



GSTC Accreditation Procedure

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GSTC Accreditation Procedure v.1.1

Document History

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Document Control

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The Global Sustainable Tourism Council

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1. Introduction

- 1.1. GSTC Accreditation Procedure is for the Certification Body (CB) that aims to apply for and maintain its accreditation status. This document addresses accreditation application, maintaining accreditation, changes in accreditation, complaints and appeals, reporting requirements, and sanctions.
- 1.2. Accreditation by the GSTC Endorsed National Accreditation Body follows the procedure set by the GSTC Endorsed National Accreditation Body, and GSTC conducts oversight activities.
- 1.3. Other applicable operational activities and responsibilities of GSTC and CB are described in GSTC Accreditation Manual for Accommodation/Hotel & Tour Operator v.3.1.
- 1.4. As per the GSTC Accreditation Procedure, both accredited and applicant CBs are required to pay fees based on the GSTC Accreditation Fee Schedule for different occasions of the assessment.

2. Responsibility for This Procedure

- 2.1. GSTC is responsible for this procedure and will periodically review and update it.
 - 2.1.1. If there are any changes that will impact the CB's accredited conformity assessment or GSTC's accreditation service, GSTC will communicate the change with the accredited CBs at least 2 months in advance and set a transitional period.
 - 2.1.2. If there are any changes that do not impact the CB's accredited conformity assessment or GSTC's accreditation service, GSTC will announce the new version of the procedure document without pre-communication or a transitional period.

- 2.2. GSTC will continuously monitor the accuracy and effectiveness of this procedure and make improvements and enhancements as necessary.

3. Key Policies for Accreditation Service Provision

- 3.1. **Service Language:** The language used for the GSTC accreditation service is English. If a CB wishes to receive accreditation services in a language other than English, the CB must provide interpretation and translation services, and the CB must ensure that the services are fair and impartial. It is the responsibility of the CB to cover the expenses of translation and interpretation services.
- 3.2. **GSTC Accreditation for Scheme Owners.** It is conducted in accordance with the CB-CS program of GSTC. See Annex A of the GSTC Accreditation Manual for Certification of Hotel/Accommodation & Tour Operator v.3.1 and the GSTC Accreditation Manual for Certification of Destination v.1.2.
- 3.3. **Conducting assessments and measures for incomplete assessments.** The accreditation assessment follows specific procedures in line with the CB's application or the annual assessment plan established by GSTC, as agreed with the CB. If the assessment is not completed within the accreditation's validity period or is delayed beyond the periodic surveillance period determined by GSTC, GSTC will initiate the procedure to impose sanctions such as suspension or withdrawal. Refer to Section 22 for detailed criteria and procedures for sanctions.
- 3.4. **Planning and adjusting individual assessment plan.** GSTC shall appoint the assessor or a team of assessors for each assessment. An assessment team may consist of a team leader, co-assessor, trainees, technical experts, and translators if needed. Observers may participate in an assessment if previously agreed upon by the CB, but they are not considered part of the decision-making team.
 - 3.4.1. Before the assessment, GSTC shall provide the CB with information about the composition of the assessment team and any observers, if applicable.

- 3.4.2. The CB may submit a written objection against team member(s) in the case of an existing or perceived Conflict of Interest (COI) within 5 calendar days of receiving notification from GSTC about the team composition. The objection shall include objective evidence to support any claims made.
 - 3.4.3. The CB may submit a written objection against an observer within 5 calendar days of receiving notification from GSTC about the team composition and the presence of an observer.
 - 3.4.4. GSTC shall review any objection(s) and may alter the team composition if it is deemed justifiable in order to mitigate or eliminate any existing or perceived Conflict of Interest (COI).
 - 3.4.5. Due to time constraints, CB objections against assessment teams used on Short Notice and Unannounced assessments may not be feasible. The CB shall notify GSTC promptly of CB audit dates for the assessment team composition.
 - 3.4.6. GSTC shall provide an Assessment Agenda and Budget (when applicable) to the CB at least 7 calendar days before any assessment, except for short notice or unannounced assessments. In the case of a witness assessment, the CB shall notify GSTC of its audit dates and team members at least 30 calendar days before the assessment and provide its Audit agenda at least 14 calendar days before the Audit.
- 3.5. **Classification and corrective actions of assessment findings.** After conducting the GSTC assessment, the results are divided into two categories: nonconformity and recommendation. Table 1 below provides the necessary conditions for issuing corrective measures that the CB should take.

If there is no acceptable justification for not following the criteria, GSTC will take action as follows:

- For an assessment based on the application for accreditation (e.g., initial, renewal, scope extension), the application will be rejected.
 - For surveillance, GSTC will initiate the procedure of suspension or withdrawal of accreditation.
- 3.6. The CB shall comply with the current Accreditation Requirements at all times, including new requirements or changes to them, within the deadlines stipulated by GSTC. GSTC shall inform the CB of any changes to its Accreditation Requirements and the effective date of the changes.
- 3.6.1. Depending on the transition period, GSTC may give CBs the option to decide if a) they are directly assessed against the new/revised Manual in the upcoming planned Regular GSTC HO Assessment or b) to defer to the following scheduled HO Assessment. However, CBs shall be in conformance with the new/revised Manual once it becomes effective.
- 3.6.2. All major NCs shall be closed before a revised Accreditation Certificate can be issued.
- 3.6.3. Once the transition to the new/revised Manual has been successfully evaluated and major NCs are closed, the Certificate will be amended with reference to the new/revised Manual.
- 3.7. If the applicant CB or the accredited CB disagrees with the GSTC NCs or decision at any point in this Accreditation Procedure, they may submit the challenge or an appeal.
- 3.8. GSTC maintains the list of applicant CBs and accredited CBs in its internal database. The list includes information such as:
- CB names;
 - Address;
 - Accreditation status;
 - Technical/Geographical scope;

- Date of the Initial accreditation assessments and Assessment report and a history of suspension, as well as contact data as specified by the CB (main contact name, address, email address, phone number, and website).

3.8.1. GSTC may publish Assessment Reports to the extent permitted by the GSTC Service Agreement.

Table 1. Classification of assessment findings and CB's actions required

Classification of Findings		Required CB's Action
Finding	Criteria for Issuance	
Nonconformity	<p>Not conforming accreditation requirements, including:</p> <ul style="list-style-type: none"> • the CB's conformity assessment system: <ul style="list-style-type: none"> ○ does not address whole or any part of the accreditation requirements. ○ have a process contradicting accreditation requirements. ○ is not specific enough to address accreditation requirements. or ○ is not ensuring a stable quality system. • (if applicable) the effectiveness of the following assessment is not guaranteed. 	<p>For Desk Assessment: submit corrective action(s) to GSTC(assessment team) no later than 3 days before the planned office assessment date.</p> <p>For other assessments:</p> <ul style="list-style-type: none"> • complete corrective action(s) no later than 30 days from the date of issuance; or • submit corrective action plan(s) no later than 30 days from the date of issuance, and complete corrective actions) no later than 90 days from the date of issuance.
Recommendation	<p>Opportunity for Improvement recommended for a more effective and efficient conformity assessment system operation, which does not fall into the classification of nonconformity.</p>	<p>No action is required.</p>

NOTE: Deviations from this rule may be approved by GSTC, subject to clear justification. For instance, major NCs may be closed at the HO or during the Witness Assessment if onsite verification is feasible. Additionally, a CB's request to conduct the Witness Assessment immediately after the HO Assessment may be approved.

However, in such cases, the CB must acknowledge that a second Witness Assessment may be necessary if the findings raised at the HO need to be verified in another Witness Assessment.

4. Accreditation Scope

- 4.1. The procedure covers the accreditation scope described in the GSTC Accreditation Manual for Certification of Hotel/Accommodation & Tour Operator v.3.1 and the GSTC Accreditation Manual for Certification of Destination v.1.2.

