



ISTQB® Partner Program Application/Renewal Form

A.1 Location	
Name of Organization	and Business Unit
-	ompany with legal status, e.g. Ltd., Inc, SAC, SA, SARL, BV, Kft.
	hin a co-operation, please also specify the complete business unit's name.
Company registrar Re	gistration number
Please fill in the registration	n number of the company (business license number).
Address of the Organi	zation and Business Unit
•	ess and if applicable, the web page of the company.
Please identify the person	ion nager in your company: who is responsible for exchanging information about the Partnership.
Contact name, Title: Phone E-mail address	
Phone E-mail address A.2.2: Billing Address	s to which invoices in connection with this application shall be sent.
Phone E-mail address A.2.2: Billing Address	s to which invoices in connection with this application shall be sent.
Phone E-mail address A.2.2: Billing Address	s to which invoices in connection with this application shall be sent.
Phone E-mail address A.2.2: Billing Address	s to which invoices in connection with this application shall be sent.
Phone E-mail address A.2.2: Billing Address Please identify the address A.2.3: Selling Body (fil	l in, if known)
Phone E-mail address A.2.2: Billing Address Please identify the address A.2.3: Selling Body (fil	
Phone E-mail address A.2.2: Billing Address Please identify the address A.2.3: Selling Body (fil Please identify the organize Contact name, Title:	l in, if known)
Phone E-mail address A.2.2: Billing Address Please identify the address A.2.3: Selling Body (fil Please identify the organize)	l in, if known)
Phone E-mail address A.2.2: Billing Address Please identify the address A.2.3: Selling Body (fil Please identify the organiz Contact name, Title: Organization Phone	l in, if known)
Phone E-mail address A.2.2: Billing Address Please identify the address A.2.3: Selling Body (fil Please identify the organize Contact name, Title: Organization	l in, if known)





A.3 Capacity of Organization

A.3.1: Choosing Partnership Level

Mark with an "x" the Partnership you are applying for and continue completing the form with the specified section.

□ Silver, Gold or Platinum Partner: fill in section A.3.2.; skip section A.3.3.
 □ Global Partner Direct Path: fill in section A.3.2. and section A.3.3.
 □ Global Partner Regular Path: skip section A.3.2.; fill in section A.3.3.

For detailed information on requirements, terms and processes, please refer to http://partner.istqb.org/)

A.3.2: Providing Individual Certificate Information

- Please insert the total number of certificates of the respective certification level or module. For personnel, holding more than one certificate, of which some may be preconditions to others, please list all certificates individually.
- If applying for Global Partner Status Direct Path, please insert information on all sites which shall be the basis for your Global Partnership Status.
- If you wish to find out about minimum requirements for certain Partnership Levels, you can, but aren't required to inspect the Eligibility Grid on http://partner.istqb.org/become-a-partner/eligibility-grid.html prior to submitting this form.

	Site 1	Site 2	Site 3
CTFL			
CTFL-AT			
CTFL-MBT			
CTF-PTE			
CTF-AuT			
CTF-OAT			
CTF-TAT			
CTF-UT			
CTF-MAT			
CTAL-TM			
CTAL-TA			
CTAL-TTA			
CTAL-TAE			
CTAL-SEC			
CTEL-ITP			
CTEL-TM			

Abbreviations:

CTFL Certified Tester Foundation Level

CTFL-AT Certified Tester Foundation Level Agile Tester

CTFL-MBT Certified Tester Foundation Level Model Based Testing

CTAL-TM Certified Tester Advanced Level Test Manager





CTAL-TA	Certified Tester Advanced Level Test Analyst	
CTAL-TTA	Certified Tester Advanced Level Technical Test Analyst	
CTAL-TAE	Certified Tester Advanced Level Test Automation Engineer	
CTAL-SEC	Certified Tester Advanced Level Security Tester	
CTEL-ITP	Certified Tester Expert Level Improving the Testing Process	
CTEL-TM	Certified Tester Expert Level Test Management	
A.3.3: Provi	ding contact Information of your local Sites (Global Partner; Regular and Direct F	² ath)
Site 1:		
Name (country	y + company name + name of the site)	
Street Addres	s:	
Site 2:	y + company name + name of the site)	
Street Address	s:	
Site 3:		
Name (country	y + company name + name of the site)	
Street Addres	s:	





PART B: SCOPE OF APPLICATION

If applying for a **Local Partnership** or for Global Partnership **Direct Path**: Specification of your Partnership Level(s) of individual Site(s)

	Site 1	Site 2	Site 3
Please enter previous			
Partnership level			
(Silver, Gold, Platinum)			
- crisscross, if this is			
your first application)			
Please enter desired			
new Partnership level			
(Silver, Gold, Platinum)			
If Applicable: Previous			
Partnership ends at			
(please enter date)			

If applying for Global Partnership **Regular Path**: Specification of your Partnership Level(s) of individual Site(s)

	Site 1	Site 2	Site 3
Please enter			
Partnership level of			
Sites (Gold, Platinum) –			
Partnership ends at			
(please enter date)			

Please attach all certificates of any ongoing Local Partnerships that shall be the basis for the Global Partnership status.

