# CHECKLIST OF REQUIREMENTS
## COMPETENCY ASSESSMENT CENTER

1. Letter of Intent
2. Copy of SEC Registration or equivalent (CDA- registered, R.A., except Sole Proprietorship)
3. Financial Statement (Latest audited)
   - For New Company: Paid up capital required by the SEC
   - For Existing: Latest Audited by a third party
4. Business Permit (Current and valid)
5. Fire Safety Certificate (Current and valid)
6. BIR Registration (Valid)
7. Company Profile
8. Organizational Structure
9. Staff Complement and Profile
10. Building lay-out/floor plan/shop lay-out
11. Self-Assessment Checklist (TESDA-OP-CO-03-F03)
12. List of complete facilities, tools, equipment, and materials appropriate to the qualification/ applied for (identified in the CATs)
13. Location map
14. Lease Contract/Proof of Ownership of the location/premises of the Assessment Center
15. Checklist of tools, equipment, supplies and materials, and facilities (TESDA-OP-CO-03-F04)
# Accreditation of Assessment Center
## Self-Assessment Checklist

<table>
<thead>
<tr>
<th>Name of Assessment Center-Applicant</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Address</td>
<td></td>
</tr>
<tr>
<td>Contact Number</td>
<td>Email address</td>
</tr>
<tr>
<td>Title of Qualification Applied for</td>
<td></td>
</tr>
<tr>
<td>Date Accomplished</td>
<td></td>
</tr>
</tbody>
</table>

## A. Physical Structure

<table>
<thead>
<tr>
<th>Item</th>
<th>Quantity</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A.1 Location and Area</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A.1.1 Accessibility</td>
<td>Accessible to public transport</td>
<td></td>
</tr>
<tr>
<td>A.1.2 Assessment area</td>
<td>Minimum area provided to permits ample workplace for candidates</td>
<td></td>
</tr>
<tr>
<td><strong>A.2 Lighting and Ventilation</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A.2.1 Assessment room or laboratories</td>
<td>Well lighted (30 - 40 Foot Candle)</td>
<td></td>
</tr>
<tr>
<td>A.2.2 Air conditioning unit</td>
<td>Optional</td>
<td></td>
</tr>
<tr>
<td>A.2.3 Blowers/fans</td>
<td>Quantity shall be according to the size of the room</td>
<td></td>
</tr>
<tr>
<td><strong>A.3 Auxiliary Room</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A.3.1 Storeroom</td>
<td>Storeroom for tools, materials (shelves properly labeled) Bins/racks for critical materials</td>
<td></td>
</tr>
<tr>
<td>A.3.2 Room for performance assessment</td>
<td>Must be able to accommodate at least 10 candidates/batch</td>
<td></td>
</tr>
<tr>
<td>A.3.3 Orientation Room/Holding Area</td>
<td>Must be able to accommodate at least 10 candidates/batch</td>
<td></td>
</tr>
<tr>
<td>A.3.4 Chairs and tables</td>
<td></td>
<td></td>
</tr>
<tr>
<td>A.3.5 Comfort rooms</td>
<td>Clean and functional Separate for male and female Located at convenient part of the building</td>
<td></td>
</tr>
<tr>
<td><strong>A.4 Assessment Equipment, Hand tools, Supplies, Materials</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A.4.1 Equipment</td>
<td>In accordance with the list in the Competency Assessment</td>
<td></td>
</tr>
<tr>
<td>A.4.2 Hand tools</td>
<td></td>
<td></td>
</tr>
<tr>
<td>A.4.3. Supplies, materials</td>
<td>Tools of the Qualification applied for</td>
<td></td>
</tr>
<tr>
<td>---------------------------</td>
<td>---------------------------------------</td>
<td></td>
</tr>
<tr>
<td>A.5.1. Medicine cabinet</td>
<td>With first aid kit and other medical paraphernalia</td>
<td></td>
</tr>
<tr>
<td>A.5.2. Open floor spaces</td>
<td>Entrances and exits are marked and maintained</td>
<td></td>
</tr>
<tr>
<td>A.5.3. Work stations, tool panels and equipment</td>
<td>Are appropriately grouped to provide ease of movement</td>
<td></td>
</tr>
<tr>
<td>A.5.4. Fire extinguishers</td>
<td>Functional/valid/current</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Located in conspicuous and highly accessible locations/places</td>
<td></td>
</tr>
<tr>
<td>A.5.5. Equipment lay out</td>
<td>Arranged according to sequence of operations to allow maximum use of resources</td>
<td></td>
</tr>
</tbody>
</table>

**B. Administrative**

**B.1. Documentary Requirements**

1. Letter of Intent
2. SEC Registration or equivalent (CDA-registered, RA, except Sole Proprietorship)
3. Financial Statement
   - For New Company: Paid up capital required by the SEC
   - For Existing: Latest Audited by a third party
4. Business Permit (Current and Valid)
5. BIR Registration (Valid)
6. Company Profile
7. Organizational structure
8. Staff complement and profile
9. Building lay out/ Floor plan
10. Self-assessment checklist
11. List of equipment/ tools and materials
12. Location map
13. Lease Contract/ Proof of Ownership of the location/premises of the Assessment Center
14. Fire Safety Certificate (Current and Valid)

**B.2. Communication Facilities**

1. Telephone/mobile phone
2. Fax machine/ internet connection
3. Computer with peripherals
4. CCTV system (Functional)
<table>
<thead>
<tr>
<th>B.3. Staff Complement</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>B.3.1. Manager</td>
<td></td>
</tr>
<tr>
<td>B.3.2. Cashier</td>
<td></td>
</tr>
<tr>
<td>B.3.3. Computer Operator/Data Encoder</td>
<td></td>
</tr>
<tr>
<td>B.3.4. Liaison Officer</td>
<td></td>
</tr>
<tr>
<td>B.3.5. Processing Officer</td>
<td></td>
</tr>
</tbody>
</table>

Submitted by:

<table>
<thead>
<tr>
<th>Name of Authorized AC Representative</th>
<th>Signature</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Position/Designation</th>
<th>Date of submission</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>