5. Outline of GSTC Accreditation Process

- 5.1. Table 2 below shows the outline of the GSTC accreditation process. Specific procedures for each step of the accreditation process are described in the clauses of the Figure.
- 5.2. The CB shall facilitate and cooperate in all GSTC assessments to ensure a constructive and professional assessment environment.
 - 5.2.1. The CB shall grant unrestricted access to premises and documentation related to the certification process, their operations, and the Scope of Accreditation.
 - 5.2.2. Access to premises and documentation shall be granted to GSTC, including the Affiliate Office (AOs), if necessary.
 - 5.2.3. The CB shall establish enforceable arrangements with their clients to guarantee the GSTC's access to witness the CB Audit or to conduct a Compliance Assessment on-site and to ensure that GSTC has access to relevant documents.
- 5.3. All Head Office (HO), Affiliate Office (AO), witness, and compliance assessments shall commence with an opening meeting. In the case of a Desk Review, the CB

shall have the opportunity to request an opening meeting. For more information, please refer to the Opening and Closing Meeting Procedure.

- 5.4. All Assessments, including Desk Assessment, shall conclude with a closing meeting. In case of any disagreements concerning the findings, they should be discussed and, if possible, resolved during the closing meeting. If not resolved, the disagreement shall be documented in the SOF and the final Assessment Report. The CB is encouraged to include their senior management in opening and closing meetings.
- 5.5. Opening and closing meetings may be conducted remotely, if necessary with prior agreement from both parties.

Table 2. Specific procedures for each accreditation step

	Initial accreditation	Accreditation renewal	Scope extension	Surveillance
Inquiry for Accreditation (Section 6)				
Accreditation Application (Section 7)				
Preliminary Visit (Section 8)				
Desk Assessment (Section 9)				
Office Assessment (Section 10)				
Witness Assessment (Section 11)				

Reporting Assessment result (Section 13)	●	●	●	●
Accreditation Decision-making (Section 14)	●	●	●	●
Notice of Accreditation Decision (Section 15)	●	●	●	○

6. Inquiry for Accreditation

6.1. GSTC will provide detailed responses to inquiries for the accreditation application concerning accreditation procedures, fees, man-days, etc. GSTC is also ready for questions about the contents of the GSTC Accreditation Manual. GSTC accreditation information is publicly available on the GSTC website and can also be requested through accreditation@gstcouncil.org.

7. Accreditation Application

7.1. Conditions for application

7.1.1. **Cases requiring accreditation application.** Formal application shall be made for the following cases:

- a. Initial accreditation
- b. Reassessment (renewal accreditation)

- c. Extension of accreditation scope
- d. Reduction of accreditation scope

7.1.2. **Application conditions for all applicants.** GSTC requires all applicants to ensure all conditions are met, or the application will be rejected. Applicant CB shall:

- a. be a legal entity that can be legally responsible for its conformity assessment activities;
- b. establish and implement the GSTC conformity assessment system according to the GSTC accreditation requirements;
- c. have access to a sufficient number of competent personnel for managing and supporting the GSTC conformity assessment activities;
- d. ensure its impartiality risks are identified and controlled in order to minimize them.

7.1.3. **Additional application conditions for initial accreditation.** An applicant for initial GSTC accreditation shall comply with the following additional conditions:

- a. applicant shall have experience in the operation of its conformity assessment system, including at least one internal audit and management review conducted and at least one conformity assessment activity (including simulated conformity assessment)

Note: Simulated conformity assessment means that a conformity assessment activity has been completed following the CB's service procedures from the start (e.g. submission of certification application) to the end (e.g. issuance of certificate), based on a virtual scenario for conformity assessment.

- b. at least one auditor (or a person who conducts conformity assessment) is available for every accreditation scope applied, regardless of his/her type of contract.

7.1.4. **Additional application conditions for reaccreditation.** An applicant for accreditation renewal of valid GSTC accreditation shall comply with the following additional conditions:

- a. Application shall be submitted well in advance of the expiry date for timely reassessment; and
- b. GSTC has confirmed the completion of all surveillance activities as planned and the CB's corrective actions have been implemented effectively, if any.

Note: CBs seeking industry certification should submit their application approximately 9 months before the end of the accreditation cycle, while CBs seeking destination certification should submit their application approximately 4 months prior.

7.2. An application shall be submitted using the GSTC Accreditation Application Form and sent to GSTC at accreditation@gstcouncil.org.

7.3. All information GSTC requests, including the application and supporting documentation (application package), shall be completed in English.

7.4. GSTC shall acknowledge receipt and conduct a screening of the application and supporting documentation within 10 calendar days of its receipt.

7.4.1. Additional information and/or clarification may be requested from the applicant CB. An incomplete application may be rejected.

7.4.2. The applicant shall pay the application fee invoiced with the application. If the fee has not been paid, the reception of the application can be denied. Payment is required to be made within 30 days of the issue date of the invoice.

7.5. GSTC regards the application process as completed when the application fee is paid after the completed application is submitted, GSTC initiates successive application review procedures. GSTC shall initiate the application review within 60 calendar days of receiving the complete application. Once GSTC receives the application documents, they will be reviewed to ensure that all the necessary information has been provided. If the submitted information is incomplete or needs further verification, GSTC may request additional information from the applicant. The requested information shall be provided within 30 days. However, if the applicant is unable to comply with the deadline, the GSTC Assurance Director(AD) may extend the due date based on the given conditions. Failure to submit the requested information on time may result in the rejection of the application.

7.5.1. If the application is rejected, GSTC shall provide the CB with a justification for the rejection. GSTC shall reject the application if:

- a. the CB lacks compliance with local regulations and legal requirements in the country or region of its operations;
- b. evidence of fraudulent behavior is found;
- c. the CB intentionally provides false information;
- d. the CB conceals information;
- e. there are regulatory and safety restrictions that could hinder GSTC's implementation of its oversight, accreditation, or services;
- f. the due diligence review indicates that the risk associated with the business relationship with the applicant is unacceptably high.

7.6. If the CB wishes to reapply for accreditation after rejection, the CB must submit a new application and pay a new application fee. GSTC may impose a cooldown period of up to 2 years before considering a new application from a rejected entity.

- 7.7. Upon application acceptance, the CB shall sign the GSTC Service Agreement.
- 7.8. If, during the application process, the CB decides not to pursue the accreditation process and wishes to withdraw, the CB shall inform GSTC in writing.
- 7.9. Changing the Accreditation Scope, as initially requested in the application form, is only possible if the CB submits a formal scope extension/reduction application, as detailed in Section 20 for Scope Extension and Section 21 for Scope Reduction.
- 7.10. GSTC may propose a reduction in the Scope of Accreditation based on the results of a relevant assessment.
- 7.11. In the case of significant changes in any aspect of the applicant's status or operations during the application process, GSTC may require the applicant to submit a new application and pay a new application fee. Significant changes may encompass modifications to the CB's structure or procedures that necessitate new documents and processes, consequently extending the time required for the GSTC Accreditation evaluation.
- 7.12. **GSTC resource review.** GSTC reviews to determine whether appropriate assessments and accreditation decision activity can be conducted at the proposed time or within the proposed deadline, considering the resources of GSTC. When the assessment date or accreditation decision-making date is required to be adjusted, GSTC will consult with the CB to make an appropriate adjustment.

8. Preliminary Visit

- 8.1. If the applicant requests, GSTC can plan and conduct a one-day preliminary visit in consultation with the applicant and at their expense.
- 8.2. The preliminary visit may be conducted in the following situation:
 - a. If, at the time of the application, the applicant CB has not carried out any

Conformity Assessment Activities or services whatsoever.

- b. If it is deemed necessary by GSTC following the identification of issues or significant deficiencies in the submitted information that raises doubts about the CB's ability to meet Accreditation Requirements.

8.3. The purposes of a preliminary visit are as follows:

- a. To evaluate the suitability of the applicant's Quality Management System (QMS).
- b. To confirm the Scope of Accreditation.
- c. To assess the readiness of the CB for the accreditation process.
- d. To verify the submitted documentation.
- e. To provide the applicant with a better understanding of the GSTC Accreditation process.

8.4. An official report will not be issued to the CB, but brief results in free form can be made and delivered to the CB upon request. Throughout this process, GSTC shall not provide consultancy services at any time.

8.5. As long as there is no issue of application rejection conditions (see Clause 7.6.1) found during the preliminary visits, generally the result of the preliminary visits will not have any impact on consecutive official accreditation assessment processes.

