




# Application/Enrollment Form BASE INTERNAL AUDITOR TRAINING

Refer to Course Webpage for Full Details: <http://www.bcforestsafe.org/node/87>

Select your enrollment option: <input type="checkbox"/> Workshop OR <input type="checkbox"/> Challenge (additional fee)		Workshop Date:
<b>Participant Information</b> (complete fully and print clearly)		
Legal First Name	Legal Middle Name	Legal Last Name
Nickname (if applicable)	Former Name (e.g. maiden name)	Birthdate (mm/dd/year) ____ / ____ / ____
Mailing Address (street and/or PO box)		City/Town
Province, Postal Code		
Phone Number	Personal/Cell Phone	Email Address
<b>Food Allergies / Dietary Restrictions?</b> (for workshop)		
<b>Company Information</b>		
<input type="checkbox"/> Employer's Company Name OR <input type="checkbox"/> Your Own Company Name		WorkSafeBC Account Number
Legal Name of Company		Company Trade Name or "Operating As" Name
Mailing Address (Street; PO Box)		City/Town
Province, Postal Code		
Phone Number	Fax Number	Email Address
<b>Work Activity</b> (full-phase logging; silviculture; road building; engineering; other: please indicate)		
<b>Training Option, Payment Details</b> (select one option and your payment method)		
<b>OPTION 1: Workshop Session</b> <input type="checkbox"/> <b>\$525.00</b> (\$500.00 + \$25.00 GST)		
<b>OPTION 2: Challenge Process</b> <input type="checkbox"/> <b>\$94.50</b> (\$90.00 + \$4.50 GST)		
<b>Payment Method:</b> <input type="checkbox"/> <b>Enclosed Cheque</b> (payable to BC Forest Safety Council) <input type="checkbox"/> <b>VISA</b> <input type="checkbox"/> <b>MasterCard</b>		
Name on Card	Expiry Date (MM, YY)	 <p><b>IMPORTANT:</b> Please include <b>CVD</b> (3 digit security code from back of credit card)</p>
Credit Card Number		
Cardholder's Signature		

Your company, personal and financial information is only used for purposes of course enrollment and program management. Confidential information will not be disclosed to third parties. Your information is valuable and we ensure all reasonable measures are taken to protect it.

Send completed form to BC Forest Safety by email: [training@bcforestsafe.org](mailto:training@bcforestsafe.org) Questions? Call us toll-free: 1-877-741-1060

**IMPORTANT NOTES:**

- A) If minimum enrollment is not met two weeks prior to a course start date, we reserve the right to cancel the session and reimburse paid registrants.
- B) Please notify us as soon as possible if you need to withdraw or reschedule your enrollment.
- C) Refunds or credits will not be issued for 'No Shows.' The only exception to this is for unplanned emergencies/illness.



**BASE Auditor Candidacy Competency Matrix**

Parameter	Pts	Scoring	Minimum for Internal	Minimum for External	Maximum Possible
<b>Education</b>	1	Grade 12 Equivalency	<b>1</b>	<b>1</b>	<b>46</b>
	2	Points per two-year post-secondary diploma or certificate in progress In any field Max 2 points			
	4	Points per completed two-year post-secondary diploma or certificate In any field Max 8 points			
	5	Points per four-year post-secondary degree in progress In any field Max 5 points			
	10	Points per completed four-year post-secondary degree In any field Max 30 points			
<b>Industry Work Experience (in any role)</b>	1	Points per whole year Max 10 points	<b>2</b>	<b>2</b>	<b>12</b>
	1	Points per whole quarter employed by or consulting at BCFSC as a reviewer and/ or advisor. Max 2 points			
<b>Experience in Current Company (including consulting company / owner)</b>	1	Points per whole year Max 10 points	<b>1</b>	<b>2</b>	<b>12</b>
	1	Points per whole quarter employed by or consulting at BCFSC as a reviewer and/ or advisor. Max 2 points			
<b>Safety Training and Experience</b>	1	Points per year or part thereof where safety is >49% of your responsibilities Max 10 points	<b>2</b>	<b>5</b>	<b>46</b>
	1	Points per week-equivalent OHS specific training course. Max 5 points.			
	5	Points per year-equivalent OHS-specific post-secondary education Max 20 points			
	1	Current CHSC designation			
	10	Current CRSP designation			
<b>Auditing Experience</b>	0.1	Points per SEBASE / ISEBASE audit performed or reviewed Max 3 points	<b>0</b>	<b>5</b>	<b>24</b>
	1	Points per BASE audit performed Including as a team member Including full and verification Excluding Administrative audits Max 5 points			
	1	Points per large employer COR audit performed for a BC Certifying Partner other than BCFSC Max 5 points			
	1	Points per OHSAS18001 audit lead Max 5 points			
	1	Points per ISO14001 audit lead Max 3 points			
	1	Points per ISO9001 audit lead Max 1 points			
	2	Points per OHS course with auditing content (i.e. ISO auditor, BCIT diploma, CRSP designation). Max 2 points			
<b>Minimum Total</b>			<b>10</b>	<b>20</b>	<b>140</b>

## AUDITOR BACKGROUND INFORMATION

Complete the following information and score your prerequisites in the 'your score' column according to the **BASE Internal (IA)/External (EA) Auditor Candidate Competency Matrix** on page 2 of this form. The BC Forest Safety Council will assign a final review score. Meeting minimum requirements does not guarantee a seat in a particular course.

Information (include designations, training certifications, etc.)		For BCFSC Use Only
<b>Work Experience in Current Industry</b>		
<b>Experience in Current Company</b>		
<b>Safety Training and Experience</b>		
<b>Auditing Experience</b>		
<b>Education</b>		

## Required writing sample

- Write one page (250 – 300 words) about “why I would be a good Internal Auditor”.

*Attach this writing sample page to your application email submission.*

## Participation in Internal Auditor Training – Workshop Session & Student Audit:

- I acknowledge that the BASE 4 audit tool and training course are electronic. I will bring a personal device (laptop, tablet) that runs Microsoft Word 2010 or newer, to use during the session.
- I understand that I will be issued online access and am required to complete this training prior to attending the workshop.
- I confirm that I am a permanent employee of this company or that they have declared me as a dependent contractor on their SAFE Companies registration.
- I understand that I can only conduct maintenance audits for my current employer.
- I will be available to perform my company’s internal maintenance audit (a 5-10 day commitment, depending on company size, including field work and report writing) after attending and completing the course (within 3 years).
- I will be available to complete my competency conversation (maximum 90 minutes) within 14 days of the course. Conversations must be completed within 3 months.

## Participation in Internal Auditor Training – Challenge Process:

- I am an experienced auditor and wish to challenge the training requirements by proceeding directly to the Competency Conversation. I understand that I will receive access to optional online learning resources. If unsuccessful, I acknowledge I will be required to submit the regular course fee, attend the workshop and successfully complete another competency conversation to complete the course.

Date:	
I confirm that the above information is accurate:	

(Applicant’s Signature – digital acceptable)