



CERTIFICATION PROGRAMS

Governing Requirements for Certification Programs

PREFACE

The 2025 revision is not a complete revision of the *Governing Requirements for Certification Programs (GRs)** but does include important changes and updates including, such as terminology defined in the glossary below. The following changes included in this revision are listed below.

**The GRs were reissued for an effective date of January 1, 2026. This update simply changes the reference for the AISC 207 from the AISC 207-23 to the current version. The only two sections affected are highlighted in red below.*

Section and Requirement Revisions

PREFACE - Editorial

TABLE OF CONTENTS- Editorial

GLOSSARY - Revisions

PURPOSE - Editorial

SCOPE - Editorial

INTENT OF USE - Editorial

CERTIFICATION PROGRAMS - Revision

SECTION 1 GENERAL REQUIREMENTS

- 1.6 Editorial
- 1.10 Editorial
- 1.11 Revision
- 1.13 Revision

SECTION 1.1 COMMUNICATIONS

- 1.1.2 Editorial

SECTION 2 APPLYING FOR
CERTIFICATION

- 2.3 Revision
- 2.6 Editorial

SECTION 3 STAGE 1 DOCUMENTATION
ASSESSMENT - No Changes

SECTION 4 PLANNING FOR YOUR AUDIT

- 4.2 Revision
- 4.3 Revision

- 4.4 Editorial
- 4.5 Editorial
- 4.6 Revision
- 4.7.1 Revision
- 4.9 Editorial
- 4.14 New
- **4.15 Editorial**
- 4.16 New
- 4.17 New

SECTION 5 DURING YOUR AUDIT

- 5.3 Editorial
- 5.7 Revision

SECTION 6 CORRECTIVE ACTION
REQUEST PROCESS

- 6.2.1 Revision
- 6.2.2 New

SECTION 7 CERTIFICATION DECISIONS

- 7.1 Editorial
- 7.1.1 Revision
- 7.2 Revision
- 7.3 Revision
- 7.4 Editorial
- 7.4.1 Editorial
- 7.4.2 Revision
- 7.6 Revision
- 7.9 Revision



CERTIFICATION PROGRAMS

SECTION 8 MAKING CHANGES TO THE CERTIFICATION SCOPE

- 8.1 Revision
- 8.2 Revision
- 8.3 Revision

SECTION 9 APPEAL PROCESS

- 9.2 Editorial
- 9.3 New
- 9.4 New

SECTION 10 COMPLAINT PROCESS

- 10.5 Editorial

SUPPLEMENTAL REQUIREMENTS

- See each Supplement for a list of revisions.



CERTIFICATION PROGRAMS

TABLE OF CONTENTS

Section 1 General Requirements	9
Section 1.1 Communications	13
Section 2 Applying for Certification	15
Section 3 Stage 1 Documentation Assessment	16
Section 4 Planning for Your Audit	17
Section 5 During Your Audit	21
Section 6 Corrective Action Request Process	24
Section 7 Certification Decisions	25
Section 8 Making Changes to the Certification Scope (for Participants changing a current certificate)	29
Section 9 Appeal Process	30
Section 10 Complaint Process	30



CERTIFICATION PROGRAMS

GLOSSARY

Additional Audit. Audits required by the CRG or ARB that are used as a continuation of a renewal or initial audit or required through the appeal, or complaint process.

Applicant. A company that is requesting certification for a fabrication/manufacturing facility or erection company that does not hold a current AISC certification. A Participant applying for additional certifications or endorsements, which are called Scope Changes, is also considered an *Applicant*.

Assessment. Evaluation of the ability of the management system to meet the audit requirements.

Appeal Review Board (ARB). The ARB is responsible for administering appeals and for determining appropriate action. The ARB is comprised of the AISC President, Vice President of Certification, and the AISC General Counsel.

Audit. Independent and documented process for obtaining objective evidence and evaluating it to determine the extent to which the criteria/requirements are fulfilled.

Certification Review Group (CRG). The CRG is comprised of AISC staff, and determines the certification status of Applicants and Participants. The CRG may consult with Quality Management Company (QMC) technical resources when making their decision of the certification status of Participants and Applicants. Refer to Section 7 for more details.

Continuation Audit. Audits that continue a remote or site assessment to complete the audit. Refer to 7.4.2 for more information.

Conditional Certification. A certification that may be granted as a result of the following:

- A Stage 2 or scope change audit cannot be conducted as a site assessment and is conducted as a remote assessment.
- A certification determination from the Certification Review Group.
- See GR 7.1.2 for additional information.

Demonstration of Capability. Representative work that is of equal or greater complexity, which follows the Quality Management System (QMS), and can be used to demonstrate capability for a certification program or endorsement as required in the *GRs* and/or *Supplements*. AISC published and approved mock exercises (if available) can also be used for a Demonstration of Capability.

Documentation Review. A review of a Participant's quality manual and procedures during the Renewal Audit (RF) to assess their ongoing compliance.

Eligibility Review. A review to confirm that a Participant or Applicant meets the necessary prerequisites for the certification(s)/endorsement(s) they are applying for. This is performed prior to the Stage 1 assessment.



CERTIFICATION PROGRAMS

Employee Count. The number of all administrative, shop or field employees that have a role in the quality management system to be AISC certified, this includes maintenance and QC personnel. This should not include temporary employees.

International. Any Participant or Applicant that is located outside the 50 states and the District of Columbia of the United States of America.

