the CAO without the ADMC's involvement.

22.3. The decision of the CB to voluntarily reduce technical or geographical scope must be communicated to GSTC with a minimum of 3 months' notice before the intended effective date of the scope reduction.

22.3.1. The voluntary reduction of technical or geographical scope shall be made by the CAO without the ADMC's involvement.

22.3.2. The CB may reapply for scope extension at any time by following the process outlined in Section 21.

22.3.3. If the applicant CB voluntarily reduces the technical or geographical scope of accreditation during the accreditation process, then the application will be internally revised by the GSTC Accreditation Team.

## **PART 7: SUSPENSION, WITHDRAWAL, AND SANCTIONS**

### **23. Sanctions**

- 23.1. If the CB violates accreditation requirements or accreditation procedures or is/has been in breach of the terms of the GSTC Certification Body Licensing Agreement (CBLA), GSTC shall initiate its procedures to impose a suitable sanction in order to ensure the credibility of the GSTC accreditation and its accredited certification activities. It will be under the GSTC's discretion to pursue legal rights under applicable laws or signed agreements with the CB.
- 23.2. The types of sanctions that may be imposed on accredited CBs include warnings, suspension of accreditation, withdrawal of accreditation, and intensive surveillance. Table 8 outlines the specific types of sanctions that correspond to each violation. However, the sanctions are not limited to the violations listed in Table 8, and GSTC will impose sanctions for other violations not listed.
- 23.3. The CB shall analyze the cause(s) that led to the sanction so that GSTC may address or eliminate it. If this is not the case, a more severe sanction may result.
- 23.4. In cases of alleged fraud, GSTC will provide the accused entity with a summary of the accusations (Cause Notes). GSTC shall allow a 10-day window for the CB to submit evidence to support a refusal of the claims before enforcing any sanctions.
- 23.5. The CB shall pursue actions to protect the Scheme's integrity. This may involve withdrawing or restricting certification as deemed necessary or as requested by GSTC, in instances where evidence of fraud is identified or when fraud allegations at the Certified Organization (CO)/Certificate Holder (CH) level

cannot be refuted. Noncompliance with this directive may lead to sanctions imposed by GSTC as per Section 23.

- 23.6. If a CB has been sanctioned within two years due to the same violation, accumulated sanctions will be applied based on the number of violations. However, if a CB is suspended for over a month's period twice in one year, accreditation will be withdrawn immediately, disregarding two years of accumulation.
- 23.7. If a certification activity is proven fraudulent by GSTC's assessment or investigation, the responsible CB shall report its determination to GSTC, such as cancellation or reaudit, etc., according to its documented procedures. In this case, the certification activity fee cannot be charged by the CB to the audited organization. The CB cannot demand any charges from the object organization of that certification activity.
- 23.8. The suspension period will not exceed six (6) months in principle, but it may increase depending on the decision of the ADMC. Once decided, the suspension is valid during the period, even if the cause of suspension is resolved before the end of the period. Accreditation will be withdrawn if the suspended CB, without reasonable excuse, cannot prove to GSTC that the cause of suspension has been resolved or cannot meet the lifting conditions determined by the ADMC.
- 23.9. Should suspension occur, the CB's ability to deliver services within its accredited scope will be temporarily restricted. This can apply to either the entire scope or a specific part of it. The precise details and timeframe of this restriction shall be clearly outlined in the suspension notice from GSTC.
  - 23.9.1. Suspension permits the CB to continue audits for initial and recertification purposes, but they shall not issue any new accredited certifications or scope extensions within the suspended scope unless the certification process commenced prior to the suspension date and the CB has secured prior written approval from GSTC.

- 23.9.2. The CB shall not contract a new client for the certification of the suspended scope.
- 23.9.3. The CB shall not be able to apply for a new scope extension.
- 23.9.4. The annual fee shall normally be paid during the period of suspension.
- 23.9.5. For assessment-related suspensions, GSTC will not inform the CB about the possible suspension before sending the final assessment report to the CB.
- 23.9.6. For non-assessment-related suspensions (e.g., not responding to the major NCs), the CB shall receive a formal notification with the intention to suspend and the beginning of the suspension process.
- 23.9.7. If a CB fails to pay an invoice and any accumulated interest within **120 calendar days** from the invoice date, GSTC may suspend the CB's accreditation directly, without involving the ADMC. For applicant CBs, the application process shall be suspended. GSTC shall formally notify the CB of the suspension, and for accredited CBs, the suspension will be published on the GSTC website. This provision does not apply where non-payment results from verified invoicing errors or documented force majeure circumstances.
- 23.9.8. For each suspension decision, except for 23.9.7, GSTC will prepare the accreditation report for the ADMC. This report should explain the reasons leading to suspension, provide a justification of the proposed scope for suspension, outline the conditions for lifting the suspension, and include additional details or information necessary for the recommendation.
- 23.9.9. Prior to the report being sent to the ADMC, the CB will have the opportunity to file the EOF within **ten (10) working days**.
- 23.9.10. The decision of the ADMC shall be issued within a time period of **30 calendar days** after receiving the report.

