|  |  |
| --- | --- |
|  | Application form(before signing, filled application should be sent in editable format /\*.docx/) |
| Registration No: | Date of registration: |

|  |  |  |  |
| --- | --- | --- | --- |
|  | Filled by QCC  |  | Filled by Applicant |
| **Aplicant/Service provider data:** |
| Name and address of the Applicant |  |
| VAT No. |  |
| Contact person(name, surname, position, telephone, e-mail) |  |
| Name and address of Service provider (if different) |  |

|  |
| --- |
| **Goal of assessment:** |
| Assessment of trust services(certificate of conformity and assessment report) | [ ]  |
| Re-evaluation of trust services (certificate of conformity and assessment report) | [ ]  |
| Certificate update | [ ]  |
| **Trust Service to assess:** |
| Qualified electronic registered delivery service | [ ]  |
| Other service | [ ]  |
| **Additional information:** |
| Designation of services(special markings of the services provided, these markings will appear in the certificate of conformity and the assessment report) |  |
| Organization size and locations(number of employees, headquarters, offices, data center, call center, etc.) |  |
| Has the organization been assessed/certified in the past?Which institution has performed the assessment/certification?Based on what criteria?(in the area of ​​trust service providers and trust services) |  |
| Other compliance certificates(ISO 9001, ISO 27001 etc.) |  |
| Details of the outsourced services(external RAs, colocation services, notified eIDAS identification systems) |  |
| Additional information for QCC(organizational / time limitations, additional copies, translation of the certificate) |  |
| I agree to publish the certificate on the QCC website | yes | [ ]  |
| no | [ ]  |
| **Annexes:** |
| Annexes to the application | [ ]  |
| Information on annexes(if applicable) |  |

The Applicant declares that:

1. Has the right to dispose of the service and its documentation for the purpose of submitting this application.

2. The documentation attached to the application is up-to-date and relates to the service for which the application is submitted.

3. Knows the current legal status and standardization status in the scope of the requested assessment.

4. Will fulfill the requirements set by QCC as part of the process and provide QCC with information necessary for the assessment.

5. In the process of creating the service, technologies or other studies of the Military University of Technology are not used. In case of use, the Applicant will report this fact and provide information to the QCC.

Moreover, it acknowledges that:

1. The condition to start the assessment and verification process is the receipt of a correctly completed application by QCC.

2. A written confirmation of the verification of the correctness of the provisions contained in the application along with the date and cost of the service (offer) will be sent for approval by the Applicant. Acceptance of the offer and signing by the Applicant with QCC of the contract for the certification process is necessary to continue the assessment process.

3. The Applicant acknowledges that the certificate will be issued after the assessment has been passed with a positive result and all financial obligations towards QCC have been settled.

4. Lack of timely payments is the basis for suspending future works in the certification process carried out by QCC.

5. The Applicant (indicated in application) will be the certificate holder and party to the contract.

6. He has the right to lodge a complaint the activities of QCC at every stage of the certification process and the right to appeal against the decision of the QCC Director.

QCC declares that:

1. Has legal personality and liability insurance.

2. Has sufficient resources necessary to carry out the certification process and verify the properties of the service submitted.

3. While conducting the process, QCC will apply the provisions of the Service Certification Program.

The processing of the Applicant’s personal data, specified in the contract and on the prepared forms in connection with the implementation of this contract, takes place on the terms set out in Regulation (EU) 2016/679 of the European Parliament and of the Council of 27 April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data, and repealing Directive 95/46/ EC (General Data Protection Regulation), hereinafter referred to as GDPR.

The Contractor informs the Applicant that the administrator of personal data is Military University of Technology, Warsaw (code: 00-908) gen. Sylwester Kaliski 2 Street. The data administrator has appointed a data protection supervisor overseeing the correct processing of personal data, e-mail: iod@wat.edu.pl, phone No. 261 839 950.

1. Personal data will be processed in order to conclude and perform the contract of mandate and perform the tasks of the data administrator resulting from this contract pursuant to Article 6 (1) points b, c, f GDPR.

2. Providing the data is voluntary, but necessary to achieve the purposes for which it was collected.

3. Personal data will be stored for the duration of the contract and the limitation periods for asserting possible claims and documenting for tax purposes.

4. The Contractor has the right to access their data and, subject to the provisions of the law: the right to rectify, delete, limit processing, the right to transfer data, the right to object.

5. The Contractor has the right to lodge a complaint with the President of the Personal Data Protection Office, if he considers that the processing of his personal data violates the provisions of the GDPR.

|  |  |
| --- | --- |
| .......................................Place, date | ………..……………....................Applicant signature |

|  |
| --- |
| Comments and objections to the submitted application (filled by the person who receive or lead the application, as required): |
| I confirm the correctness of the submitted application…………………………..………………………………Date and signature of the person reviewing the application | QCC…………………………………………………………Name, surname and signature of the Coordinator leading the process |