Mock Exercise. A demonstration of capability that uses an approved exercise provided by AISC Certification, not actual work, to demonstrate capability for a certification program or endorsement as required in the *GRs* and/or *Supplements*.

Multi-Site Audits. An audit process for participants with multiple fabrication facilities who all use the same Quality Management System.

Observers. A Participant's or Applicant's members outside of the facility which can include: consultants, regulators or justified personnel. Observers cannot influence or interfere in the audit process or audit outcome. Observers are to be agreed upon by the audit team and the participant or applicant with the exceptions as outlined in GR 1.15.

Participant - a company that holds a current AISC certification and seeks to continue the certification for that fabrication, manufacturing facility, or erection company.

Participant Portal. Online system used by Participants and Applicants to view and update their account information as well as view invoices, audit plans, audit findings, corrective action requests (CARs), certificates, or withdrawing from the program. The portal is also used for submitting evidence in the CAR review process.

The following persons will be given access to the portal: certification contact, principal officer, accounts payable, and QA/QC contact. **Participants:** When a contact is updated, that contact will be emailed a new portal login. **Applicants:** As soon as your Stage 2 initial audit has been scheduled, the contacts on file at that time, will be emailed new portal logins.

Quality Management Company (QMC). The exclusive auditing body of the AISC Certification Program. QMC conducts the audits of a Participant's or Applicant's quality management system and gives recommendations to AISC, but ultimately, AISC determines whether or not to certify a company.

QMS. Quality Management System

Remote Assessment. An audit conducted remotely using technologies such as Zoom Meetings.

Repetitive Corrective Action Request. When a corrective action is written against the same section, subsection, clause, and/or element of one or more referenced criteria in a previous CAR or ANC.



CERTIFICATION PROGRAMS

Site Assessment. An audit conducted in-person at a fabrication facility or erector's jobsite and main office.

Stage 1 Audit. A documentation assessment is performed to determine the readiness of a quality management system for certification. It includes a review of the quality manual, associated procedures required by the certification program and sample records that show compliance with the requirements.

Stage 2 Audit. A remote assessment, site assessment or combination of both that are performed to determine the effectiveness of the implementation of the written quality management system during the initial application process.

Supplemental Requirements. The *Supplemental Requirements* (also referred to as the *Supplements*) are additional requirements that Participants/Applicants must meet for the certification(s) and/or endorsement(s) that they are applying for or currently hold. The *Supplemental Requirements* are as follows:

- *Supplemental Requirements for Building Fabricators (BU)*
- *Supplemental Requirements for Bridge Fabricators (SBR, IBR, ABR)*
- *Supplemental Requirements for Highway Component Manufacturers (CPT)*
- *Supplemental Requirements for Hydraulic Fabricators (HYD, HYDA)*
- *Supplemental Requirements for Applicators of Complex Coatings Endorsement (CCE)*
- *Supplemental Requirements for Fracture Control Endorsement for Bridge Fabricators (FCEB)*
- *Supplemental Requirements for Erectors (CSE)*

Technical Experts. Technical experts are provided by AISC, when determined necessary by the CRG, to observe and share their expertise during an audit. They do not replace the auditor but they accompany the auditor and will help to resolve any technical issues that may arise.

Unannounced Audit. An audit performed without prior notice. A participant will not receive an emailed audit date notification, an invoice indicating the audit date, or a window of time when the audit will occur. There will be no communication from the auditor before the audit. The auditor(s) will present themselves at the company, and that company must provide immediate and unrestricted access for them to conduct the audit.



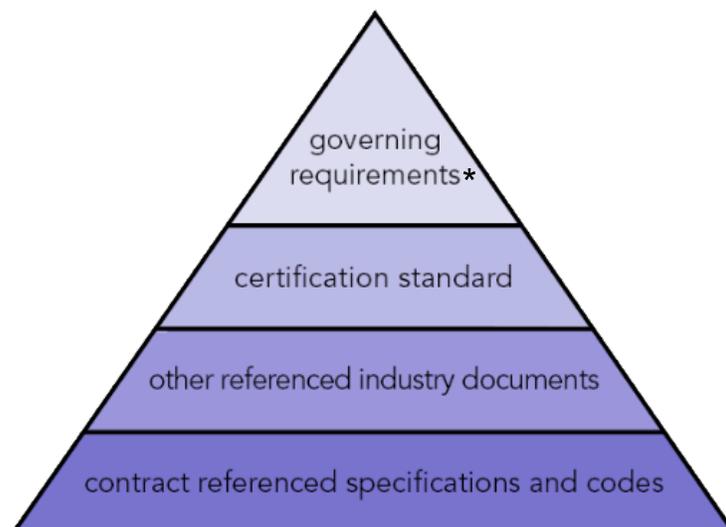
CERTIFICATION PROGRAMS

PURPOSE

The *Governing Requirements for Certification Programs (GRs)* are provided for identifying the activities required to demonstrate that the participating company’s management system fulfills the requirements for certification to the selected standards and other normative documents. The *GRs* provide for the administration of the certification program from application to certification. They also contain clarifications, explanations, and additional requirements to those found in the current *Standard for Certification Programs (AISC 207)* (hereinafter referred to as the *Standard*). The *GRs* are inclusive of the *Supplemental Requirements* for each certification program and endorsement as listed in the Glossary.