Upon completion of the preliminary visit, the applicant may request a change in the desired assessment dates.

9. Desk Assessment

9.1. Upon accepting the application, GSTC shall provide an Accreditation Application Checklist to the CB. The CB shall return it with the required supporting documents to demonstrate compliance.

- 9.2. After completing the Accreditation Application Checklist and document application, GSTC shall carry out three types of Assessments in the specified sequence: Desk Assessment, Office Assessment, and Witness Assessment.
- 9.3. **Desk assessment objectives.** Desk Assessment is an evaluation of the documented management system of the CB in order to review the following and determine that the CB is ready for office assessment:
- a. Review the CB's management system documented information;
 - b. Evaluate the CB's office conditions and undertake discussions with the CB's personnel to determine the preparedness for office assessment;
 - c. Review the CB's status and understanding of accreditation requirements;
 - d. Obtain necessary information regarding the applied accreditation scope, including the CB's offices, personnel, and levels of controls;
 - e. Review the office assessment team allocation and agree on the details;
 - f. Provide a focus for office assessment; and
 - g. Evaluate if the internal audits and management reviews are being planned and performed
- 9.4. The desk assessment schedule should be planned to occur within 30 calendar days of receiving the outlined documents.
- 9.5. **Reporting desk assessment result.** After reviewing the document, the assessment team shall write a report and deliver it to the CB.
- 9.6. **Impact of document review result.** If a nonconformity found as a result of a document review is found to be a serious defect to the CB's competence for the applied conformity assessment activity, the proceeding to the next assessment step may be suspended.

In this case, CB shall complete related corrective actions and submit the evidence to GSTC within 90 days from the notified date and until 3 days before

the planned office assessment day. Otherwise, the application for accreditation will be rejected, and application and assessment fees will not be refunded.

If the assessment team determines that the corrective actions submitted are unsatisfactory, it will request the CB for additional corrective actions one more time. When additional actions are not satisfactory either, the accreditation assessment procedure will be terminated, and follow-up actions such as application rejection will be in place.

10. Office Assessment

- 10.1. **Office assessment objectives.** The office assessment is intended to verify the competence of the CB in conducting the Conformity Assessment Activity for GSTC in compliance with all accreditation requirements.
- 10.2. The timing of the office assessment is determined in consultation with the CB, taking into account the CB's desired date or the GSTC annual assessment plan and, where appropriate, the successful completion of a desk assessment. In the case of surveillances and renewals, it should be done within the prescribed evaluation cycle.
- 10.3. CBs are recommended to take the following actions in preparation for the GSTC office assessment:
 - a. review and acknowledge the office assessment plan;
 - b. prepare top management interview;
 - c. allocate responsible person(s) per each assessor;
 - d. confirm access readiness of documents and records needed to prove conformity to the accreditation requirements; and
 - e. prepare office equipment required.

10.4. Office assessment shall be conducted at all offices, such as Head Office(HO) and Affiliate Office(AO) that perform the key functions of conformity assessment activities, including the head office of the CB. Other offices must also have an office assessment within the accreditation cycle.

10.4.1. The frequency of office assessments per type of CB office can be found in Table 3.

10.4.2. AOs are also subject to the Initial Assessment as determined necessary by GSTC. This determination depends on the nature of activities conducted by the AO and the degree of control exercised by the CB.

10.5. The minimum documents required for Office assessment and their delivery deadlines are listed below. Additional documents may be requested on a case-by-case basis:

No later than 30 days prior to the assessment, the following documents are required:

- a. organization chart;
- b. list of approved auditors and personnel involved in the GSTC program;
- c. quality requirements, GSTC requirements, auditor requirements, and other related information as required by the accreditation requirements; and
- d. list of certificates issued.

10.6. **Performance of office assessment.** Office assessments are conducted from the official opening meeting to the closing meeting in accordance with the assessment plan notified in advance, under the responsibility of the assessment team leader.

10.6.1. During the office assessment, opening meeting, top management interview, the requirements/ departmental assessment, assessment team meeting, wrap-up meetings, and closing meeting will be held, and the CB is required to cooperate with the assessment actively.

- 10.6.2. Top management interviews should be conducted with the personnel who have overall responsibility for the operation of the management system of the CB.
- 10.7. **Reporting office assessment result.** At the end of the office assessment, the assessment team shall present a summary of their findings during a closing meeting. These findings shall be discussed and agreed upon with a responsible person from the CB. Any findings not agreed upon will be documented in the summary report.
- 10.8. **Actions to be taken for nonconformities.** The classification of possible office assessment findings and the corrective measures to be taken by the CB are shown in Table 1. For any nonconformity, the assessment team shall establish a deadline for submitting corrective action and/or corrective action plan by agreeing with either of two options until the office assessment is completed.
- 10.8.1. To proceed to the next assessment in the sequence, all Major Non-Conformities (NCs) from the preceding assessment shall be closed. Minor NCs are not required to be closed to proceed but shall have a plan approved by GSTC, including an Action Plan or Root Cause Analysis (RCA) and an indication of how and when these will be addressed.
- 10.9. **Impact of office assessment results.** If the nonconformity found by the office assessment is deemed to be a serious imperfection for the CB's conformity assessment activities, then GSTC can take actions such as reassessment, follow-up assessment, additional witness, rejection of accreditation application, suspension or withdrawal of accreditation as determined necessary.
- 10.9.1. The CB shall complete the corrective action and submit the results to GSTC within the time limit agreed upon with the evaluation team as provided in Table 1.
- 10.9.2. If the assessment team finds that the corrective action submitted by the CB is not satisfactory, it will require an additional corrective action once,

with a 30-day deadline. If the result of the re-corrective action is not submitted within the specified period, or if the re-corrective action is not satisfactory, GSTC can discontinue the accreditation process and take measures such as rejecting the accreditation application or sanctions.

Table 3. Office assessment frequency per each type of CB office

Type of CB's office	Assessment Frequency
Head office	Initial accreditation Every surveillance Accreditation renewal assessment
Affiliate office*	Initial accreditation Once per accreditation cycle per affiliate office
<p>* Affiliate office conducts key functions or managing key functions or managing personnel conducting key functions and/or maintaining their records.</p> <p><i>Note: Key functions are specified in IAF/ILAC A5, clause 7.5.</i></p>	

11. Witness Assessment

- 11.1. GSTC shall conduct at least one Witness Assessment per Technical Scope to ensure the CB's competency to carry out the GSTC Certification.
- 11.2. The GSTC witness assessments are carried out in accordance with ISO/IEC 17011:2017, 7.4.7 to achieve the following objectives:
 - a. verifying, onsite, the effective implementation of the CB's conformity assessment (especially regarding their assignment of competent audit teams and determination of audit time) and determine the correct assignment of the scope by the CB;

- b. observing the CB's conformity assessment personnel to evaluate if they: conform with the CB's procedures and adequately address the requirements of conformity assessment requirements set by GSTC; and
 - c. obtaining a representative sample of the competence of the CB across the accreditation scope
- 11.3. The types, purposes, and timings of the witness assessments of GSTC are shown in Table 4.
 - 11.3.1. GSTC reserves the right to conduct additional Assessments or alter the sequence of Assessments. In such cases, a justification shall be provided.
- 11.4. The CB shall provide GSTC with, at least 14 days prior to the commencement of the conformity assessment activity, information on the activities that have been finalized or planned so that the assigned assessment team can establish a witness plan.
 - 11.4.1. The CB shall also bear the cost of utilizing technical expert(s) if GSTC brings technical expert(s) for effective witness.
- 11.5. It is the duty of the CB to inform its client, to explain the witnessing procedure, and to get the client's agreement. The CB is not expected to change its audit team, plan, or duration due to the witnessing. If such changes occur, the CB shall provide appropriate justification to the GSTC.
 - 11.5.1. It is the responsibility of the CB's client to inform in advance the audit team and the GSTC assessors of all the applicable safety and security requirements.
- 11.6. The minimum documents required for Witness assessment and their delivery deadlines are listed below. Additional documents may be requested on a case-by-case basis:

No later than 14 days prior to the assessment:

 - a. audit date(s);

