

CERTIFIED HEALTH AND SAFETY AUDITOR PROGRAM

EXTERNAL AUDITOR APPLICATION PACKAGE

The Certified Health and Safety Auditor Training Program has been developed to provide consistent, quality auditors to Canada's Upstream Oil and Gas Industry. This five-day course is designed to improve and standardize auditing techniques and skills.

Admission Requirements:

In order to qualify to become an External Auditor, the following admission requirements must be met before applicants may apply to become an External Auditor:

The applicant must be a Canadian Registered Safety Professional (CRSP) *or* hold a University of Alberta Certificate in Occupational Health & Safety or equivalent for either requirement listed above *and* five of the past 10 years practising health and safety.

or

The applicant must be recognized as a Certified Health & Safety Management System Auditor (CHSMSA) designation with at least a two-year diploma/degree in an unrelated major from an accredited college/university and five of the past 10 years practising health and safety.

or

Hold a valid CHSMSA designation and demonstrate practising health and safety for seven of the past 10 years.

and,

The applicant must successfully complete the course, Petroleum Safety Training (PST) orientation.

Enform must verify that each auditor applicant has five (5) years of professional health and safety experience. In order to be considered a safety professional position, the following requirements must be met:

- 1) the position must be full-time,
- 2) the H&S function of the position must be greater than 50%,
- 3) the position must be at a professional level,
- 4) the position's responsibility must be the prevention of harm rather than responding to harmful events, and
- 5) the position must have a broad scope of H&S responsibilities.

The External Auditor Process:

The following steps must be taken in order to become certified as an External Auditor:

- 6) Submit the completed External Auditor Application for review **2 months before** the desired course date
 - a) This includes a current resume and enough Professional Reference Forms to represent at least 5 years' worth of full-time health and safety work experience.
- 7) Register for the CHSA course <u>within four (4) months of the approval date</u>. The chosen session must be within one year of the approval date.
- 8) Attend all five (5) days of the course and pass the exam.
- 9) Review and sign the Enform Certified Auditor's Agreement prior to starting the Student Qualification Audit
- 10) Submit a Student Qualification Audit to Enform for review within six (6) months of completing the auditor course
- 11) Complete Enform's Petroleum Safety Training (PST) orientation

Existing Internal (maintenance) auditors do not need to retake the auditor course at this time, but will need to ensure all other requirements are met, including the application form and completion of PST

Applicants are considered to have abandoned the process, and must reapply, when they:

- do not register for the CHSA course within four months of approval,
- do not complete the CHSAP course within one year of approval,
- do not submit a student audit within six (6) months of the course

Such individuals will have to restart the process starting by taking the five (5) day course again.

External Auditor Application Checklist

Before submitting your external auditor application, please ensure that the application has been completed in full and includes the following:

- 1) Fully completed application
- 2) Copy of Enform Training Certificates (if applicable)
- 3) Copy of professional safety designation certificate and/or applicable certificate, degree or diploma. Please note, that for some programs, a formal transcript may be requested by Enform.
- 4) Current resume
- 5) Completed Professional Reference Forms (PRF)
 - PRFs are to be completed by current and past supervisor(s). In the case of consultants, the PRFs should be completed by recent clients.
 - ii) PRFs must cover five (5) years of work experience as a well-rounded health and safety professional.
- 6) Declaration sign and date the external auditor application.

