



Recognition Request Form

SCOPE-SPECIFIC REQUEST | RECOGNITION AND RELATED ASSURANCE ROUTING

01 APPLICANT AND REQUESTED PROGRAMME

Complete the relevant fields in English. Use N/A with a reason where applicable. Save your completed PDF and return it through the verified AF channel. Do not submit passwords, payment-card details or unapproved controlled material.

1 Applicant and accountable contact

Applicant legal entity / individual name *

Registration / identifying reference as relevant

Jurisdiction / country *

Authorized contact and capacity *

Email *

Telephone with country code

Representative authority evidence reference

Relevant business / correspondence address

AF membership ID, if any (not a prerequisite)

Existing application / attestation reference

2 Requested action and result

Request stage

Result requested - AF confirms the appropriate programme

Named programme / profile and revision, if known

Applicable AF standard / criteria edition, if known

This form does not award recognition or authorize operation. Membership, payment or training does not guarantee a result. Any accreditation, certification or AF authorization is a separate bounded decision.

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02 TECHNICAL OBJECT AND SCOPE

3 Object routes - select separately where applicable

- | | |
|---|--|
| ☐ ORG - organization / management system | ☐ PRD - product / system / family / batch |
| ☐ SVC - defined service | ☐ PRC - defined process |
| ☐ PER - personnel / role competence | ☐ SUB - supplier / subcontractor scope |
| ☐ CAB - conformity-assessment body | |
-
- | | | |
|---|---|--|
| ☐ Civil aviation and operations | ☐ Space systems and operations | ☐ Military aviation |
| ☐ Land defense industry | ☐ Naval and maritime defense | ☐ Heavy / advanced industry |
| ☐ Defense / space-purpose mobility | ☐ Manufacturing and supply chain | ☐ Digital, AI and cybersecurity |
| ☐ Testing and technical services | ☐ Research and education | ☐ Other related activity |

Exact activities and lifecycle responsibilities requested for evaluation

Object identity: product / configuration / family / lot / role / method; identify each selected route separately

Method, range, units or operating domain

Relevant territory / evaluated period

Explicit exclusions, interfaces, outsourced responsibility and scope limits

Requested basis - subject to approved profile

- ☐ Ongoing capability / family
 ☐ One identified instance
 ☐ To be determined

Exact intended public claim or use of the requested result

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03 SITES, PEOPLE AND READINESS

4 Sites and remote functions

List every included operating site or distinct remote function. Attach a complete schedule if more rows are needed; no site-sampling entitlement is created by this form.

Site / country / address or ID	Activities / method families / shifts	Personnel / critical operations / scope

Personnel in proposed scope (number / basis)

External providers / subcontracted work reference

Key facilities, equipment, methods, competence and supporting technical resources

Proposed AF criticality, only where applicable - technical review required

Consequence and critical-control basis; do not substitute financial value or a marketing category

Actual implementation / operating evidence date

Internal audit date / reference, where required

Management review date / reference, where required

Readiness / missing requirements explanation reference

A start-up may identify the evidence actually available; fabricated operating history is not requested. Programme/profile criteria, methods, essential controls and decision rules must be approved before evaluation.

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04 EVIDENCE, PREVIOUS STATUS AND SPECIALIST MODULES

5 Evidence inventory - identify available items and gaps

Evidence group	Reference / date / status / gap

Relevant groups: legal identity/authority; management controls and scope; personnel competence; methods/validation; facilities/equipment/measurement; sample work, adverse outcomes and corrections; internal audit/review where required. Use the full approved profile rather than this short inventory as the acceptance criteria.

Current/prior attestations, issuers, exact scope, restrictions, suspension, refused applications or relevant unresolved findings

6 Additional route information - only if selected

CAB: requested provider activities, method families/ranges, independence, report examples and representative witnessing access

PER: role/task profile, prerequisites, practice, learning, essential skills and available assessment evidence references

Education, research or other programme recognition: exact programme, delivery sites/modes, outcomes and applicable published criteria

A laboratory network listing is not accreditation. A quality-system conclusion does not establish every method's competence. No supporting record is treated as a valid credential without verification of its actual issuer, scope and status.

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05 ACCESS, INDEPENDENCE AND APPLICANT DECLARATION

7 Lawful access and evaluation feasibility

Preferred method (not a guaranteed entitlement)

☐ On-site ☐ Hybrid ☐ Remote where adequate

Available dates / time zones / language

Site / technical / security access contact

Controlled data, confidentiality, transfer or physical-access restrictions and proposed secure review arrangements

Relevant AF relationships, consultancy, shared ownership, financial interests or concern about evaluator independence; write None if none

Scheme/profile terms and fee proposal reference received

Existing AF authorization MoU reference, only if applicable

An authorization MoU is required only for the delegated AF activities defined in AF-CON-001 Article 18 and AF-SR-001, not merely to request recognition. Remote preference does not replace necessary site or method witnessing. Further agreement is required for any undisclosed fee or condition.

8 Declarations

- ☐ The information and evidence are accurate to the best of my knowledge, including relevant adverse results and limitations. I have authority to submit for the stated applicant.
- ☐ I will provide the agreed lawful evidence access, cooperate with evaluation and report material changes. I do not authorize uncontrolled transfer of protected material.
- ☐ I accept only the identified applicable rules and terms actually supplied. I understand the independent decision, continuing obligations and permitted marks are limited to the granted scope.

Name of signatory

Date (YYYY-MM-DD)

Signature / certificate-based digital signature

Sign in a compatible PDF signing application or sign a printed copy.

Use the agreed signing method. A typed name is not a digital signature or an AF approval.

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06 ATTACHMENTS, PRIVACY AND AF INTAKE

9 Attachment and continuation record

Attachment / route / title	Reference / version / date	Custodian / protected access arrangement

Other material information, additional routes or missing-profile questions

Privacy: information is used to review the exact recognition or assurance request, arrange competent evaluation and maintain the required case and status records, verify the relevant facts and keep necessary records under AF-PL-018. The issued activity privacy notice states the responsible entity, lawful bases, recipients, transfers, retention and available rights. Optional publicity choices are separate and may be withdrawn prospectively through the stated contact. Do not include unnecessary personal or controlled technical information.

AF Application review - not the final conformity decision

Case ID / actual receipt date

Responsible legal operator / scheme authority

Confirmed route / profile / version / readiness reference

Reviewer / authority / competence / independence record

Lawful access / feasibility / contract review

Admit for evaluation / defer / refuse with reasons reference

Independent review, decision, attestation and any operating authority are recorded separately in AF-FR-015 and the applicable authorization instruments. No signature or intake entry here grants those statuses.

AF Issue details - AF completes before circulation

Responsible legal entity / organizer

Activity privacy notice reference / version

Verified return channel

Verified privacy contact