- b. audit team;
 - c. audit plan/agenda;
 - d. the sites to be visited
 - e. audit report from the consecutive audit;
 - f. the CB procedures for planning and conducting audit; and
 - g. complaints file relevant to the sampled audit.
- 11.7. During witnessing, the GSTC assessor(s)' activities are restricted to be those of an observer, without influencing the conduct of the conformity assessments by the CB's audit team. The assessor (s) will not directly ask CB's client questions, nor provide any opinions to the audit team or client at any time. However, access to the client's documentation reviewed by the audit team shall be promptly provided to the GSTC's assessor(s) upon request.
- 11.8. Witness results, including the following, will be delivered to the CB's audit team with its confirmation during the official closing meeting in the absence of the CB's client:
- a. assessment result summary
 - b. (if applicable) findings
- 11.8.1. The GSTC assessment team may request and review the completed conformity assessment report and then confirm the results of the witness.
- 11.9. Certain types of CB audits may not be suitable for Initial witness assessments, and GSTC may reject witnessing such audits in cases of;
- a. Audit scope does not cover the full technical scope; or
 - b. Transfer certificate among the CBs.
- 11.10. If the required witness does not proceed by the due date, GSTC may dismiss the application or initiate an accreditation scope reduction or withdrawal process. However, the CB can officially submit a reason for postponing the witness to

GSTC, and the due date may be extended for an additional 3 months or longer only if the reason is proven valid.

11.11. The classification of possible witness assessment findings and the corrective measures to be taken by CB are shown in Table 1. For nonconformities, the assessment team shall establish a deadline for submitting corrective action and/or corrective action plans by agreeing with either of the two options until the witness is completed.

11.11.1. To proceed to the next assessment in the sequence, all Major NCs from the preceding assessment shall be closed. Minor NCs are not required to be closed to proceed but shall have a plan approved by GSTC, including an Action Plan or RCA and an indication of how and when these will be addressed.

11.11.2. The CB shall respond to any requests for clarification, additional documents, and/or information related to any Non-Conformities (NCs) within the deadlines indicated by GSTC.

11.12. **Impact of office assessment results.** If the nonconformity found by the office assessment is deemed to be a serious imperfection for the CB's conformity assessment activities, then GSTC can take actions such as reassessment, follow-up assessment, additional witness, rejection of accreditation application, suspension or withdrawal of accreditation as determined necessary.

11.12.1. The CB shall complete the corrective action and submit the results to GSTC within the time limit agreed upon with the evaluation team as provided in Table 1.

11.12.2. If the assessment team finds that the corrective action submitted by the CB is not satisfactory, it will require an additional corrective action once, with a 30-day deadline. If the result of the re-corrective action is not submitted within the specified period, or if the re-corrective action is not

satisfactory, GSTC can discontinue the accreditation process and take measures such as rejecting the accreditation application or sanctions.

Table 4. Type, purpose, and timing of witness assessments

Type	Purpose	Timing
Initial witness	Initial accreditation	Typically within 3 months from the end date of office assessment for initial accreditation, but the assessment schedule will be agreed between GSTC and the CB.
	Accreditation scope extension	Typically within 3 months from the end date of office assessment for accreditation scope extension, but the assessment schedule will be agreed upon between GSTC and the CB.
Regular witness	Periodic surveillance	Until the end of the due date of the surveillance cycle
	Accreditation renewal	Until 1 month before the expiration date of the recognition validity period
Occasional witness	To confirm CB's overall competence for its accreditation scope	Anytime when applied by CB, within the validity of accreditation
Additional witness	If the result of witness does not confirm enough competence	Additionally conducted once after previous witness

12. Reassessment and Follow-up Assessment

12.1. Reassessment

12.1.1. If an assessment team comes across a critical nonconformity during their assessment, which makes it impossible for them to continue, they will immediately inform the CB and discontinue the assessment. In such a

case, GSTC will arrange for a partial or full reassessment, as per the guidelines given in Table 5.

The fees charged for the accreditation processes prior to the discontinuance shall be paid by the CB.

12.1.2. If the reassessment is not made within the time limit, even though the assessment has been discontinued due to the conditions listed in Table 5, the accreditation application may be rejected, or existing accreditation may be suspended or withdrawn.

12.2. Follow-up assessment

12.2.1. Follow-up assessment is performed to confirm additional information that couldn't be confirmed or confirmed by regular assessments. This evaluation will follow the objectives and methods listed in Table 6 below.

12.2.2. If the CB provided the cause for a follow-up assessment, the fee is covered by the CB.

Table 5. Classification, condition, and methods of reassessment

Classification	Conditions	Reassessment timing and methods
Partial reassessment	For a specific accreditation standard or scope that affects a part of the system of the CB: <ul style="list-style-type: none"> - these requirements are not fully addressed; and - the part of the conformity assessment system concerned can not be validated. 	Reassess the requirements or scope of the nonconforming part after one month from the assessment discontinuance and within three months thereafter.
Full reassessment	For a specific accreditation standard or scope that affects a part of the system of the CB: <ul style="list-style-type: none"> - these requirements are not addressed at all; and - the part of the conformity assessment 	Reevaluate the assessment stage corresponding to the discontinued evaluation stage (document review, office assessment, witness, etc.) after

	system concerned can not be validated.	three months from the date of discontinuation and within three months thereafter.
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Note: The reassessment schedule may be determined by agreement between GSTC and the CB.

Table 6. Objective, method, and duration/frequency of follow-up assessments

Objective	Method	Duration/Frequency
To confirm the validity of the results of the corrective action submitted by CB for any nonconformities found during the assessment process	Desk assessment at the GSTC office	N/A
	Office assessment at the CB	0.5 ~ 1.0 MD (determined by GSTC)
	Witness assessment at the CB client	Depending on CB's audit plan
To review the potential impact of CB's reported changes	Desk assessment at the GSTC office	N/A
	First visit to the CB	0.5 MD
	Additional visit to the CB	1.0 ~ 2.0 MD (determined by the first visit)
Responding to the decision of the GSTC Assurance Panel	Office assessment at the CB	1.0 ~ 2.0 MD
	Witness assessment at the CB's client	At least once (depending on the CB's audit plan)
To confirm validity of the results of the corrective action against sanctions imposed	Office assessment at the CB	0.5 ~ 1.0 MD (determined by GSTC)
	Witness assessment at the CB's client	Depending on CB's audit plan

Note: No charge of assessment fees for the desk assessment at the GSTC office.

13. Reporting Assessment Result

- 13.1. The timeline for the GSTC Assessment Report for all types of assessments is provided in calendar days and commences from the closing meeting. (see Figure 1)
- 13.2. GSTC shall provide the Summary of Findings (SOF) within 7 calendar days of the closing meeting, and the CB shall have 10 days from the date of receiving the SOF to file the Errors of Fact (EOF).
 - 13.2.1. GSTC may grant an extension of the deadline if the CB sends a request that includes a valid justification explaining why they are unable to file the EOF within the original timeline.
 - 13.2.2. If the EOF is submitted within the deadline, GSTC shall review and amend the finding or Accreditation Report to the extent that the EOF is considered justified by GSTC.
 - 13.2.3. If the EOF for the GSTC finding is not submitted within the deadline, the EOF for that finding cannot be presented during the Accreditation Report EOF stage.
 - 13.2.4. If EOF is not submitted within the deadline (or the extended deadline), all facts contained in the SOF or Accreditation Report will be considered true and accurate unless it becomes evident that the information is false. In such cases, the CB shall not appeal or challenge the decision later based on the claim that the statements of facts are inaccurate.
 - 13.2.5. The CB shall only be able to contest an Accreditation Decision on the basis of a fact contained in the SOF or Accreditation Report being untrue if the EOF has been filed against that fact within the described deadlines.
- 13.3. All reports undergo a Technical review (TR) and a sign-off process, and due to these, the grading and wording of findings may change between the SOF and the final report. Any changes shall be indicated in the final Assessment Report.

- 13.4. GSTC shall provide the final Assessment Report to the CB within 46 calendar days of the assessment closing meeting.
- 13.5. The CB shall conduct a Root Cause Analysis (RCA) to determine the cause and extent of the NC and must provide evidence of effective implementation of Corrections and Corrective Actions (CA) for each NC. Additional information can be found in the GSTC Findings Procedures.

