



## National Quality Awards Application Form

# NATIONAL QUALITY AWARDS PROGRAMME

## APPLICATION FORM

Information provided to the Trinidad & Tobago Bureau of Standards will be treated with the strictest confidence and will only be used for the application, assessment and evaluation processes of the National Quality Awards Programme.

- 1) Name of Organisation: .....
- 2) Address of Organisation: .....
- 3) Name of Primary Contact: ..... Designation: .....  
Tel. #: ..... Email Address: .....
- 4) Name of Alternative Contact: ..... Designation: .....  
Tel. #: ..... Email Address: .....
- 5) Date of Application: .....
- 6) Type of Enterprise:  Manufacturing  Service  Small Business (Service)  
 Small Business (Manufacturing)  Agro processing
- 7) Number of Employees in the company \_\_\_\_\_
- 8) How long has your company been in operation? \_\_\_\_\_ Years
- 9) Do you have a Tax Compliance Certificate for the company? Yes No
- 10) Is the company registered with the Registrar of Companies? No.
- 11) Is the company National Insurance Scheme Compliant? Yes No.
- 12) To what sector (s) of the economy does your organisation belong?  
 Health  Agricultural  Mining  Tourism  Industrial  Financial  
 Construction  Educational Other: \_\_\_\_\_
- 13) Is the enterprise a subsidiary or franchise of a larger and/or international organisation?  
 Yes  No
- 14) Type of Award for which your organisation is vying:  
 Manufacture Award for Quality  Service Award for Quality  
 Small Business Award for Quality  Agro Processers' Award for Quality
- 15) List two reasons for applying for this award:  
(i) \_\_\_\_\_  
(ii) \_\_\_\_\_
- 16) List the products manufactured or services offered by your organisation:  
\_\_\_\_\_  
\_\_\_\_\_

- 17) To which market (s) does your organisation supply products and/or services?

Local       Overseas       Both

18) Is your organisation currently implementing the requirements of any national or international standard?

Yes       No

If yes, what is the name of the standard?

\_\_\_\_\_

19) From the following, please indicate which manuals/relevant documents are being used by your organization.

Quality Manual/Policy Manual       Best Practices Manual  
 Documented Standard Operating Procedures       Good Agro Processing Manual

If none, please indicate what guidelines are used?

\_\_\_\_\_

20) Is your organisation currently employing at least 50 percent T&T owned?

Yes       No

**Please note that by signing and submitting this application form to the TTBS, you are agreeing to the following:**

- a. The aforementioned information provided is true and correct.
- b. For any justifiable reason your application can be rejected
- c. You will permit, facilitate, and cooperate with a team of assessors during a systems audit of your organisation.

.....  
**NAME OF ORGANISATION REPRESENTATIVE**

.....  
**DATE**

.....  
**SIGNATURE OF ORGANISATION REPRESENTATIVE**

<b><u>Official Use Only</u></b>
Date Received: .....
<input type="checkbox"/> Participation approved <input type="checkbox"/> Participation not approved
Remarks: .....
.....
<b>Signature of NQA Representative:</b> .....
<b>Date:</b> .....