The document pyramid shown below, illustrates the hierarchy. The *GRs* (including the Supplements and Bulletins) sit at the top of the pyramid as the foremost document. They are supported by the applicable “certification standard”. Within the certification standard, “other referenced industry documents” are mentioned, which include the *Code of Standard Practice (AISC 303)*, ASTM Specifications, AWS Welding resources, etc. Finally, the “contract referenced specifications and codes” provide for job/project specific needs. These may require a specific version of an industry document or require the use of a specific manufacturer’s product. There may also be unique requirements of the job/project that are specific to the customer.

Certification Bulletins are also utilized to communicate changes occurring outside the *GRs* annual publishing date. Their purpose is to explain the change and why it is occurring, plus they provide clarity and program transparency. Bulletins are issued via email and posted to our [certification website](#).



*Governing Requirements are inclusive of Supplements and Bulletins



CERTIFICATION PROGRAMS

SCOPE

This document (hereinafter referred to as the *GRs*) governs the AISC certification programs. All Applicants and continuing Participants are required to have available and comply with these *GRs*.

The words **shall**, **must** or **will** indicate a mandatory requirement. The word **should** indicates a recommendation. The words **could**, **can**, or **may** indicate an opportunity to make a choice.

INTENT OF USE

Regardless of whether project contracts specify AISC Certification, certified companies are required to apply their Quality Management Systems (QMS) to all work meeting the scope of their certification(s) and endorsement(s), as described in Section 1 of the *GRs*. Any project or contract can be used during the audit to demonstrate the capability of the company to meet these *GRs*.

CERTIFICATION PROGRAMS

AISC offers and issues certifications for the structural steel industry. The certification programs are described in Section 1 below.

AISC also offers optional endorsements, which can be added to the certification scope. An endorsement reflects a firm's adherence to any additional requirements or standard specified for specialized steel fabrication or erection on a project, e.g., Fracture Control, Seismic, Bridge Erection, etc. To hold an endorsement, a Participant must hold a current and eligible certification. For each endorsement, see the corresponding Supplemental Requirements (hereinafter referred to as the *Supplements*). Applicants must apply for or hold an eligible certification when applying for an endorsement.

The certification program is voluntary and represents a business decision for participants. A participant of the program may withdraw their certification at any time. AISC may withdraw certification for failure to meet the requirements of the program. The certification program is open to all fabricators worldwide and to erectors performing work within the United States. Owners, General Contractors, and Specifiers are open to use the certification programs as a means of selecting or qualifying its bidders or subcontractors. AISC does not choose who can use the program nor does AISC make the decision to invoke its use in the contract documents.



CERTIFICATION PROGRAMS

SECTION 1 GENERAL REQUIREMENTS

- 1.1 **Certification Program for Building Fabricators (BU)** applies to Fabricators who fabricate and furnish, via bolting and/or welding, structural steel frames for buildings. See Section 2.1 of the AISC 303 *Code of Standard Practice for Steel Buildings and Bridges* for the definition of *structural steel*. Participants and Applicants of this program are required to adhere to the *GRs* and to the *Supplemental Requirements for Building Fabricators*.
- 1.2 **Certification Program for Highway Component Manufacturers (CPT)** applies to Metal Component Manufacturers who manufacture and furnish highway components that include bracing not designed for primary loads (diaphragms, cross frames, and lateral bracing); camera, light, sign and signal support structures; bridge rails; stairs; walkways; grid decks; drains; scuppers; expansion joints; bearings; ballast plates; and mechanical movable bridge equipment. Participants and Applicants of this program are required to adhere to the *GRs* and to the *Supplemental Requirements for Highway Component Manufacturers*.
- 1.3 **Certification Program for Bridge Fabricators (SBR, IBR, ABR)** applies to Bridge Fabricators who fabricate and furnish steel highway and railroad bridges. Participants and Applicants of this program are required to adhere to the *GRs* and to the *Supplemental Requirements for Bridge Fabricators*. The categories for types of bridge fabrication all require the same level of QMS but differ in fabrication capability. Three categories are available:
- SBR: Certified Bridge Fabricator – Simple
 - IBR: Certified Bridge Fabricator – Intermediate
 - ABR: Certified Bridge Fabricator – Advanced
- 1.4 **Certification Program for Erectors (CSE)** applies to Erectors who erect, via bolting and/or welding, structural steel framing for buildings, highway, or railroad bridge construction. See Section 2.1 of the AISC 303 *Code of Standard Practice for Steel Buildings and Bridges* for the definition of *structural steel*. Participants and Applicants of this program are required to adhere to the *GRs* and to the *Supplemental Requirements for Erectors*.
- 1.5 **Certification Program for Hydraulic Fabricators (HYD, HYDA)** applies to Fabricators who fabricate and furnish hydraulic metal structures. Participants and Applicants of this program are required to adhere to the *GRs* and to the *Supplemental Requirements for Hydraulic Fabricators*. Two categories are available:
- HYD: Hydraulic Metal Structure Fabricator - Standard
 - HYDA: Hydraulic Metal Structure Fabricator - Advanced
- 1.6 The applicable *Standard for Certification Programs* is identified in the *Supplements*. Whenever there is a conflict between the *GRs* or *Supplements* and the *Standard*, the *GRs* and *Supplements* govern. A Bulletin implementing a temporary revision may supersede the *GRs* until the revision is incorporated into the next edition of the *GRs* or *Standard*.
- 1.7 *GRs* and *Supplements* are included in the audit scope, and a nonconformance may result in a Corrective Action Request (CAR) being issued by the auditor.



