CCM-03-A Form 3

Application for Approval of Evaluator Qualification

Date :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

To Commissioner SAITO Yutaka

Information-technology Promotion Agency, Japan

Name of the Applicant :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Person responsible for the application :

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (*Signature*)

Title/Department :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The applicant hereby applies for approval of an evaluator qualification for the evaluator as follows, together with the attached documents,[[1]](#footnote-1) in accordance with the “Requirements for Approval of IT Security Evaluation Facility (CCM-03).”

|  |  |
| --- | --- |
| Scope of Assurance Components being Applied for in the Approval of Evaluator Qualification |  |
| Product Area(Select either one) | ( ) Software( ) Hardware (smart cards, etc.) |
| Name of the Evaluation Facility Applying for Approval of Evaluator Qualification(Fill in the approval number if the Evaluation Facility has been approved) | Evaluation Facility Approval Number :  |
| Evaluator Candidate | Name |  |
| E-mail |  |

1. (1) Curriculum Vitae (CCM-03-A Form 4)

(2) Records of education and training as well as the certificates of completion of an education and training program

(3) Copy of the Evaluation Work Plan (CCM-02-A Form 4) for the trial evaluation [↑](#footnote-ref-1)