



Request for the Development of an ASSE Professional Qualification Standard

Name _____
Title _____
Organization _____
Mailing Address _____
City _____ State _____ Zip _____
Phone _____ Email _____

State the scope of the proposed new standard: _____

Suggested Title: _____

Describe the segment of the industry that would be served by this standard:

In what ways does the development of this standard improve or protect the public's safety, health and/or welfare? _____

To your knowledge is there any standard that is similar in scope that presently exist? Yes No

Is so, please advise of the number, designation and the name of the sponsoring organization.

Has a draft for the proposed standard been prepared? Yes No

List documents enclosed including the draft, if any.

Do you foresee individuals being certified to this standard? Yes No

Would a third party certifier other than ASSE be involved in the certification? Yes No

Name of certifier _____

List potential working group participants to assist with the development of this standard.

Name	Organization	email	Phone
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Thank you for supporting the ASSE International Standards Development Program.

ASSE Staff use only Date Received _____ ASSE Draft Standard Number _____
Draft Standard Name _____