- 23.9.11. Within **five (5) working days** after the decision made by the ADMC, GSTC shall notify the CB regarding the suspension in writing. This should include:
- a. effective date of suspension;
  - b. duration;
  - c. reason;
  - d. scope and condition;
  - e. any other additional information or action; and
  - f. deadline for conformance required by the CB.
- 23.9.12. GSTC Grievance Procedure for Accreditation is applied for appealing the suspension decision.
- 23.9.13. GSTC shall update the record of the accredited CB on the website and publish an announcement along with a brief summary explaining the grounds for suspension. The CB will be provided with an opportunity to review the announcement before publication.
- 23.9.14. The suspended CB may submit a request for an extension of this duration, providing a clear justification to GSTC. Upon providing acceptable justification, the CAO shall grant approval for the extension.
- 23.9.15. Failure to adequately address the issues that resulted in the suspension within the set-out deadline serves as a basis for initiating the withdrawal of accreditation.
- 23.9.16. The suspension shall be lifted once GSTC has verified, through an assessment, that the conditions outlined in the notice of suspension have been appropriately fulfilled.
- 23.9.17. If the suspension was imposed due to a missed payment deadline, it shall be lifted after the payment is received. This decision does not require the preparation of an assessment report for the ADMC.

- 23.9.18. To lift suspensions imposed for reasons other than payment, an assessment report shall be prepared and submitted to the ADMC to request a decision within **ten (10) working days** upon receipt of the report. This report will not be shared with the CB to file the EOF.
- 23.9.19. Within **five (5) working days** of the decision of the ADMC, GSTC shall inform the CB in writing once the suspension is lifted. GSTC shall update the record of the accredited CB on the GSTC website.
- 23.10. GSTC shall continue to conduct surveillance assessments for the CB and its clients throughout the period of the CB suspension.
- 23.11. Withdrawal. A CB shall be subject to a withdrawal of accreditation based on the violations listed in Table 8.
- 23.11.1. GSTC shall prepare the assessment report for the ADMC, detailing the rationale behind the withdrawal and providing any additional information deemed essential for the recommendation.
- 23.11.2. Prior to the report being sent to the ADMC, the CB will have **10 working days** to submit the EOF to GSTC regarding the report.
- 23.11.3. Within **30 calendar days** of receipt of the report, the ADMC shall communicate the decision to GSTC.
- 23.11.4. Within **five (5) working days**, the CB will be notified in writing of the decision regarding the withdrawal. The notice shall include the following:
- a. The effective date of the withdrawal;
  - b. A clear statement of the reason for the decision; and
  - c. The assessment report.
- 23.11.5. The CB may appeal the withdrawal decision using the GSTC Grievance Procedure for Accreditation.
- 23.11.6. GSTC shall publicize the notice of the withdrawal decision on the GSTC website.

23.11.7. Upon confirmation of the withdrawal of accreditation or termination of the GSTC service agreement, the CB shall:

- a. immediately cease all the GSTC certification activities;
- b. provide a list of all clients affected, including their contact information for each client, to GSTC within five (5) working days;
- c. inform all subcontractors, affiliates, partners, and clients in writing of the Withdrawal of Accreditation and its associated implications within **five (5) working days**. This includes detailing requirements for clients to return certificates or outlining the process for transitioning to another CB, among other relevant information;
- d. provide evidence to GSTC of having contacted all of the above within **five (5) working days** of the contact;
- e. cease referencing its accredited status and discontinue using the GSTC logo;
- f. return the Accreditation Certificate to GSTC if a printed copy was obtained;
- g. Certificates issued by the CB at the time of the withdrawal may remain valid for a period of **90 working days**, subject to confirmation by GSTC. This timeframe allows COs (CHs) to enter into a new agreement with another accredited CB. The CAO holds the authority to extend this transition period if necessary.

23.11.8. Once a GSTC accreditation has been withdrawn, it cannot be reinstated. If the CB wishes to be accredited again, it shall initiate the accreditation process anew from the beginning.

23.11.9. For a period of **24 months**, GSTC may choose not to accept applications from a CB whose accreditation has been withdrawn or from new entities that are substantially staffed with personnel associated with the withdrawn accredited CB. This period of

non-acceptance is typically imposed to allow for a cooling-off period and to ensure that the accreditation process remains independent and unbiased.

