

**APAC MRA Council: Evaluation Control Record (ECR)**

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| (To be completed electronically and circulated among the Team Leader, the MRA MC Chair & the APAC Secretariat)   |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | | **Colour Key:** To be completed as indicated | | | | | | | |  | **MRA MC Chair** |  | **Evaluation Team Leader** |  | **APAC Secretariat** |  | |  | | | | | | | |

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| **AB Name:** |  | | | | | | |  |
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| **Evaluation Type:** |  |  | **Month Due:** |  |  | **MRA Council review and eBallot:** |  |  |
|  | | | | | | | | |
| **MRA Scope:** | **Current (re-evaluation)** | | **Requested (initial / extensions)** | |  | **Additional Comments:** | |  |
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| **Team Leader / Lead Evaluator Appointment** | | | | | | | | | | | | | | | | | | | |
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|  | **Name** | | | | **AB** | | **MRA MC Approve** | | | **Secretariat (insert dates)** | | | | | | | | |  |
| **(Date)** | | | **Evaluation Schedule** | | | | | **Evaluator List** | | | **Appointment Letter** |
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| **Changes:** | | | | | | | | | | | | | | | | | | | |
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|  | **Date** | **Description of & Reason for Change** | | | **MRA MC Chair** | |  | | | **Secretariat (insert dates)** | | | | | | | | |  |
| **(Initial)** | **(Date)** |  | | | **Evaluation Schedule** | | | | | **Evaluator List** | | | **Appointment Letter** |
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| **Evaluation Dates and Evaluation Team Appointment** | | | | | | | | | | | | | | | | | | | |
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|  | **Confirmed Dates** | | **Comment / Reasons (if not on or before month due)** | | | | | | | | | | | | | | | |  |
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|  | **Evaluation Team Member Name** | | | | **AB** | | **APAC Qualification** | | | | | | **Role** | | | **Evaluation Scope** | | |  |
| (**LE / Eval / Prov Eval)** | | | | | |
|  | | | |  | | LE | | | | | | Team Leader | | |  | | |
|  | | | |  | |  | | | | | | Team Member | | |  | | |
|  | | | |  | |  | | | | | | Team Member | | |  | | |
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|  | | | |  | |  | | | | | | Team Member | | |  | | |
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|  | **MRA MC Chair Approval (confirmed dates & team) & Comment** | | | | | | | | | **Secretariat** | | | | | | | | |  |
| **(Initial)** | **(Date)** | **(Comments)** | | | | | | | **Evaluation Schedule** | | | | | **Evaluator List** | | | **Appointment Letters** |
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| **Changes:** | | | | | | | | | | | | | | | | | | | |
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|  | **Date** | **Description of & Reason for Change** | | | | | **MRA MC Chair** | | | **Secretariat** | | | | | | | | |  |
| **(including full details of additional or replacement TMs and/or change of dates)** | | | | | **(Initial)** | **(Date)** | | **Evaluation Schedule** | | | | | **Evaluator List** | | | **Appointment Letters** |
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| **Evaluation Activities** | | | | | | | | | | | | | | | | | | | |
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|  | **Date** | **Note any significant departures from APAC MRA-001 in the evaluation process** | | | | | | | **MRA MC Chair** | | | | | **Comment** | | | | |  |
| **(Initial)** | | **(Date)** | | |
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| **Post On-Site Evaluation Reporting Activities** | | | | | | | | | | | | | | | | | | | |
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|  | **Activity** | | | | | | | | | | | | | **Date** | | | **Target** | |  |
| Draft report to AB | | | | | | | | | | | | |  | | | +2 months | |
| Corrective Action & Response Report from AB | | | | | | | | | | | | |  | | | +1 month | |
| Evaluation Team Reply | | | | | | | | | | | | |  | | | +1 month | |
| Final Report and Letter of Recommendation to: AB | | | | | | | | | | | | |  | | | +1 month | |
| APAC Secretariat (see below) | | | | | | | | | | | | |  | | |
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| **Reporting to the APAC Secretariat (Team Leader Report Checklist)** | | | | | | | | | | | | | | | | | | | |
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| The following information for each evaluation and follow-up visit must be sent by the team leader to the APAC Secretariat electronically (as Word documents). Signed originals are to be scanned and sent as electronic copy:  1. Final report (using the report template given in IAF/ILAC-A3), including the accreditation body’s corrective action and response report (corrective actions and summary evidence of effective implementation to Nonconformities, action plans to Concerns and responses to Comments);  2. A letter detailing the evaluation team’s recommendation to the APAC MRA Council;  3. Any information and documentation provided to support the corrective action and response report;  4. APAC MRA Evaluator & Technical Expert Performance Logs (APAC FMRA-008) for each team member. | | | | | | | | | | | | | | | | | | | |
|  | **Document(s)** | | | **Electronic Copy (MS Word)(1)** | | | | | | | | **Scanned Copy(1)(2)** | | | | | | |  |
|  | 1. Final Report | | |  | | | | | | | |  | | | | | | |  |
|  | 2. Letter of Recommendation | | |  | | | | | | | |  | | | | | | |  |
|  | 3. Supporting Information | | |  | | | | | | | | Not required | | | | | | |  |
|  | 4. Evaluator & Technical Expert Performance Logs | | |  | | | | | | | | Not required | | | | | | |  |
|  | Return this completed form to the Secretariat | | |  | | | | | | | | Not required | | | | | | |  |
| (1) Note date sent to Secretariat  (2) The scanned copy of the final report must be accompanied by the scanned copies of the signed Declarations of Confidentiality (APAC FGOV-007) | | | | | | | | | | | | | | | | | | | |