



Dubai Quality Award Assessor Application Form - <2009>

First name:	Surname:
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Mobile :

Telephone :	Fax:
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Nationality :	Date of birth:
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**Employer
(Organisation Name) :**

Email :

**Current Position in
your Organisation :**

**Total Number of
Employees reporting to
you :**

Languages Level of proficiency (Please tick as Appropriate)	Languages	Mother Tongue	Reading			Writing		
			Low	Avg.	High	Low	Avg.	High
	Arabic							
	English							
	Others (1).....							

Employer's Address:

**Employer's
Specialisation or main
business activities**

Total Number of Employees (in Dubai):	Total Number of Branches in Dubai:
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<i>Office Use Only:</i>	<i>Comments:</i>	<i>Acceptance</i>	<i>Assessor No.</i>
		YES / NO	

Please summarise the positions held by you during the past 5 years only.
(with the most recent position first):

<p>(1) Date from to.....</p> <p>Job Title:</p> <p>Organisation:</p> <p>.....</p> <p>Business Activity:</p> <p>Number of Employees reporting to you:</p> <p>Your key areas of responsibility:</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>	<p>(2) Date from to.....</p> <p>Job Title:</p> <p>Organisation:</p> <p>.....</p> <p>Business Activity:</p> <p>Number of Employees reporting to you:</p> <p>Your key areas of responsibility:</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>
<p>(3) Date from to.....</p> <p>Job Title:</p> <p>Organisation:</p> <p>.....</p> <p>Business Activity:</p> <p>Number of Employees reporting to you:</p> <p>Your key areas of responsibility:</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>	<p>(4) Date from to.....</p> <p>Job Title:</p> <p>Organisation:</p> <p>.....</p> <p>Business Activity:</p> <p>Number of Employees reporting to you:</p> <p>Your key areas of responsibility:</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>

The Main Academic and Professional Qualifications (not more than 4)

(Include membership of professional institutions for example: Institute of Quality Assurance, Institute of Marketing, American Quality Association, etc.)

Main Academic and / or Professional Qualifications Only (Please do not use abbreviations)	Date Achieved
1.	
2.	
3.	
4.	

Please fax copies of key certificates on 04-2020100 or email on dqa@dubaidded.gov.ae

The Main and Most Recent Training Attended in the last 3 years (not more than 5)

(Please indicate below any relevant training received during the last 3 years only).

Main Training Attended Only	Date
1.	
2.	
3.	
4.	
5.	

Please attach a copy of main certificates only.

Please List: Any Previous Assessor experience if available (e.g. DQA, SKEA, MRM, Baldrige, BQF, EFQM, etc)

	Award's name	Date of Assessment	Place of Assessment	Place of Assessment (Assessors / Team Leader)
1				
2				
3				

Please attach a copy of main certificates only.

Personal Statements

Please summarise (**in less than 5 lines only**) each of the following:

1. Why should you be selected as an Assessor of the Dubai Quality Award?
2. Can you dedicate "Quality Time" for this Process? If so, please state how.
3. Is there any specialty that you will bring to the assessment team? If yes, please explain the same.
4. Will your organisation use your new skills? Please clarify.

Please write in the box provided below (use a separate sheet of paper if required):

1.	
2.	
3.	
4.	

Your Availability:

Please indicate your availability as follows :	Available	Not Available
Are you available during Sep 2009 to receive the pre-course briefing?		
Are you available during Nov 2009 to receive the training?		
Are you available from Dec 2009 – Feb 2010 to conduct the assessments with your team?		
Are you available during March 2010 to conclude the assessments and feedback status?		

Important notes:

Approval from your employer is important. Before signing, please read through the following important notes:

- (1) Applicants will be required to attend 3 days training during November.
- (2) The training will be delivered in English and, therefore, a good command of the English language is expected, both, in reading and writing.
- (3) Before the training commences, all candidates will be required to study and assess a 75-page document representing a fictitious case study which will be given to you at the Assessors Briefing Seminar at least 1 month before the course. The case is written in English. The score and pre course analysis is an integral part of the training process which must reach us at least one week before training commences. **Candidates that do not send back their workbooks will not be allowed to take the training. This course is Free.**
- (4) Whilst you will work under the supervision of a team leader, the applicants are expected to serve in a team of assessors with the responsibility to evaluate and to score upto two submissions. That must be conducted between December and February the following year.
- (5) Each single Assessment requires at least 50 hours of private work, plus one day for pre site visit meeting, two full days for consensus meeting. In addition, Assessors will also require at least two days for site visits.
- (6) Consensus meetings must be held in the morning, preferably at the DED Office or a location convenient to the assessment team. Site visits must be held in the morning at the applicants site.
- (7) This work is completely voluntary. No fees will be paid to new assessors, however, assessors work will be recognised by the Dubai Quality Award Secretariat. A trophy and two certificates will be awarded to each assessor, one for attending the training and one for conducting the assessment. The training will be conducted by an internationally certified trainer.

Applicant's Signature (Acknowledging the Above Responsibility):

Applicant's Name:

Position:.....

Applicant's Signature: **Date:**

Approval by Your Immediate Manager

(or a senior manager acting on his behalf in his/her absence):

Please indicate the degree to which the new skills gained by this applicant will be beneficial to your organisation during next year.

Not beneficial	Moderately beneficial					Highly beneficial			
↓					↓				↓
1	2	3	4	5	6	7	8	9	10

Please tick as appropriate

I have read the above important notes and I have no objection to the participation of the above named applicant.

Manager's Name:

Position:.....

Manager's Signature: **Date:**

Completed Forms should be faxed or emailed back to:
 The Dubai Quality Award Secretariat
 Department of Economic Development
 Fax: **04-2020100**
 Email: dqa@dubaided.gov.ae

For further details please contact:
Telephone:
04-2020218, 04-2020205