CERTIFICATION PROGRAMS

- 1.8 *Supplements* may include a section that provides clarification and further explanation of criteria found in the *Standard*.
- 1.9 Fraud or attempted fraud is not permitted by employees or other representatives of the Participant or Applicant. Fraud includes falsification of records, along with attempts to influence an auditor or the certification process.

If this occurs at any time during the application or renewal process prior to a final determination by the Certification Review Group (CRG), the certification process will be suspended, and the case referred to the CRG for determination.

- 1.10 The Fee Schedules are provided below and are subject to change. Additional fee information is also provided.
- [US Domestic Fabricator Fee Schedule](#)
 - [US Domestic Erector Fee Schedule](#)
 - [Internation Fabricator Fee Schedule](#)
 - Applicants: Refer to GR 2.1 concerning payment of fees.
 - Invoices will be uploaded to your participant portal approximately 90 days prior to the date of your audit. An email will be sent to the accounts payable contact, certification contact, and principal officer on file for your company when the invoice has been uploaded.
 - **AISC must receive the payment in Full by the due date listed on the invoice.** If an audit is canceled for failure to pay, the Participant will be withdrawn at the conclusion of their current certificate and must reapply to regain certification. The Participant may not pay the invoice after the due date and resume certification or reschedule the audit, and payments received after the due date will be refunded.
 - For audits canceled less than 30 days before the audit date, the Participant will be eligible for a 50% refund of their total paid certification fees.
 - For audits canceled within 48 hours of the audit date, the Participant will be withdrawn at the conclusion of their certificate and **will not be eligible for a refund** of their total paid certification fees.
 - The Initial Application and Expedited Fees as noted on the Fee Schedule are both non-refundable once payment is received.
 - For Participants or Applicants located in US territories, please contact AISC at certification@aisc.org for payment information.



CERTIFICATION PROGRAMS

1.11 Table 1.11 below lists the current certifications and endorsements, and those that have been superseded:

Current Certifications and Endorsements	Superseded
<i>Certified Building Fabricator (BU)</i>	<i>Conventional Building, Category 1; Complex Building, Category 2</i>
<i>Certified Bridge Fabricator - Simple (SBR)</i>	<i>Simple Bridge Certification</i>
<i>Certified Bridge Fabricator - Intermediate (IBR)</i>	<i>Major Bridge Certification, Category 3</i>
<i>Certified Bridge Fabricator - Advanced (ABR)</i>	<i>Major Bridge Certification, Category 3</i>
<i>Certified Highway Component Manufacturer (CPT)</i>	<i>Certified Metal Component Manufacturer</i>
<i>Certified Hydraulic Fabricator - Standard (HYD)</i>	<i>Certified Hydraulic Fabricator (HYD)</i>
<i>Certified Hydraulic Fabricator - Advanced (HYDA)</i>	N/A
<i>Complex Coatings Endorsement - Enclosed, Covered and Exposed (CCC-1, CCC-2 and CCC-3)</i>	<i>Sophisticated Paint Endorsement - P1 Enclosed, P2 Covered and P3 Exposed</i>
<i>Fracture Control Endorsement (FCEB)</i>	<i>Fracture Critical Endorsement</i>
<i>Fracture Control Endorsement for Hydraulic (FCEH)</i>	N/A
<i>Certified Erector (CSE)</i>	<i>Certified Steel Erector (Advanced)</i>
<i>Seismic Endorsement (SEE)</i>	N/A
<i>Metal Deck Endorsement (MEE)</i>	N/A
<i>Bridge Endorsement (BEE)</i>	N/A

1.12 All time frames listed throughout the GRs are listed in calendar days.

1.13 All correspondence, discussions and interviews through the application and renewal processes will be conducted directly with or in the **presence** of the Participant's or Applicant's designated management representative (See GR 1.1.2). **Consultants can not be a participant's or applicant's designated management representative.** The **designated management representative on file per GR 1.1.2 does not** have to be present at the audit, **but** management shall inform the auditor the day of the



CERTIFICATION PROGRAMS

audit who will assume that role in that individual's absence.

Consultants may be present during the audit as an observer, but they cannot participate in the audit nor can they be named as a designated management representative. Additionally, consultants may be asked to leave the audit if they are disruptive or try to influence the audit process or outcome. Noncompliance will result in the audit being suspended, and an Additional Audit Fee will be assessed to complete the audit at a later date.

Consultants include those who have participated in the establishment and implementation of the quality management system through activities such as preparing/producing manuals and procedures or who give specific advice, instruction or solutions toward development and implementation of the quality management system. Consultants who are under contract to provide ongoing, specific services such as, NDE inspection, translators, etc. may participate during the audit as determined by the auditor.

- 1.14 Observers may be present during the audit but shall not participate in or influence the audit process or the outcome of the audit, as determined by the auditor. At the auditor's discretion, observers may be asked to leave the audit. Noncompliance will result in the audit being suspended, and an Additional Audit Fee will be assessed to complete the audit at a later date.
- 1.15 AISC retains the right to send observers and *technical experts* to any audit for the purpose of monitoring program compliance, internal audits, or third-party audits. AISC will provide advance notification of the observer and the purpose of the observation to the Participant or Applicant. If an observer is denied access to the audit by the Participant or Applicant without demonstrating a conflict of interest, the audit will be canceled and certification will be withdrawn or denied.
- 1.16 Participants or Applicants may not record (video or audio) any part of the on-site audit or remote assessment.
- 1.17 All information provided by a Participant or Applicant will be kept confidential by AISC and QMC. An exception could occur when the Participant or Applicant makes it publicly available or when agreed upon with AISC.

