


# Guidelines for the EQUASS Excellence Application



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## Guidelines for the EQUASS Assurance application form

### 1. Name of the Organisation

State the name of applicant, which may be the organisation, department of an organisation, subsidiary of organisation applying for the EQUASS Assurance Certification.

### 2. Name of the Applicant (site)

State the name of the site to be audited. If there is more than one site to be audited, the additional sites will be entered in Annex A.

*(For multiple site application you also have to fill in the required information in Annex A: Multi Site)*

### 3. Address

State the address / location of the applicant including the street, postal code, city and the country in which the applicant is located.

*(For multiple site application you also have to fill in the required information in Annex A: Multi Site)*

### 7. Telephone

State the telephone number of the applicant including the country dialling code.

### 9. E-mail Address

State the e-mail address of the person in charge of the application.

### 10. Web site address

State the web site of the applicant or of the applicant's organisation.

### 11. Chief Executive Office

State the name of the applicant's CEO or legal representative

### 12. Contact person

State the name, function and contact details of the applicant's contact person.

*(For multiple site application you also have to fill in the required information in Annex A: Multi Site)*

### **13. Scope**

Shortly describe the type of the activities performed by the department(s) to be audited. (e.g.: Vocational rehabilitation”, “Early intervention or “Emergency Services for the Homeless”).

Advise if your organisation is applying for one site or several. This scope must be consistent with the information provided on 19. below, on the printed certificate as well as on the EQUASS Website.

### **14. Sector**

Advise the percentage of activity that is for profit; not for profit.

### **15. Clients:**

State the number of persons served *within the scope of the application*: those persons who receive social services at defined date. Please mention the date of this observation.

*(For multiple site application you also have to fill in the required information in Annex A: Multi Site for each additional site)*

### **16. Staff:**

Indicate the size of the staff involved *in the scope of the application*: the number of full time staff, part time staff, volunteers and contracted staff employed. Add a list of professional functions of the full scope which is employed in the organisation. (Annex B, max 2 x A4)

### **17. Applicant size:**

Following the previous question, advise which category your organisation belongs to.

### **18. Service areas**

Please add a description of services.

*(For multiple site application you also have to fill in the required information in Annex A: Multi Site)*

## **19. Certificate information**

We want our customers to be perfectly happy with the certificate that will be framed over their desks for three years, and shown to their staff, clients and external stakeholders, so please make sure you are happy with how the name is displayed.

Should your company change its official name in the three-year period, please send us the justifying information, and we will send you a new set of certificates.

## **20. Information to Disseminate**

Please make sure you enter data that you are comfortable sharing via our system for dissemination of certification. The e-mail address will be published, so you may prefer to give a general e-mail address. Likewise, the contact person might be contacted by outside parties that found her/his name the dissemination publications.

## **21. Quality Management System of the organisation**

List the names, if any, of quality systems operational in your organisation in the past five years. If you have been externally assessed by quality auditors, include the date of the last award and, if appropriate, the area of the organisation to which it has been awarded e.g. finance, personnel etc.

This goes into Annex C (maximum 2 pages A4)

## **22. Mission Statement**

Describe in a few words the mission statement (statement of purpose) of the applicant.

This goes into Annex D (maximum 1 pages A4)

## **23. Applicant History**

Please shortly describe the history of your organisation.

This goes into Annex E. (Maximum 2 pages A4)

## **24. Organisational functional structure / organisational chart**

Please add an organisational functional structure and an organisational chart.

This information goes in Annex F. (Maximum 1 page A4)

### **25. Executive summary of Current Strategic Plan**

Please add Executive summary of Current Strategic Plan.

This information goes in Annex G. (Maximum 2 pages A4)

### **26. Evidence of internal and external programme approval by national authority**

Please add a copy of the document that you are officially recognised by the National authority for providing the social services.

This information goes in Annex H.

### **27. Summary record of outcomes and results obtained in the past year**

Please give an overview of the main financial and non-financial results (achievements) of the past year.

This information goes in Annex I.

### **28. List of staff qualifications**

Please give an overview of the functions of staff and the type and level of qualification of these functions. For type of qualification you may use: recognised diploma program or certificate program. For the level of qualification you may use the identified levels of your national qualification scheme.

This information goes in Annex J.

### **29. Overview of results**

Please add an overview of results based on the identified Key Performance Indicators (KPI) in the self-evaluation report. All results must refer to the identified KPIs.

This information goes in Annex K.

### **30. Logo**

Please provide us with a medium-resolution logo that we can use in our presentation and dissemination of certified organisations. The format can be jpg, eps, png or any common image file. You can also copy/paste the logo in a separate word file.

### **Date / Signature of Application**

State the date of submission by the applicant and state the signature of the President / Chief Executive Officer or equivalent of the applicant.

You should scan the ***signed page*** of the application which the CEO or Director of the Organisation has signed.

***Please do not scan and send us the entire application form, only the signed page.*** The application form should be send to us in .doc (Word) format, or in a .pdf format created directly from the Word document.

The application form and its annexes should be send by-mail to [equass@equass.be](mailto:equass@equass.be) at least 6 weeks before the planned audit date. ***Please do not fax or post the application form and its annexes to us.***