**Table 8. Violations, sanctions, and potential situations leading to sanctions**

Item	Violations	Sanctions			
		1st violation	2nd violation	3rd violation	4th violation
1	CB has been accredited or maintained accreditation falsely or in fraudulent ways.	Withdrawal			
2	Not conducting corrective actions to the cause of suspension without any valid excuse before the suspension period ends.				
3	Conducting audits other than surveillance or issuing certificates containing the GSTC logo or GSTC accreditation mark during the suspension period.				
4	Making, retaining, or controlling fake audit records without conducting the audit.				
5	Impartiality or independence is not assured by the CB's organizational structure and operation.	Suspension for 1 to 3 months	Suspension for 3 months	Withdrawal	
6	Conducting certification activity outside the GSTC accreditation scope.				
7	CB's auditor audits an organization to which he/she provided consultancy.				
8	Fake audit records have been made, retained, or controlled as if the planned audit was completed when only a part of the planned audit was conducted.				

9	CB gives the GSTC false information or conceals, minimizes, or falsifies part of the information in response to the GSTC's request.				
10	Issuing a certificate for an organization whose management system or operations are nonconforming to relevant certification requirements.	Suspension for up to 1 month	Suspension for 1 to 3 months	Suspension for 3 months	Withdrawal
11	Making, keeping, or manipulating false records in cases other than items 4 and 8.				
12	Providing consultancy by CB's employee or auditor against the consultancy prohibition rules in cases other than item 7.				
13	Rejecting or hindering GSTC's direction or supervision without any valid excuse.				
14	Allocating an audit team that does not meet competency requirements and conducting audits.	Warning	Suspension for up to 1 month	Suspension for 1 to 3 months	Withdrawal
15	Lack of collaboration with scheduling or undergoing the GSTC assessment.		Intensive Surveillance	Suspension for 1 to 3 months	Suspension for 3 to 6 months
16	Issuing a certificate for an organization that is nonconforming to the accreditation requirements.				
17	Improper use of the GSTC Accreditation Logo and the GSTC Accreditation Symbol (against the GSTC Logo Usage Procedure), incorrect reference to the certification scheme, or misleading use of licenses, certificates, logos, or claims found in documentation or other publicity may lead to consequences or sanctions as defined in the applicable usage		Suspension for up to 1 month	Suspension for 1 to 3 months	Suspension for 3 to 6 months

	guidelines or agreements with GSTC.				
18	Failure to submit the Root Cause Analysis, Correction, and planned Corrective Actions for NCs within the specified deadline.		Suspension for up to 1 month	Suspension for 1 to 3 months	Suspension for 3 to 6 months
19	Root Cause Analysis, Correction, and planned Corrective Actions for NCs are insufficient or unsatisfactory even after further has been requested for the CB.		Suspension for up to 1 month	Suspension for 1 to 3 months	Suspension for 3 to 6 months
20	Breach of obligation in the GSTC Certification Body Licensing Agreement (CBLA).		Suspension for 1 to 3 months	Suspension for 3 to 6 months	Withdrawal
21	Intensive surveillance or suspension is recommended by accreditation assessment reports, the Chief Assurance Officer, or the ADMC.	Intensive Surveillance	Suspension for 1 to 3 months	Suspension for 3 to 6 months	Withdrawal
22	Discrediting or damaging the GSTC's reputation, such as making or supporting incorrect or criticizing public statements about the GSTC system, process, and teams.	Suspension for 1 to 3 months	Suspension for 3 to 6 months	Withdrawal	
23	Performing certification activities/services in a region without satisfying legal requirements such as local laws, permits, etc.	Suspension for 3 to 6 months	Scope reduction	Withdrawal	
24	Not paying the responsible fees to GSTC.	Warning	Suspension for up to 1 month	Suspension for 1 to 3 months	Suspension for 3 to 6 months

*Note. The sanctions are not limited to the violations listed in Table 8. GSTC may consider other violations and apply appropriate sanctions as deemed necessary.*

## PART 8: COMPLAINTS AND APPEALS

### 24. Complaints and Appeals

24.1. GSTC addresses stakeholder complaints and appeals against its accreditation activities in accordance with established procedures.

24.1.1. An appeal is raised by a CB to request reconsideration of any adverse accreditation decision made by GSTC regarding its desired accreditation status. Adverse accreditation decisions can include GSTC's decisions on:

- a. refusal of accreditation application;
- b. refusal or discontinuation of assessment progression;
- c. reducing accreditation scope;
- d. suspending or withdrawing accreditation.