Note: when applying for Global Partnership, all your Local Partnerships must be valid for the entire duration of the Global Partnership (i.e. for a full year) if necessary, your Selling Body (see A.2.3) will contact you to align the validity periods of the individual Partnerships).

PART C: List of ISTQB[®] Certification numbers acquired by staff working for your Site(s)

Please complete the template provided in Appendix A, with the certificate numbers held by your current staff at all levels.

Certification numbers of members of staff that are working part time and of Freelancers that are working for more than 70% of the regular work time in your company, may be included. Holders of ISEB certificates may be included –check http://partner.istqb.org/become-a-partner/eligibility-grid.html for Conversion between ISEB and ISTQB certificates.





PART D: DECLARATION

By signing this application document, I declare that I:

- have read the instructions and terms in this document and in the "ISTQB® Partner Program Information Sheet" downloadable under http://partner.istgb.org/rules/download.html.
- am fully aware of the rules and guidelines and intend to comply and adhere to them.
- have provided an accurate list of certification numbers of certified staff.
- am authorized to sign this application on behalf of my organization and/or business unit.

I further agree to adhere to the following:

- Pay the fee requested by the Selling Body (refer to appendix B section 4: 'Fees Payable').
- I understand that if I fail to pay the applicable partner fee, the application will be rejected.
- I understand that if any information supplied in this application should be found to be wrong, the application may be rejected at any time.
- If any information supplied in this application should change during the validity of the Partnership in a way that has an impact on the Partner status, this change will be communicated in due course.

Signed on (day)	of (month)	(year)	
Signature	Title	Printed name	Location





	of ISTQB [®] certified test	ing professionals w		nt	
Certificate Information		Issued Details			
Certification Level/Module (CODE)*	Certificate Number	Member Board or Exam Provider	Country/ Region	Issuing Date	Site





^{*)} Please indicate the corresponding certification code according to section A.3.2:





Appendix B: About this Form and the Connected Process

1 General Information

A full description of the purpose and rules of the ISTQB® Partner Program is provided in the document "ISTQB® Partner Program – Information Sheet" that the applicant declares to have read and understood and that is available for download at http://partner.istqb.org/rules/download.html. The application form provides the necessary information about the Applicant and ensures that the ISTQB® can perform the evaluation for partner registration. The provided information is used to check the eligibility for your desired Partnership Level, so please ensure that the application is filled out accurately and completely.

2 Registration and Provision of Documents

The registration of the successful applicant and the issue of recognition and other related documents as defined in the "ISTQB® Partner Program – Information Sheet" are subject to the successful eligibility check performed by the selling Body and to timely payment of the applicable fees by the Applicant.

3 Payable Fee

The invoice about the applicable Partnership fee will be issued after you were found to be eligible for the level of Partnership you have applied for. Please make sure to pay this invoice in due time, or contact your selling Body, if this is not possible. Failure of payment will result in rejection of the application.

The fee covers the administrative costs related to the eligibility check of the application, reporting of the results, the issuing of the related documents to prove the Partnership, listings of the Partnership on web sites of the ISTQB® and involved Member Boards or Exam Providers, and the possibility for the applicant to use the "Partner Program" official logo that is associated to the Partnership level approved. For further Benefits of the Partnership, please refer to http://partner.istqb.org/rules/download.html and to your Selling Body.

4 Submission

Please send this form to the Member Board or Exam Provider you have specified in section A.2.3. If there is no Member Board or Exam Provider covering your specific region, or if you are applying for Global Partnership Direct Path, send it to partner-program@istqb.org.

Within 15 business days of receipt of your application, you will receive notification of the acceptance or rejection of your application.

of your application. 5 Checklist: This Application comes with: □ Local Partnership Direct Path: □ Appendix A - List of certification numbers □ Global, Regular Path: □ Certificates of ongoing Local Partnerships