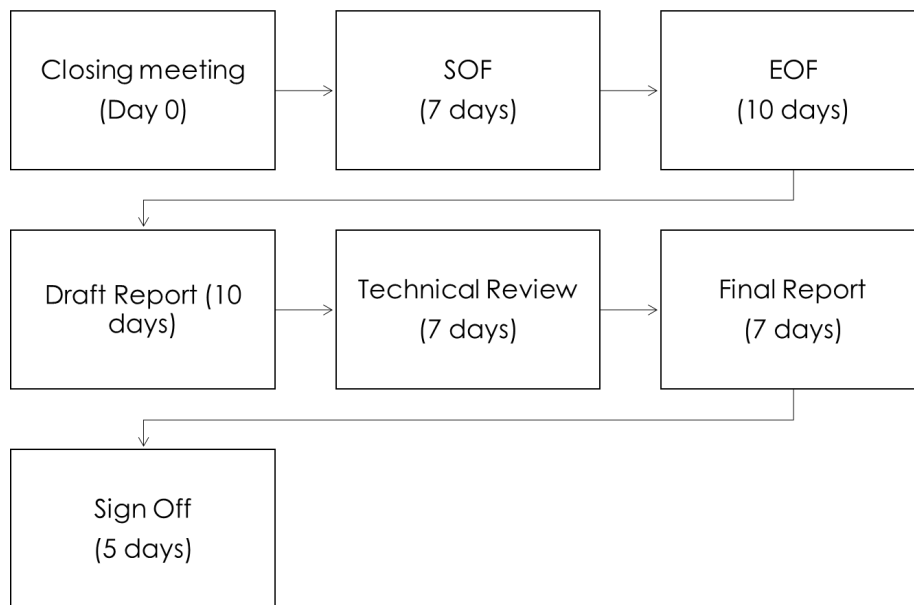


Figure 1. GSTC Assessment Report Timelines (in calendar day)

14. Accreditation Decision-Making

- 14.1. GSTC makes accreditation decisions for initial accreditation, extension/reduction of accreditation scope, and suspension/withdrawal of accreditation based on the result of accreditation assessments and review of other related information.

- 14.2. GSTC operates the Assurance Panel (AP) consisting of external professionals in order to maximize our objectivity and impartiality in the accreditation decision-making process.
- 14.3. The AP is responsible for the following decisions:
- a. initial accreditation;
 - b. accreditation renewal (reaccreditation);
 - c. extending accreditation scope; and
 - d. sanctions, including withdrawal and suspension.
- 14.3.1. When rendering the decision, the AP acts as a representative of GSTC, and the decision is consequently attributed to GSTC. No legal or contractual relationship is established between the AP and the CB. The AP shall have access to all assessment reports and nonconformities (NCs) issued, including those from GSTC and the CB's responses to the NCs.
- 14.3.2. An Accreditation Decision made by the AP is based on the Accreditation Report prepared by GSTC. While the Accreditation Report may contain a recommendation on how to proceed, it's important to note that any recommendation is non-binding for the AP. The decision-making process commences with the preparation of the Accreditation Process.
- 14.4. Other Accreditation Decisions, which do not require an Accreditation Report, are delegated as follows:
- 14.4.1. Decisions for Maintaining Accreditation are delegated to the AD.
 - 14.4.2. Decisions for extending or reducing geographical scope are delegated to the AD.
 - 14.4.3. Decisions for Extending or Reducing technical scope/technical sub-scope are delegated to the AD.

- 14.4.4. Decisions where the CB voluntarily requests a reduction of scope, suspension, or withdrawal of accreditation are delegated to the AD.
- 14.4.5. Other decisions, such as pausing or stopping the accreditation process, can occur during the application stage and can be made by the AD.
- 14.5. If a major NC raised during the accreditation assessment is challenged or is under the challenge investigation during an accreditation cycle renewal process, the AP review shall be postponed until the challenge is closed. The CB's accreditation will remain valid during this period.
- 14.6. The AP shall convey its decision to GSTC within 30 calendar days of receiving the Accreditation Report. GSTC shall inform the CB of this decision in writing within 5 calendar days of the AP decision, providing a copy of the final Accreditation Report.
- 14.7. For all Accreditation Decisions, GSTC may specify additional requirements and conditions for the CB to manage ongoing risks to the integrity of their accreditation.
- 14.8. The CB may appeal the Accreditation Decision in accordance with the GSTC Challenge and Appeal Procedure.
- 14.9. The failure of GSTC to comply with a procedural provision does not invalidate an Accreditation Decision.
- 14.10. If the accreditation cycle expires before the decision-making process can be completed due to the CB's failure to demonstrate conformance, the CB shall be suspended. GSTC may lift the suspension without the AP's involvement once the CB complies with the NCs, allowing the reaccreditation process to continue.
- 14.11. If the accreditation cycle expires before the decision-making process can be completed for reasons beyond the CB's control, the CB's accreditation will remain valid.

15. Notice of Accreditation Decision

- 15.1. Accreditation is granted in the form of an Accreditation Certification, signed by the GSTC CEO.
 - 15.1.1. The AP's accreditation decision will be publicly posted on the GSTC website.
 - 15.1.2. All accreditation decisions take effect on the date of notification. However, in the case of an accreditation decision involving a registration fee request, such as an initial or renewal accreditation, an accreditation certificate will be issued after the required fee is paid in full.
- 15.2. Renewal of accreditation per scope
 - 15.2.1. Accreditation for the CBs certifying tourism industry is renewed every 5 years following a Reaccreditation Assessment and Accreditation Certification Decision, which must occur before the current cycle expires.
 - 15.2.2. Accreditation for the CBs certifying tourism destinations is renewed every 2 years following a Reaccreditation Assessment and Accreditation Certification Decision, which must occur before the current cycle expires.
- 15.3. A new certificate is only issued if there is a change in the CB name or address. Regarding geographical or technical scope changes, only the certificate will be updated accordingly.
- 15.4. The certificate includes the GSTC logo, Name and address of the CB, Scope of Accreditation granted, Standard used for the Certification, and Accreditation Period.
- 15.5. The certificate belongs to GSTC. A digital version of the certificate is shared with each accredited CB via email and published on the GSTC website.

- 15.6. The accredited CB shall ensure that all accreditation-related claims are within the scope of the GSTC Accreditation Certificate.
- 15.7. The CB shall only use the GSTC logo and the GSTC Accreditation Symbol as outlined in the policy of the GSTC Licensing Agreement.
- 15.8. Once the certificate is issued, GSTC will retain the database for market access, and clients will be permitted to use the logos on their website and in their organizational operations in accordance with the Logo Usage Procedure.
- 15.9. If the applicant CB cannot achieve the accreditation within 2 years of GSTC receiving the application, GSTC shall halt and cancel the accreditation process. A complete reapplication may be necessary in such cases.

16. Maintaining Accreditation

- 16.1. The accredited CB shall conform to the requirements for the responsibility of the accredited CB listed in 16.1.1 to maintain its accredited status. During the accreditation cycle, GSTC will conduct a series of surveillance activities to confirm the continuous effectiveness of the GSTC accreditation.

16.1.1. Responsibilities of the accredited CB

- a. Continuous conformity to the GSTC accreditation requirements: The CB shall ensure its continuous conformity to the recent version of GSTC accreditation requirements applicable to its accreditation scope, including any changes or additions.
- b. Cooperation with GSTC's follow-up activities: GSTC conducts follow-up activities to confirm whether the accredited CB is consistently complying with accreditation requirements, and the CB is responsible for ensuring that the CB continues to comply with accreditation requirements by actively cooperating with GSTC's follow-up activities.