If the need arises for the release of confidential information by either law or contractual requirements, the Participant or Applicant would be informed of the release of information unless prohibited by law. This confidentiality includes information obtained from sources other than the Participant or Applicant (e.g., complainant, regulators).

- 1.18 Harassment or retaliation will not be tolerated. Harassment in any form, including sexual harassment and discriminatory harassment, will not be tolerated by AISC or QMC.

Without limitation, examples of sexual harassment include unwelcomed sexual advances, uninvited touching, sexual comments about someone's physical appearance, and any other conduct of a sexual nature that creates a hostile environment. Also without limitation, examples of other



CERTIFICATION PROGRAMS

harassment include slurs or epithets, threats, derogatory comments, unwelcome jokes, teasing, and any other kinds of verbal or physical conduct protected by applicable federal, state, and local laws.

Retaliation will not be tolerated. We **will not retaliate – or allow retaliation** – against you if you complain, assist in an investigation, or file an administrative charge or lawsuit alleging discrimination or harassment truthfully and in good faith.

If you believe you have been subjected to conduct or retaliation that might violate these requirements, please contact Todd Alwood, AISC Vice President of Membership and Certification, at 312.371.0819 or alwood@aisc.org.

SECTION 1.1 COMMUNICATIONS

1.1.1 AISC relies on email, phone **and** the participant portal to communicate with Participants and Applicants. **Any changes to contact information MUST be provided to AISC.** See GR 1.1.2 concerning Company Profile. It is the Participant's and Applicant's responsibility to ensure communications are being received. **Failure to update AISC Certification with current contact information will result in missed invoices, audit date notifications, program updates, canceled audits, and delayed or withdrawn certificates.**

1.1.2 Company Profile includes company information and contact information. Refer to GR 1.1.1. Changes in **ownership, location, and company name** will be reviewed on a case by case basis and may require additional audits or be subject to certification withdrawal. **Certificates are not transferable between owners and can not be listed as an asset in a sale.** Therefore, the Participant/Applicant is required, **within 30 days of the completed change**, to submit the Company Profile form via the account page on their participant portal to inform AISC of changes to any of the following:

Certificate Profile: Company name, physical address of facility/main office, mailing address, phone number and ownership.

Contacts: The names, telephone, and email of the following designated individuals:

- *Principal Officer.* Member of executive management of the company (e.g., CEO, GM, Pres, VP). This person will be copied on select correspondence related to program and audit activity. **This individual can not be listed as both the certification and QC/QA contact.**
- *Certification Contact.* Designated representative for program and audit activity. This person will be copied on all correspondence related to



CERTIFICATION PROGRAMS

- program and audit activity
- *Accounts Payable*. Main point of contact for invoicing. This person will be copied on correspondence related to receipt and payment of invoices and/or refunds.
- *Quality Assurance/Quality Control (QA/QC) Manager*. Designated management representative for quality. This person is copied on select correspondence related to program and audit activity.

*The individuals listed in the points of contact positions must be employees of your company and **can not** be consultants*

If your company is considering or planning a future move, change in company ownership, or sale or personnel changes that have not occurred yet and you would like to discuss the potential implications of such changes, please email certification@aisc.org with the details and date changes will or may occur if known.

No changes to your current certificate or account record are made until the profile form has been submitted by you and the requested changes approved by AISC.

While one employee may hold multiple positions, each Participant and Applicant must provide a minimum of TWO unique email addresses for two DIFFERENT employees to ensure proper communication. Certificates may be held, and certification may be withdrawn if proper contact information is not provided.

- 1.1.3 If a Participant or Applicant opts out of receiving email communication from AISC or AISC Certification, important program information will be missed, such as bulletins, newsletters and other emailed mass communications. **AISC Certification is not responsible for the consequences from missed emails.**



CERTIFICATION PROGRAMS

SECTION 2 APPLYING FOR CERTIFICATION

- 2.1 The process begins by submitting the AISC Certification Online Application which includes filling out the online application form and uploading the required Application Document Submittal. The list of required documents can be found at <https://www.aisc.org/certification/applicants>. Documents can only be submitted in PDF format. All Application Submittal Documents must be uploaded at the time the online application form is filled out or the application will not be accepted.

After the application is processed, an invoice covering the base certification fee along with the **non-refundable** initial application fee will be emailed to the Applicant and received in full within 14 days.

If the payment is not received by the invoice due date, the application will be terminated, and the Applicant will be required to reapply when they can complete the application requirements in the required time frame.

More information on applying for certification, including the online application and fee schedules, can be found at www.aisc.org/certification/applicants.

- 2.2 An Eligibility Review is the first step in the application review process.
- This review will confirm that the Applicant meets the necessary prerequisites to be considered for the certification(s) they are applying.
 - The review will confirm that the Applicant will have work in the shop or an active jobsite for the initial audit to demonstrate capability to meet the *GRs* (see the *Supplements* for more information).
 - Following the first review of the application submittal, additional documents may be requested. Requests for additional documents **must be responded to within 14 days**. If no response is received, then the application process will be terminated and a refund will be given less the Eligibility Review Fee, the Initial Application Fee and any Expedited Fees paid.
 - The Eligibility Review will continue for up to 45 days after the date of the initial review. If the Eligibility Review is not completed within 45 days, then the application process will be terminated and a refund will be given less the Eligibility Review Fee, the Initial Application Fee and any Expedited Fees paid.

