**ILNAS/PSCQ/F003**

**Assessment report**

Modifications: Nonconformity definition adopted from

ISO/IEC 17021:2011

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# Assessment report summary

|  |  |  |  |
| --- | --- | --- | --- |
| **Assessed entity** |       | **Identification n°** |       |

|  |  |  |  |
| --- | --- | --- | --- |
| **Supervision standard(s)** | *Type of assessment*  | **Assessment date(s)****Report date** |       |
|       | Initial supervision | [ ]  | extension | [ ]  |  |       |
|  | surveillance | [ ]  | additional | [ ]  |  |       |
|  | renewal | [ ]  |  |  |       |

|  |  |
| --- | --- |
| **Scope of supervision** |       |

|  |
| --- |
| **Assessment team**LA = Lead Assessor, A = Technical Assessor, E = Expert, O = Observer |
|       |       |       |
|       |       |       |
|       |       |       |

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| --- | --- | --- | --- | --- |
| **Report type** | **Preliminary report** | [ ]  | **Final report** | [ ]  |

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| --- | --- |
| **Report contents** | **Number of pages** |
| 1. Assessment Report Summary (chapter 1)
 |       |
| 1. Assessment program (chapter 2)
 |       |
| 1. Attendance rosters for opening meeting (chapter 3)
 |       |
| 1. Attendance rosters for closing meeting (chapter 3)
 |       |
| 1. Summary report of the Lead Assessor and technical remarks (chapter 4)
 |       |
| 1. Non-conformity report (chapter 5)
 |       |
| 1. Corrective action report (chapter 6)
 |       |
| 1. List of documentation reviewed (chapter 7)
 |       |
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|  |       |

# Assessment program

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| **Assessed entity** |       | **Identification n°** |       |
| **Lead Assessor** |       |

The assessment may pertain to one or more standards

|  |  |  |  |
| --- | --- | --- | --- |
| **Supervision standard(s)** | *Type of assessment*  | **Assessment date(s)** |       |
|       | Initial supervision | [ ]  | extension |[ ]   |       |
|  | surveillance |[ ]  additional |[ ]   |       |
|  | renewal |[ ]   |  |       |

|  |  |
| --- | --- |
| **For initial assessments: date of document review** |       |

| **Date and time** | **Reference section** | **Names of assessors** | **Persons encountered** |
| --- | --- | --- | --- |
|       |  | Opening meeting | See chapter 3  |
|       |       |       |       |       |
|       |       |       |       |       |
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|  |  | Closing meeting | See chapter 3  |

|  |
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| **Remarks:** |
| **Page/Total number of pages:** **/****\_**  |

# Attendance rosters for opening/closing meeting

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| --- | --- | --- | --- |
| **Assessed entity** |       | **Identification n°** |       |

|  |  |  |  |
| --- | --- | --- | --- |
| **Opening meeting** |[ ]   | **Date of meeting** |       |
| **Closing meeting** |[ ]

| **Representatives of organization being assessed** | **Function title** | **Signature** |
| --- | --- | --- |
|       |       |       |
|       |       |       |
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|       |       |       |

| **Assessment team** | **Function in team** | **Signature** |
| --- | --- | --- |
|       |       |       |
|       |       |       |
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# Summary report of the Lead Assessor and technical remarks

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| --- | --- | --- | --- |
| **Assessed entity** |       | **Identification n°** |       |

| **Lead Assessor’s overall conclusions**Comments on the development of the assessed entity's management system. |
| --- |
|  |
|       |
| **Strong areas** |
|       |
| **Weak areas** |
|       |

| **Lead Assessor's recommendation** |
| --- |
| Remark: Clearly state the recommendation as to the awarding, continuing, withdrawing, etc. of the supervision status. |
|       |

| **Technical remarks** |
| --- |
| **Name of Technical Assessor** |       |
|       |
| **Strong areas** |
|       |
| **Weak areas** |
|       |
| **Assessed technical areas and persons interviewed** |
|       |

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# Non-conformity reports

|  |  |  |  |
| --- | --- | --- | --- |
| **Assessed entity** |       | **Identification n°** |       |
| **NCR n°** |       |

**Major nonconformity[[1]](#footnote-1):** failure to fulfil one or more requirements of the management system standard, or

 a situation that raises significant doubt about the ability of the client’s management system to achieve its intended outputs

**Minor nonconformity:**  failure to completely fulfil one or more requirements of the management system standard, or

a situation that raises doubt about the ability of the client’s management system to achieve its intended outputs

**Comment:** concerns an arrangement needing to be more formalized or specified.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ASSESSOR | Finding : | - comment [ ]  | - nonconformity [ ]  | - major nonconformity [ ]  |
| Standard(s) & clause(s) : |  |
| Nonconformity relates to : | - application [ ]  | - documentation [ ]  |  |
| Description  : **Note:** In the case of a major nonconformity, please describe the risks associated with the finding     . |
| Date :       | Assessor :       | Signature :       |
|  |
| assessed entity | Assessed entity's agreement with the finding : | - yes [ ]  | - no [ ]  |
| Remarks of the assessed entity :       |
| Date :       | Name :       | Signature :       |

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# Corrective action report

|  |  |  |  |
| --- | --- | --- | --- |
| **Assessed entity** |       | **Identification n°** |       |
| **CAR n°** |       |

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| --- | --- |
| assessed entity | Note:The TSP shall provide ILNAS with a Corrective Action Report (CAR) detailing the results of the following actions:• an analysis of the root-cause and the extent of a nonconformity• actions focused on removing the root-cause• recall and correction of nonconforming products or services that were provided• demonstration of the effectiveness of the actions by a self assessment (for example by a special internal audit focused on the problems in question)      |
| Deadline for application (cannot exceed three months after the date of the assessment) :  |       |
| Date :       | Name :       |
|  |
| ASSESSOR | Is the suggested corrective action appropriate? | - yes [ ]  | - no [ ]  |
| Remarks :       |
| Date :       | Assessor :       |

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The corrective action report should be submitted by the assessed entity to the assessment team within 30 days following the assessment

# List of documentation reviewed

|  |  |  |  |
| --- | --- | --- | --- |
| **Assessed entity** |   | **Identification n°** |   |

| **TSP document** | **Document identification** | **Remarks** |
| --- | --- | --- |
| Certificate Policy (or Policies) |     |     |
| Certification Practice Statement |     |     |
| Terms and conditions of the TSP services |     |     |
| Agreement between TSP and subscriber / subject |     |     |
| Management system policy |     |     |
| Information security risk analysis method |     |     |
| Information security risk analysis results |     |     |
| Procedures for quality and information security management |     |     |
| EDP Audit statement(s) on Trustworthy Systems |     |     |
| Documentation and certificate(s) of Cryptographic Equipment |     |     |
| Documentation and certificate(s) of Secure Signature Creation Devices provided to subjects |     |     |
| Evidence of compliance of qualified signatures |     |     |
| Records of internal TSP audit(s) |     |     |
| Records of TSP management review meeting(s) |     |     |
| Cross reference list between supervision standard(s) and TSP documentation |     |     |
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1. Extract from ISO/IEC 17021 :2011 article 9.1.15.b [↑](#footnote-ref-1)