- c. Cooperation with GSTC's responses toward the complaints and appeals raised by the CB's clients: The CB's stakeholders may file a complaint or appeal to a CB or to its conformity assessment activities, in which case GSTC will follow the complaints and appeals handling procedures outlined in the GSTC Grievance Procedure for Accreditation. The CB shall immediately submit a record of action for all disputes, complaints, and appeals raised by their stakeholders, including certified organizations.
 - d. Reporting required information: The CB shall report information requested by GSTC. This reporting includes information on changes in the CB and the performance of conformity assessment activity accredited by GSTC.
 - e. Accreditation fee payment: A CB applying for or maintaining a GSTC accreditation shall pay the accreditation fees charged by GSTC based on the GSTC Accreditation Fee Schedule.
- 16.2. GSTC's regular surveillance activities consist of periodic surveillance assessments and additional follow-up or special assessments conducted if required. Other than surveillance activities described above, GSTC can also conduct special surveillance activities such as requests for documents or information, investigations, visits, and interviews if it is determined as required.
- 16.3. If an accredited CB is applying for renewal of GSTC accreditation before its validity expires, GSTC determines eligibility for its accreditation renewal through formal reassessments.

17. Periodic Surveillance Assessments

- 17.1. Periodic surveillance is conducted according to the prescribed timing and frequency by combining desk assessment, office assessment, and witness assessment, as shown in Table 7 below.

- 17.2. Each desk assessment, office assessment, and witness assessment follows Sections 9-11 in this document.
- 17.3. Desk assessment may be conducted only when there are significant changes that affect CB's conformity assessment system.
- 17.4. The first HO Surveillance Assessment should be carried out within 6 months after the Initial accreditation.
- 17.5. For each Surveillance Assessment, GSTC shall provide a conclusion in the final Assessment Report regarding whether the evidence from the Assessment supports maintaining, suspending, or reducing accreditation.
- 17.6. Annual Surveillance includes;
 - a. Assessment of HO and a sample of AOs;
 - b. Witness and/or Compliance Assessment(s); and
 - c. Any other assessment such as Desk Assessment, incident follow-up, and NC verification as considered necessary by GSTC to confirm that CB is operating in accordance with Accreditation Procedure and GSTC Accreditation Manual.
- 17.7. Once accredited or at the commencement of a new accreditation cycle, the CB will receive a provisional surveillance program for the accreditation cycle. This program will include an estimate of the total duration for Office Assessments and a projected number of Witness or Compliance Assessments to be conducted for each program. These estimates do not encompass expenses, travel time, or technical expert days.
- 17.8. Each year, GSTC shall provide the accredited CB with a revised 12-month Assessment plan for either HO, AO, or Witness/Compliance Assessments for the upcoming surveillance year. This plan may be modified per the GSTC Surveillance and Sampling Procedure.

- 17.9. GSTC publishes announcements of Surveillance Assessments for accredited CBs via email and conducts Stakeholder Consultations for certain Assessment types. If Stakeholder comments are received, GSTC considers them during the Assessment and provides responses in the Assessment Report, ensuring the confidentiality of Stakeholders.
- 17.10. GSTC may conduct an extra assessment in addition to the GSTC Surveillance Assessment Program to investigate incidents and/or complaints or the outcomes of consecutive assessments or under other circumstances as deemed necessary by GSTC.
- 17.11. GSTC may conduct unannounced assessments outside of its Surveillance Assessment program in order to address heightened risk or allegations of serious violations or negligence of GSTC Accreditation Requirements.
- 17.12. The CB shall ensure that GSTC can conduct Witness and Compliance Assessments of a sample of the CB clients selected by GSTC. Further details regarding the selection criteria and scope can be found in the GSTC Witness and Compliance Assessment Procedure.
- 17.13. In justified cases, intervals for Head Office Assessments may be extended. In the intervening year where no Head Office Assessment occurs, the CB shall, at a minimum, submit its Internal Audit Report(s) and management review minutes and inform GSTC of any changes to the organization's Quality Management System. GSTC reserves the right to request additional information at any time.
- 17.14. As periodic surveillances are to check whether the CB consistently meets the GSTC accreditation requirements, the results are used to determine whether or not GSTC accreditation is able to be maintained.
 - 17.14.1. GSTC accreditation may be suspended or withdrawn if the assessment reveals a significant violation of the accreditation requirements or if the found nonconformities have not been properly addressed.

- 17.15. GSTC accreditation may be invalidated if the assessment is not completed within the validity period of the accreditation or the periodic surveillance cycle and time limit set by GSTC due to the delay of certain assessment steps.
- 17.15.1. The CB shall ensure all applicable assessments are completed within the scheduled periodic surveillance cycle. A sanction may be taken if the assessment is not completed in time or there is no valid justification for delay.

18. Reaccreditation Assessment

- 18.1. The objective of the reaccreditation assessment is to renew the accreditation cycle, confirm the competence of the CB, and evaluate the CB's management and Certification System comprehensively, considering all assessment knowledge and information gathered during the accreditation cycle.
- 18.2. Reaccreditation assessment is conducted by combining desk assessment, office assessment, and witness assessment.
- 18.3. A reaccreditation assessment for the CB should begin around 9 months prior to the end of the accreditation cycle for CBs seeking industry certification, and 4 months prior to the end of the accreditation cycle for CBs seeking destination certification.
- 18.4. The date of the reaccreditation HO Assessment closing meeting serves as the cut-off date for non-conformities (NCs) that require a response from the CB before the accreditation cycle can be renewed.
- 18.4.1. All Major NCs raised in the assessment up to and including this date shall be closed;
- 18.4.2. Other open NCs shall not delay the reaccreditation process unless they raise serious questions about the CB's competence to conduct

Certification Activities or pose a risk to the validity of Certification decision-making.

- 18.5. Once all major NCs are closed, GSTC shall prepare the accreditation report for the AP.
- 18.6. The procedures for accreditation decision-making and notice of the decision will follow as outlined in Sections 14 and 15.

19. Changes in Accreditation

- 19.1. GSTC will issue a new certificate if there are changes in the information specified on the accreditation certificate or if there is a matter that has a significant effect on the performance of the accredited conformity assessment activity.
- 19.2. Types of changes in accreditation are as follows:
 - a. Changes in CB information: changes in the legal status, ownership, organizational structure, management system, etc. of the CB.
 - b. Changes in CB accreditation information: changes in accreditation scope, etc. of the CB.
 - c. Request for a temporal pause of CB's accredited activity.
- 19.3. CBs shall report to GSTC within 30 days of any changes to the following CB information, including the CB's Affiliate Office(s).
 - a. legal status
 - b. top representative, directors, or shareholders
 - c. important policies or procedures, including certification fee schedule and certification man·days
 - d. name, postal address, website, telephone number, etc.
 - e. any changes fall in a to d for permanent offices conducting key functions

(see Table 3)

- f. countries in which the CB operates from a fixed office location (Affiliate Office) or has remote personnel, that performs any certification activities
- g. new or revised contracts with foreign entities or subsidiaries that perform any certification activities

19.3.1. Failure to notify GSTC of the changes in a timely manner may result in sanctions.

19.4. If a CB intends to apply for an extension of the accreditation scope, GSTC takes the procedure in Section 20.

19.5. If a CB intends to apply for a voluntary reduction of the accreditation scope, GSTC takes the procedure in Section 21.

19.5.1. If GSTC determines that the request received has a significant impact on the CB's accredited conformity assessment activity, GSTC may conduct a follow-up assessment as described in Section 12.

19.5.2. After the reduction process is completed, GSTC will announce the name of the CB and the voluntary accreditation reduction on the GSTC website.

19.6. If a CB wishes to withdraw its GSTC accreditation voluntarily, it must pay any outstanding accreditation fees and follow an official process with GSTC.

19.7. If a CB requests a temporary pause, GSTC will disclose the CB's name, accreditation scope, and duration of the pause without the AP's decision.