If the Eligibility Review is terminated, the Applicant must wait three months from the date of termination before reapplying.

- 2.3 Following the Eligibility Review, initial certification audits for Applicants are performed in two stages. Stage 1 Audit is a readiness review of the Applicant's Quality Management System (QMS). The objectives of Stage 1 are to:
- Review the documentation of the management system(s)



CERTIFICATION PROGRAMS

- Evaluate the understanding of the requirements for the programs and endorsements that are being sought
- Review if the internal audits and management reviews are being planned and performed
- Obtain information regarding qualifications of personnel resources and readiness of processes and equipment resources

All Stage 1 reviews follow the process described in Section 3. After Stage 1 is satisfactorily completed, the Stage 2 Audit (see definition in the Glossary) will be scheduled.

- 2.4 Stage 2 must be completed **within one year from the completion date** of Stage 1. We will allow a **one time** reschedule to occur **within** the one year. Any subsequent site audit reschedules due to Applicant request will result in a rescheduling fee being incurred. If Stage 2 does not occur within one year, the application will be terminated, and the Initial Application fee and Stage 1 fee will not be refunded. For more information about the Stage 2 process, see Section 4 *Planning for the Audit*.
- 2.5 If the Applicant cannot complete Stage 1 in the allotted time or the Applicant becomes unresponsive to communication from AISC or QMC, the Stage 1 process will be terminated, and the certification fees will be refunded less the Stage 1 Audit Fee and the Initial Application Fee. The Applicant must wait at least three months from the date of the Stage 1 termination before reapplying.
- 2.6 An Expedited Application Process (EAP) is available on the Fee Schedule for domestic Applicants only.
- The EAP places a priority on the **entire** application process.
 - The Stage 2 process can be conducted within 60 days of the completion of the Stage 1 Audit, as noted on the Fee Schedule.
 - The success of this process relies on timely responses from the Applicant during the Eligibility Review and Stage 1 process, and availability of work in the field or shop.
 - The Expedited Application Fee is non-refundable.
- 2.7 Participants and Applicants are eligible to apply for as many AISC certifications and endorsements as provided by the *GRs*. Separate certificates are issued for fabricator/manufacturer and erector programs, and they require separate applications, Stage 1, and Stage 2 Audits. Refer to Section 8 of the *GRs* to add programs to an existing certificate, or Section 2 if not currently certified.

SECTION 3 STAGE 1 DOCUMENTATION ASSESSMENT (required for Applicants and may be required for Scope Change Applications or as directed by Certification Review Group)

- 3.1 Following the first Stage 1 documentation review, you may receive a Stage 1 Nonconformance Report (SNR) detailing any deficiencies. To maintain your application status, a response addressing each nonconformance with explanations and relevant evidence is required within 30 days by replying to the email you receive from docaudits@qmcauditing.com. Failure to respond within 30 days will result in the Stage 1 process being terminated and the certification fees refunded (minus Stage 1 processing fee).
- 3.2 If revised SNRs are issued, they must be responded to within 15 days of receipt, or the Stage 1/Scope Change process will be terminated and the certification fees refunded less the Initial Application and the Stage 1 Fee.



CERTIFICATION PROGRAMS

- 3.3 The resolution process for the SNR may continue for up to 90 days after the date of the initial SNR. If Stage 1 is not completed within 90 days, then the process will be terminated and the certification fees refunded, less the Initial Application and the Stage 1 Fee. If Stage 1 is terminated, the Applicant must wait at least three months from the date of the Stage 1 termination before reapplying.
- 3.4 The Quality Manual and all the documented procedures and records required for Stage 1 shall be submitted in English.
- 3.5 The requirements for a “documented procedure” stated in the *Standard* section 1.5.2 are to be applied to all required documented procedures in the *Standard*.
- 3.6 For Participants applying for a Scope Change, see *GR* Section 8 *Making Changes to the Certification Scope*.

SECTION 4 PLANNING FOR YOUR AUDIT

- 4.1 **Participants:** You will be notified of your audit date via email and on your certificate renewal invoice. The audit date is also displayed on the audit record accessed via the participant portal.

Applicants: The Stage 2 Audit date notification will be emailed to the principal officer, certification contact and accounts payable contact. The audit date is also displayed on the audit record accessed via the participant portal. See Section 2 Applying for Certification for information regarding initial applicant invoices.

Hard copies of invoices or audit date notifications will not be sent to Participants or Applicants.

- 4.2 Audits are scheduled and grouped together by climate, geographical location and participation in the multi-site audit program. Based on this, each Participant is assigned an audit week. Audit weeks will typically remain the same for renewal audits year to year. Since scheduling is based on climate and geographical location, sister companies may or may not be grouped together and audited within the same week.

Participants should plan on their audit taking place during their assigned audit week each year unless they have been notified otherwise.

AISC reserves the right to change your audit week if necessary. Repackaging of your audit week may occur due to new or withdrawn Participants, participation in the multi-site audit program, holidays, natural disasters, and conflicts with events like NASCC: The Steel Conference. Audits will not be rescheduled due to AISC changing a Participant’s audit week.

