

INTERNATIONAL ORGANIC INSPECTORS ASSOCIATION CERTIFIER'S INSPECTOR EVALUATION FORM

Dear Certifier:

Applicant: Please fill in first 3 lines

i. Proficiency in food processing

n. Understanding of your policies

j. Commitment to organics

k. Self evaluation capacity

m. Receptiveness to critique

Social skills

The IOIA recognizes certifier input as a valuable component of its inspector accreditation program. An applicant must provide Certifier's Inspector Evaluation Forms for all certifiers with whom they have worked in the previous three years. Please complete this form on behalf of the inspector applicant seeking accreditation under IOIA's Inspector Accreditation Program. The information you provide will be considered along with information provided by the applicant. You may make arrangements to return this form to the applicant or send it directly to IOIA, P.O. Box 6, Broadus, Montana, USA 59317. If you have any questions, please do not hesitate to contact the Margaret Scoles, IOIA Executive Director, ph/fax: (406) 436-2031, email: ioia@ioia.net

Applicant Inspecto	r's Name _				Date		
This applicant is a	pplying for	accreditatio	on in Crops	Livestoc	k	_ Handling	
Certification Orga	nization						
Certifying Agency: Name of person co	•						
1. Approximately he following category	ories? (Circl	le your answ	er.)	-	-		each of
Crops						>40	
Livestock	1-10	11-20	21-30	31-40		>40	
Handling	1-10	11-20	21-30	31-40		>40	
2. Please rate the ap	oplicant on t	he following	inspector attrib	outes: (Circle y	our an	swer.)	
a. Thorough	ness of insp	ection	Excellent	Good	Fair	Poor	
b. Complete	eness of repo	orts	Excellent	Good	Fair	Poor	
c. Writing s			Excellent	Good	Fair	Poor	
d. Timeline	SS		Excellent	Good	Fair	Poor	
e. Proficien	cy in field c	rops	Excellent	Good	Fair	Poor	
f. Proficien	cy in fruit/v	egetable	Excellent	Good	Fair	Poor	
g. Proficien	cy in livesto	ck	Excellent	Good	Fair	Poor	
h. Proficien	cv in grain r	rocessing	Excellent	Good	Fair	Poor	

Continued on the other side

Excellent

Excellent

Excellent

Excellent

Excellent

Excellent

Good

Good

Good

Good

Good

Good

Fair

Fair

Fair

Fair

Fair

Fair

Poor

Poor

Poor

Poor

Poor

Poor

information that you feel is relevant to this inspectorategory that the applicant is applying. Use addition		
A. Crons		
A. C1008		
22 Casps		
B. Livestock		
C. Handling		
I attest that the above inform	ation is true and accurate.	
Signature	Date	

Please be aware that the applicant cannot be reviewed for accreditation until this evaluation form is completed and returned. Your prompt response is appreciated.

THANK YOU FROM THE IOIA ACCREDITATION REVIEW PANEL