20. Scope Extension

20.1. Technical and geographical scope extensions shall only occur upon the CB's request.

20.2. Applications shall be submitted directly to GSTC at accreditation@gstcouncil.org.

- 20.3. A scope extension application may be evaluated:
 - 20.3.1. During a periodic Surveillance Office Assessment if the request is submitted to GSTC at least 90 calendar days before the scheduled Assessment; or
 - 20.3.2. At a different time if the 90 calendar days' notification cannot be met.
- 20.4. After the application has been reviewed, GSTC shall determine the duration and type of Assessment needed. For a technical scope extension, a Witness Assessment shall always be required.
- 20.5. Scope extension will require the following decision-making:
 - 20.5.1. For a technical scope extension, the Accreditation Report shall be prepared for the AP as per Section 13.
 - 20.5.2. For a Technical sub-scope extension, the AD shall take the decision without the AP's involvement.
 - 20.5.3. For a geographical scope extension, the AD shall take the decision without the AP's involvement.
- 20.6. For geographical scope extensions, the following process shall be applied:
 - 20.6.1. The CB is required to provide evidence that it has access to sufficient resources to manage the geographical scope(s), including personnel, language, management system, Affiliate Office or subcontractor, arrangement to cover potential liabilities from Conformity Assessment Activities in the newly proposed countries, etc.
 - 20.6.2. GSTC may specify additional conditions during the geographical scope extension to monitor the CB expansion activities and provide sufficient access to resources to ensure there are no risks to the integrity of the issued accreditation.
 - 20.6.3. GSTC may decide not to conduct the additional assessment if:

- a. country or region where the CB already operated;
 - b. there is an upcoming Office Assessment at which this can be evaluated.
- 20.7. Upon a favorable scope extension decision, GSTC uploads a revised certificate to the website and directly provides the CB with the new technical and/or geographical scope, sharing the revised version with the CB.

21. Scope Reduction

- 21.1. Technical and geographical scope reduction can occur upon the GSTC recommendation or at the CB's voluntary request.
- 21.2. GSTC may recommend a scope reduction to the CB based on evidence from one or more surveillance assessments, from a reaccreditation assessment, or due to a lack of compliance with local regulations in the country of its operations.
- 21.3. Scope reductions based on the GSTC recommendation require the following decision-making:
- 21.3.1. For technical scope reduction, an Accreditation Report shall be prepared for the AP.
 - 21.3.2. For geographical scope reduction, the AD shall make a decision without the AP's involvement.
- 21.4. The CB may voluntarily reduce its accreditation for all or parts of its technical and/or geographical scope by notifying GSTC at least 3 months in advance of the desired effective date of the scope reduction. The consequences of a scope reduction are the same as those of a withdrawal, as outlined in Section 22.
- 21.5. A CB that has voluntarily reduced its scope of accreditation may reapply to extend the scope again at any time by following the process outlined in Section 20 for Scope Extension.

22. Sanctions

- 22.1. If a CB violates accreditation requirements or accreditation procedures or is/has been in breach of the terms of the GSTC Service Agreement, GSTC initiates its procedures to impose a suitable sanction in order to ensure the credibility of the GSTC accreditation and its accredited conformity assessment activities. Furthermore, GSTC reserves the right to exercise any rights provided by the law or by the Service Agreement or any other agreement concluded with the CB.
- 22.2. The types of sanctions that may be imposed on accredited CBs include warnings, suspension of accreditation, reduction of accreditation, withdrawal of accreditation, and intensive surveillance. Table 7 outlines the specific types of sanctions that correspond to each violation.
- 22.3. If a sanction is imposed, the CB shall analyze the cause(s) that led to the sanction. This analysis may serve as a basis for addressing and eliminating the imposed sanction. If the CB fails to comply with this obligation, GSTC shall impose another, more severe sanction than the last one. For example, after a formal warning, an intensification of surveillance or suspension may be imposed.
- 22.4. GSTC shall share the Cause Notes prior to the sanction being imposed when there are allegations of fraud. This allows the alleged entity to provide evidence to refute the allegations within 10 days of receiving the notice.
- 22.5. The CB shall take actions to preserve the integrity of the Scheme by withdrawing or limiting certification where appropriate or when requested by GSTC if evidence of fraud is detected or if fraud allegations cannot be refuted at the Certificate Holder level. Failure to comply with this may result in a sanction from GSTC.
- 22.6. If a CB has been sanctioned within two years due to the same violation, accumulated sanction criteria will be applied based on the number of violations.

However, if a CB is suspended for over a month's period twice a year, accreditation will be withdrawn immediately, disregarding two years of accumulation.

22.7. If a conformity assessment is proven fraudulent by GSTC's assessment or investigation, the responsible CB must report its determination to GSTC, such as cancellation or reaudit, etc., according to its documented procedures. In this case, the CB cannot demand any charges from the object organization of that conformity assessment.

22.8. The suspension period will not exceed three months in principle, but it may increase depending on the decision of the AP. Once decided, the suspension is valid during the period even if the cause of suspension is resolved before the end of the period. Accreditation will be withdrawn if the suspended CB, without reasonable excuse, cannot prove to GSTC that the cause of suspension is resolved or cannot meet the lifting conditions the AP determined.

22.9. Suspension. Suspension places a temporary restriction on the services the CB may provide within the scope of accreditation. Suspension can apply to all or part of the scope of accreditation. The details of the temporary restriction shall be specified in the notice of suspension from GSTC.

22.9.1. The CB shall continue to conduct surveillance audits necessary to maintain existing certifications during a suspension.

22.9.2. The CB may continue to conduct audits required for initial and recertification. However, it shall not issue any new accredited certification or scope extension within the scope of the suspension unless the certification process begins prior to the date of the suspension and the CB has obtained prior written approval from GSTC.

22.9.3. The CB shall not contract a new client for the certification of the suspended scope.

22.9.4. The CB shall not be able to apply for a new scope extension.

- 22.9.5. Annual fees must be paid normally during the period of the suspension.
- 22.9.6. For assessment-related suspensions, the CB shall not be informed about the possible suspension upon receipt of the final assessment report at the latest.
- 22.9.7. For non-assessment-related suspensions (e.g., not responding to the Major NC(s), the CB shall be informed by receiving formal notification specifying the intent to suspend and the beginning of the suspension process.
- 22.9.8. GSTC can directly suspend a CB's accreditation without the involvement of the AP if an invoice and the related interest accumulated remain unpaid for 120 calendar days after the invoice date (90 calendar days past the due date). For applicant CB, this will result in the suspension of the application process. GSTC will send the CB written notice of the suspension decision, and information will be placed on the GSTC website.
- 22.9.9. For each suspension decision, GSTC will prepare the Accreditation Report for the AP. This report should explain the reasons leading to suspension, provide a justification of the proposed scope for suspension, outline the conditions for lifting the suspension, and include any other relevant information and materials necessary for the recommendation.
- 22.9.10. Prior to the report being sent to the AP, the CB will have the opportunity to file the EOF within 10 calendar days.
- 22.9.11. The AP shall communicate its decision to GSTC within 10 calendar days of receipt of the report.
- 22.9.12. Within 5 calendar days after the decision made by the AP, GSTC shall notify the CB regarding the suspension in writing. This should include:
 - a. effective date of suspension;
 - b. duration;
 - c. reason;

- d. scope and condition;
 - e. any other additional information or action; and
 - f. deadline for conformance required by the CB.
- 22.9.13. The CB may appeal the suspension decision in accordance with the GSTC Challenge and Appeal Procedure.
- 22.9.14. GSTC shall update the record of the accredited CB on the website and publish a news item and short summary of the grounds for suspension. The CB will be given an opportunity to review the wording of the news item.
- 22.9.15. Suspension shall be effective for a maximum period of 3 months. The suspended CB may request an extension of this period with a clear justification to GSTC. The AD shall approve the extension if the justification is accepted.
- 22.9.16. Failure to satisfactorily address the causes that led to the suspension within the specified deadline is grounds for initiating the withdrawal of accreditation.
- 22.9.17. Suspension shall be lifted after GSTC has verified (e.g., via Assessment) that the conditions specified in the notice of suspension have been adequately met.
- 22.9.18. If the suspension was made due to non-payment of fees, it will be lifted promptly upon receipt of payment. This decision does not require the preparation of an accreditation report for the AP.
- 22.9.19. For lifting suspensions, an accreditation report shall be prepared and submitted to the AP to issue a decision within 10 calendar days of receipt of the report. This report will not be shared with the CB to file the EOF.
- 22.9.20. Within 5 calendar days of the decision of the AP, GSTC shall notify the CB in writing once the suspension is lifted. GSTC shall update the record on the accredited CB on the GSTC website.