- 4.3 Your QMS is a system that is established, implemented and maintained at all times within your organization, and it cannot reside or be dependent on one person preparing for or being present for an audit. AISC will not reschedule audits, even for the following reasons:

- Absent personnel (including but not limited to the quality manager and executive



CERTIFICATION PROGRAMS

- management)
- Vacation conflicts (including but not limited to the quality manager and executive management)
- Small company size/limited staff availability
- Busy production schedules
- Personnel changes (including but not limited to the certification contact and quality manager)
- Not prepared
- Conflicts with other audits
- Other similar circumstances
- No active work or jobsite

- 4.4 You may request to change your annual audit week, and you must submit the request to certification@aisc.org. Approval of requests are dependent on audit schedule and auditor availability, and there is no guarantee that your request can be accommodated as any change must conform to GRs 4.2 and 4.3. If approved, the new audit week will not take effect until the following year, and the current audit date will remain as scheduled.
- 4.5 Audits must be completed a minimum of 45 days before the certificate expires for an extended certificate covering the review process to be granted. If the audit does not occur before the expiration of your current certificate, an extended certificate will not be granted and the CRG will make a decision on whether or not the certificate renewal process will be terminated. See 4.6 for exceptions.
- 4.6 AISC reserves the right to reschedule an audit due to circumstances beyond its control (e.g., weather, flight cancellations, political environment changes, unexpected auditor unavailability, internet loss, power outages, etc.). If this occurs, no rescheduling fees will be assessed, and every attempt will be made to reschedule the audit as soon as possible. The CRG will issue certification extensions when needed under this clause.
- 4.7 The scope of the audit, which are the activities and processes to be assessed, is indicated in the audit plan which is uploaded to the firm's participant portal. An email will be sent to the certification, principal and quality contacts on file when the plan has been uploaded.

Audit plans will be emailed to the certification contact on file as well as uploaded to their participant portal no sooner than 45 days prior to the audit and no later than 30 days prior to the audit. Availability of the audit plan may be affected by scope changes, auditor changes or expedited audits.

Your audit date remains the same regardless of when you receive the audit plan.

AISC reserves the right to conduct any audit as a Remote Assessment. See GR4.9 for Applicants.



CERTIFICATION PROGRAMS

- 4.7.1 Audit durations will be either one or two days based on the size of your company and the complexity of your certifications and endorsements. Audit durations will be confirmed on the invoice or audit date notification. Below are additional clarifications for audit durations, and AISC reserves the right to modify these durations based on a case-by-case basis.
- Fabricator Participants with 100 or fewer employees may have a one-day audit.
 - Participants with Multiple facilities or Participants holding both fabricator and erector certifications will have the duration determined by AISC.
 - Participants will have a two-day audit, if one or more of these scenarios apply:
 - Fabricator Participants who hold the Complex Coatings Endorsement (CCE), the Fracture Control Endorsement (FCEB) and/or the Fracture Control Endorsement for Hydraulic (FCEH)
 - Fabricator Participants with more than 100 employees
 - Erectors
 - Applicants within North America
 - Hydraulic Fabricator - Advanced (HYDA)
 - Applicants and Participants outside of North America will have a minimum two-day audit.
- 4.8 A quality manual, documented procedures, and records shall be available upon request by AISC or QMC and provided in English.
- 4.8.1 All audits will be conducted in English. Interpreters must be provided by the Participant or Applicant for the auditor's communication during the audit, as necessary. Interpreters must be knowledgeable of the appropriate industry terminology.
- 4.9 Audits are performed as a Site Assessment, Remote Assessment, or a combination of both. Remote assessments are conducted using technologies such as Zoom Meetings. At a minimum, one audit is required for each Participant annually.
- 4.10 Applicants must submit records of their internal audit and management review as required by the Application Document Submittal process. Records of the internal audit and management review must include evidence of the audit/review results, when these activities took place, the person(s) performing the audit/review, and evidence that all applicable certification programs and endorsements were audited. Records must be available for the site audit.
- 4.11 For Participants seeking renewal of certification, the internal audit must include all required certification programs and any endorsements. The internal audit and management review must be completed annually, not to exceed 12 months. Records of the internal audit and management review must include evidence of the audit/review results, when these activities took place, the person(s) performing the audit/review, and evidence that all applicable certification programs and endorsements were audited. Records must be available during the site audit. Participants may perform a single audit or perform several audits throughout the year, as long as all applicable certification programs and endorsements are audited within the 12-month period.



CERTIFICATION PROGRAMS

- 4.12 The designated Management Representative may perform the entire internal audit, including endorsements. It is preferred to use other personnel to perform the internal audit so that independence from the function being audited can be maintained.
- 4.13 International Travel Advisory. If the Participant or Applicant company is located in a country for which the U.S. Department of State has issued a Travel Advisory Level 3 or 4 advising U.S. citizens against travel, the certification renewal audit will be planned as a Remote Assessment, at AISC Certification discretion.

Alaska, Hawaii, and US Territories. If travel bans are issued by US or local governments, the certification renewal audit will be planned as a Remote Assessment, at AISC Certification discretion.

- 4.14 A Participant with two or more facilities may be eligible for the Multi-Site auditing program. Facilities qualify if they meet the following:
- Use the same quality manual and procedures for processes that take place at all facilities while allowing for unique processes at individual locations
 - Share nonconformance and corrective action information across all facilities to facilitate proactive improvements.
 - Centrally coordinate and perform management reviews and internal audits OR have a defined process to formally share these results across all facilities to drive proactive improvements and prevent potential nonconformances.

Participants are not eligible for the Multi-Site auditing program if: they use a different QMS at multiple facilities, if the multiple facilities act as stand-alone companies, or if they are an international company.

Participants who want to participate should email certification@aisc.org to confirm eligibility.