24.1.2. A complaint is an expression of dissatisfaction related to the activities of the GSTC or of a GSTC-accredited CB, where a response is expected. This is not related to the GSTC accreditation decision.

24.2. Any officially submitted complaint or appeal shall be dealt with based on the GSTC Grievance Procedure for Accreditation.

24.3. When a complaint or appeal concerns a certification body accredited by the NAB under the GSTC Scheme, GSTC shall promptly forward the case to the respective NAB. The respective NAB will handle and resolve such complaints or appeals in accordance with its own procedures and in line with ISO/IEC 17011 and EA requirements. GSTC shall be informed of the outcome and will maintain all related records.

## PART 9: OTHERS

### 25. Transfer of Accreditation

25.1. If an accredited CB (original CB) desires to transfer its accreditation to another CB (recipient CB), different approaches shall be applied as follows:

25.1.1. The CBs involved shall inform GSTC of any significant transfer events.

25.1.2. In the event that the original CB decides to reduce its scope or withdraw accreditation, the applicable procedures in Section 22 shall be followed after completing the transfer.

25.1.3. If the recipient CB is already accredited by GSTC for the relevant geographic and technical scope, the CB may coordinate the transfer of certificates and contractual agreements with its clients directly. A formal transfer of accreditation may not be necessary in such cases.

25.1.4. If the recipient CB is not accredited by GSTC, the CB shall initiate the GSTC accreditation application process to proceed with the transfer.

25.1.5. If the recipient CB is partially accredited (e.g., only needs to extend a technical scope), the recipient CB shall apply for a scope extension unless a specific situation, as outlined below, is applicable.

25.2. The recipient CB must notify all relevant stakeholders, including clients, subcontractors, and regulatory authorities, of the transfer of accreditation and provide continued service quality and compliance.

25.3. The original CB shall provide the recipient CB with all relevant documentation and records pertaining to the transferred accreditation within a specified timeframe.

25.4. GSTC may implement a streamlined process for transferring the accreditation in cases where the recipient CB:

25.4.1. shares common ownership and control with the original CB, or

- 25.4.2. has been a subcontractor of the original CB, managing a substantial part of the certification activities under GSTC accreditation for the preceding 18 months.
- 25.4.3. Details of this process shall be communicated to the CB individually in written form as needed.
- 25.5. For minor changes (e.g., change of CB's name) that do not involve the transfer of accreditation to another legal entity, GSTC has the discretion to acknowledge these changes based on the documentation submitted.
- 25.6. Closing all open NCs shall be under the responsibility of the recipient CB.

## **26. Discontinuation of the GSTC Accreditation Services**

- 26.1. GSTC may discontinue its accreditation services, in part or in full, under any of the following circumstances:
  - 26.1.1. GSTC develops a new accreditation model that replaces the existing scheme.
  - 26.1.2. The GSTC Board decides to close the GSTC accreditation program.
  - 26.1.3. The GSTC Board decides to close the organization.
  - 26.1.4. Serious legal disputes related to the accreditation leading to no capacity to manage the accreditation; or
  - 26.1.5. GSTC determines that providing the accreditation service is no longer economically viable.
- 26.2. Before deciding to discontinue the accreditation service, GSTC shall consider at least the following aspects:
  - 26.2.1. The views of relevant interested parties, including accredited CBs, applicants, and other affected entities.
  - 26.2.2. Existing contractual obligations with accredited and applicant CBs.
  - 26.2.3. Transition arrangements necessary to mitigate impacts on certified organizations and accreditation stakeholders.

- 26.2.4. External communication requirements to ensure transparency, clarity, and timely public announcements.
- 26.2.5. Publication of relevant information to ensure all interested parties have access to the necessary details.
- 26.3. If GSTC decides to discontinue the accreditation service, in part or in full, it shall:
  - 26.3.1. Develop and communicate a transition plan outlining timelines, obligations, and the date of discontinuation.
  - 26.3.2. Allow accredited CBs a defined transition period to complete outstanding obligations, where feasible.
  - 26.3.3. Provide guidance to CBs for managing certified clients during the transition.
  - 26.3.4. Publish an official announcement of the discontinuation on the GSTC website and other appropriate channels.
  - 26.3.5. Notify all relevant parties, including CBs, accreditation partners, and affected stakeholders, in writing
- 26.4. Upon discontinuation, GSTC shall notify all relevant stakeholders of the prohibition of continued use of any GSTC accreditation mark, claim, or reference that may be misleading or cause confusion. GSTC shall establish clear measures and deadlines for removing such references from promotional materials, certificates, websites, and any other medium where they appear.

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