- 22.10. GSTC shall continue to conduct surveillance assessments for the CB and its clients throughout the period of the CB suspension.
- 22.11. Withdrawal. A CB shall be subject to withdrawal of accreditation based on the situation set in Table 7.
- 22.11.1. GSTC shall prepare the Accreditation Report for the AP explaining the reason for the withdrawal and any other relevant information considered material for the recommendation.
- 22.11.2. Before the Accreditation Report is sent to the AP, the CB will have the opportunity to file the EOF to GSTC regarding the Accreditation Report within 10 calendar days.
- 22.11.3. Within 10 calendar days of receipt of the Accreditation Report, the AP shall communicate the decision to GSTC.
- 22.11.4. Within 5 calendar days, the CB will be notified in writing of the decision regarding the withdrawal. The notice shall include the following:
- a. effective date of the withdrawal;
 - b. clear statement of the reason for the decision; and
 - c. the Accreditation Report.
- 22.11.5. The CB may appeal the withdrawal decision using the GSTC Challenge and Appeal Procedure.
- 22.11.6. GSTC shall make public notice of the withdrawal decision on the GSTC website.
- 22.11.7. Upon confirmation of the withdrawal of accreditation or termination of the GSTC service agreement, the CB shall:
- a. immediately cease all the GSTC certification activities.
 - b. provide a list of all clients affected, including their contact information for each client, to GSTC within 5 calendar days.

- c. informing all subcontractors, affiliates, partners, and clients in writing of the Withdrawal of Accreditation and its related implications (e.g., requirements for clients to return certificates, the process of transferring to another CB, etc.) within 15 calendar days.
 - d. provide evidence to GSTC of having contacted all of the above within 5 calendar days of the contact.
 - e. cease referencing its accredited status and discontinue using the GSTC logo.
 - f. return the Accreditation Certificate to GSTC if a printed copy was obtained.
 - g. CB certificates existing at the time of the withdrawal may remain valid for a period of 90 days, subject to confirmation by GSTC, to permit CHs to enter into an agreement with another accredited CB. The AD may grant an extension of this transition period.
- 22.11.8. A withdrawn GSTC Accreditation cannot be reinstated. If the CB wishes to be accredited again, it shall start from the initial accreditation process.
- 22.11.9. For a period of 24 months, GSTC may choose not to accept applications from a CB whose accreditation has been withdrawn or from new entities that are substantially staffed with personnel associated with the withdrawn accreditation CB. This period of non-acceptance is typically imposed to allow for a cooling-off period and to ensure that the accreditation process remains independent and unbiased.

Table 7. Sanctions and potential situations leading to sanctions

Violations	Sanctions			
	1st	2nd	3rd	4th

		violation	violation	violation	violation
1	CB has been accredited or maintained accreditation falsely or in fraudulent ways.	Withdrawal			
2	Not conducting corrective actions to the cause of suspension without any valid excuse before the suspension period ends.				
3	Conducting audits other than surveillance or issuing certificates containing the GSTC logo or GSTC accreditation mark during the suspension period.				
4	Making, retaining, or controlling fake audit records without conducting the audit.				
5	Impartiality or independence is not assured by the CB's organizational structure and operation.	Suspension for 1 to 3 months	Suspension for 3 months	Withdrawal	
6	Conducting certification activity outside the GSTC accreditation scope.				
7	CB's auditor audits an organization to which he/she provided consultancy.				
8	Fake audit record has been made, retained, or controlled as the planned audit was completed when only a part of the planned audit was conducted.				
9	CB gives GSTC false information or conceals, shrinks, or falsifies part of the information in response to GSTC's request.				
10	Issuing a certificate for the organization of which management system or operation is nonconforming to relevant certification requirements.	Suspension for up to 1 month	Suspension for 1 to 3 months	Suspension for 3 months	Withdrawal

11	Making, keeping, or manipulating false records in cases other than items 4 and 8.				
12	Providing consultancy by CB's employee or auditor against consultancy prohibition rules in cases other than item 7.				
13	Rejecting or hindering GSTC's direction or supervision without any valid excuse.				
14	Not completing corrective actions in response to GSTC's corrective action request until the given deadline in cases other than items 5 to 13.				
15	Allocating audit team against competency requirements and conducting audit.	Warning	Suspension for up to 1 month	Suspension for 1 to 3 months	Withdrawal
16	Lack of collaboration with scheduling or undergoing the GSTC Assessment.		Intensive Surveillance	Suspension for 1 to 3 months	Suspension for 3 to 6 months
17	Improper use of the GSTC Accreditation Logo and the GSTC Accreditation Symbol (against the GSTC Logo Usage Procedure), incorrect reference to the certification scheme, or misleading use of licenses, certificates, logos, or claims found in documentation or other publicity may lead to consequences or sanctions as defined in the applicable usage guidelines or agreements with GSTC.		Suspension for up to 1 month	Suspension for 1 to 3 months	Suspension for 3 to 6 months
18	Failure to submit the Root Cause Analysis, Correction, and planned Corrective Actions for NCs within the specified deadline, following the GSTC Root Cause Analysis Procedure.		Suspension for up to 1 month	Suspension for 1 to 3 months	Suspension for 3 to 6 months

19	Breach of obligation in the GSTC Service Agreement.		Suspension for 1 to 3 months	Suspension for 3 to 6 months	Withdrawal
20	Intensive surveillance or suspension is recommended by accreditation assessment reports, the AD, or the AP.	Intensive Surveillance	Suspension for 1 to 3 months	Suspension for 3 to 6 months	Withdrawal
21	Discrediting or damaging the GSTC's reputation, such as making or supporting incorrect public negative or criticizing statements about the GSTC system, process, and teams.	Suspension for 1 to 3 months	Suspension for 3 to 6 months	Withdrawal	
22	Performing certification activities/services in a region without satisfying legal requirements such as local laws, permits, etc.	Suspension for 3 to 6 months	Scope reduction	Withdrawal	
23	Not paying responsible fees to GSTC.	Warning	Suspension for up to 1 month	Suspension for 1 to 3 months	Suspension for 3 to 6 months

23. Transfer of Accreditation

23.1. If an accredited CB (transferor CB) desires to transfer its accreditation to another CB (transferee CB), different approaches shall be applied to the other conditions respectively:

23.1.1. If the transferee CB is already accredited by GSTC for the relevant geographic and technical scope, the CBs may arrange for a transfer of certificates and the CB's contracts with its clients. In such situations, a transfer of accreditation between the CBs may not be required. The CBs shall notify GSTC of any significant transfer events. If the transferor CB reduces scope or withdraws accreditation, the provisions of Sections 21 or 22 (Clause 22.11) apply after the certificate transfer.

- 23.1.2. If the transferee CB is not GSTC-accredited, the CB shall apply for GSTC Accreditation. If the transferee CB is partially accredited (e.g., only wants to add a technical scope), they shall apply for a scope extension as per Section 20 unless the situation below applies.
- 23.1.3. If the transferee CB: a) is under common ownership and control as the transferor CB, or b) has been a subcontractor of the transferor CB and has managed a substantial part of the Certification Activities under the GSTC Accreditation for the previous 18 months, GSTC may apply a simplified accreditation transfer process, which shall be communicated to the CB in writing, on a case by case basis.
- 23.1.4. In the case of minor changes (e.g., change of CB's name) that do not involve transfer of the accreditation to another legal entity, it is at GSTC's discretion to note the changes on the basis of submitted documentation.
- 23.2. The transferee CB shall be responsible for closing all open NCs from the transferor CB.

24. Complaints and Appeals

- 24.1. GSTC addresses stakeholder complaints and appeals against its accreditation activities in accordance with established procedures.
 - 24.1.1. An appeal is raised by a CB to request reconsideration of any adverse accreditation decision made by GSTC regarding its desired accreditation status. Adverse accreditation decisions can include GSTC's decisions on:
 - a. refusal of accreditation application
 - b. refusal or discontinuation of assessment progression
 - c. reducing accreditation scope — suspending or withdrawing accreditation

24.1.2. A complaint is an expression of dissatisfaction related to the activities of GSTC or of a GSTC-accredited CB, where a response is expected. This is not related to the GSTC accreditation decision.

24.2. Any officially submitted complaint or appeal shall be dealt with based on the following procedures:

24.2.1. Complaints: GSTC Grievance Procedure for Accreditation

24.2.2. Appeals: GSTC Challenge and Appeal Procedure

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