NOTE:

Applications that are not fully completed with all supporting documentation will be returned to the applicant for resubmission

External Auditor Application

| Section 1: Personal Information | | | | |
|--|-------------------------------|--|--|--|
| First Name, middle initial | | | | |
| Last Name | | | | |
| Current Employer | | | | |
| Business Address | | | | |
| City | | | | |
| Province | | | | |
| Postal Code | | | | |
| Business Telephone | | | | |
| Business e-mail | | | | |
| Home Address | | | | |
| City | | | | |
| Province | | | | |
| Postal Code | | | | |
| Personal Telephone | | | | |
| Home e-mail | | | | |
| Preferred to be contacted at: | Business Address Home Address | | | |
| It is the auditor's responsibility to notify Enform of any changes to this information | | | | |
| | | | | |

| Section 2: Previous Enform Training/Certifications | |
|---|--------|
| Have you completed the Safety Program Development (SPD) | Yes No |
| Course? | |
| If yes, what was the SPD course completion date? | |
| Are you currently an Enform Internal Auditor? | Yes No |
| If yes, what is your Auditor Certification (SA) Number? | |
| Have you completed the Petroleum Safety Training (PST) | Yes No |
| Program? | |
| If yes, what was the PST course completion date? | |
| Attach a copy of all Enform training certificates | : |

| Section 3: Health and Safety Education/Designations | | | | | | |
|--|---------------------|---------------------------|--|--|--|--|
| If the designation or OHS Program is not identified as approved on the Enform Website, | | | | | | |
| http://www.enform.ca/cor/eligibleprograms.cfm, it must be submitted to | | | | | | |
| corinfo@enform.ca for approval prior to the application submission. | | | | | | |
| Designation | Registration Number | Date Designation Obtained | | | | |
| CRSP | | | | | | |
| CSP | | | | | | |
| CHSMSA | | | | | | |
| CMIOSH | | | | | | |
| Education | Program/Institution | Date Program Completed | | | | |
| OHS Certificate | | | | | | |
| OHS Diploma | | | | | | |
| OHS Degree | | | | | | |
| Attach a copy of designation and/or certificate, diploma or degree | | | | | | |

Section 4: Employment History - starting with the most recent, list history for past ten (10) years

Enform must verify that the required experience of each auditor applicant meets the five years' requirement. This may involve Enform contacting your references directly in order to review with them, the information they provided in the PRF.

| Current Employer | |
|-------------------------------------|-----------|
| Job Title | |
| Dates Held | |
| Position is full-time | Yes No |
| % of job dedicated to H&S functions | 100% or % |
| Supervisor's Name | |
| Supervisor's Contact Information | |
| Responsibilities: | |
| include comprehensive list of all | |
| H&S responsibilities or attach a | |
| copy of job description and/or | |
| professional resume | |
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| | |
| 1st Previous Employer | |
| Job Title | |
| Dates Held | |
| Position is full-time | Yes No |
| % of job dedicated to H&S functions | 100% or % |
| Supervisor's Name | |
| Supervisor's Contact Information | |
| Responsibilities: | |
| include comprehensive list of all | |
| H&S responsibilities or attach a | |
| copy of job description and/or | |
| professional resume | |
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| Section 5: Professional Reference Form (PRF) Summary | | | | | |
|---|------------|-------|--|--|--|
| Enform must verify that each auditor applicant has five (5) years of professional safety experience. Please provide the names and contact information of the individuals that will be completing PRFs on your behalf. | | | | | |
| | | | | | |
| The PRFs should be completed by individuals who had direct supervisory responsibility over your work. In the case of a consultant the PRFs should be completed by recent clients. | | | | | |
| PRF #1 | | | | | |
| Name: | | | | | |
| Telephone: | | | | | |
| PRF #2 | | | | | |
| Name: | | | | | |
| Telephone: | | | | | |
| PRF #3 | | | | | |
| Name: | | | | | |
| Telephone: | | | | | |
| | | | | | |
| Section 6: Applicant Declaration | | | | | |
| I hereby make application to become an Enform External Health and Safety Auditor. I understand that the information provided on this application is material to my being accepted as an Auditor, and that any inaccuracy or misrepresentation will be sufficient reason for me to be suspended as an Auditor. | | | | | |
| Candidate's S | Signature: | Date: | | | |

Please email completed forms and supporting documents to $\underline{training@enform.ca}$ with "External Auditor Application" in the subject heading.