- 4.15 During Multi-Site Audits, auditors will evaluate the support processes outlined in Chapter 1 of the current *AISC Standard for Certification Programs* (AISC 207) at the primary location. These processes typically include centralized contract review, detailing, purchasing, management review, human resources, and internal audits. Primary location audits will also consider operational processes (i.e., production, calibration, material control, inspection, delivery, etc.).

Other facilities that perform operational processes will be audited according to their individual circumstances. Remember that:

- Each facility's audit will include the certification program(s) and any endorsement(s) held by that facility.
- Work in one facility may not be used to demonstrate capability for another facility.



CERTIFICATION PROGRAMS

Since auditors are evaluating support processes at the primary location, the duration of the non-primary locations can typically be reduced.

- 4.16 For participants of the multi-site program, each fabricator or erector location will receive its own certificate.
- 4.17 Auditors will issue any CARs to the facility where they observed the nonconformance in question.

SECTION 5 DURING YOUR AUDIT

- 5.1 To ensure that the audit maintains impartiality and avoids any conflicts of interest, Participants and Applicants must notify AISC via email to certification@aisc.org if any of the following applies:
 - The auditor assigned to them has been used as a consultant in the two years prior to the audit date,
 - The auditor assigned to them has been an employee of or contracted by the Participant or Applicant within the previous five years
 - Or any other conflict of interest.

If the notification is received within five business days of receiving the auditor assignment, the audit will be reassigned to a different auditor at no expense to the Participant or Applicant.

If notification is not received within this timeframe, the rescheduled audit will be conducted at the Participant/s/Applicant's expense.

- 5.2 All references in Section 1.3 of the *Standard*, the quality manual procedures, documents, and records required by the *Standard* and the *GRs* must be available in English.
- 5.3 Participants and Applicants must have either a subscription to AISC's ASTM Online Portal, equivalent content, or the individual ASTM standards mandated by the *Standard and* your contract documents. Additionally, you must have any standards deemed necessary to ensure your personnel understands the work requirements. This is a revision to Section 1.3c of the *Standard*.
- 5.4 Quality goals, as referred to in Section 1.5.1 of the *Standard*, may be singular or plural. Having a single quality goal is acceptable.
- 5.5 Interpreters must be provided by the Participant or Applicant for the auditor's communication during the audit, as necessary. Interpreters must be knowledgeable of the appropriate industry terminology.
- 5.6 All personnel involved in the quality management system may be either employees of or contracted by the Participant or Applicant. In the case of the latter, contract status and qualifications must be demonstrable.



CERTIFICATION PROGRAMS

5.7 During the audit, the auditor may identify and document in the Audit Findings report, five audit findings described below and summarized in Table 5.7. Audit findings can indicate conformity meeting or exceeding requirements, or an audit finding can indicate nonconformity where requirements are not met. These audit findings and the needed action for each are:

- **Identified Strengths.** Functions or processes that could represent process excellence, unique ability, or potential competitive advantage. These are to be reviewed during the management review meeting, and no further action is required.
- **Opportunities for Improvement (OFI).** Suggestions or opinions based on the auditor's experience that could add value to the *QMS*. These are to be reviewed during the management review meeting, and no action is required.
- **Areas Requiring Action (ARA).** Below are several examples of an ARA:
 - Used to inform Participants of recent changes to required references or the *Standard*.
 - Used as a participant alert that at next year's audit, they may need to perform demonstration of capability, as stated in 5.11 of the *GRs*, as well as in the *Supplements* for each certification or endorsement.
 - ARAs do not apply to the *GRs*.

The participant needs to engage their *QMS*, to review, evaluate and implement corrections to an ARA. ARAs will be reviewed at the next audit for effective implementation. Any not effectively implemented will be viewed as a breakdown of the Quality Management System, and a Corrective Action Request (CAR) may be issued.

- **Audit Nonconformances (ANC).** Written to indicate that a nonconformity has been observed that is found to be a single lapse in the *QMS* or an omission of a requirement that does not indicate a failure of the *QMS* to control products and processes. An Audit Nonconformance requires the Participant to use their corrective action system to document the nonconformance, identify the root cause and implement actions to prevent recurrence. The Nonconformance will be reviewed during the next audit. If, during the next audit, the actions taken are observed to be ineffective, a Corrective Action Request will be issued.
- **Corrective Action Requests (CAR).** When a nonconformity is observed that indicates a breakdown in the *QMS* that may result in the release of nonconforming work, or the failure of the *QMS* to meet its objectives, or a nonconformance has been found to be repetitive indicating a systemic issue, then a CAR will be issued. See Section 6.



CERTIFICATION PROGRAMS

Table 5.7 - Audit Findings, Explained

	Identified Strengths	Opportunities for Improvement (OFI)	Areas Requiring Action (ARA)	Audit Non-conformances	Corrective Action Requests (CAR)
Description	Functions or processes that could represent process excellence, unique ability, or potential competitive advantage	Suggestions or opinions based on the auditor's experience that could add value to the QMS	Non-conformance to recent changes of required references, or <i>Standard</i>	One-time non-conformances in the QMS or omissions of requirements that do not indicate a failure of the QMS to control products and processes	Repetitive or systemic non-conformances indicating a breakdown of the QMS that may result in failure of the QMS to meet objectives or release of nonconforming product
Include in Management Review Meeting?	Yes	Yes	Yes	Yes	Yes
Engages the corrective action system?	n/a	n/a	Maybe. The QMS shall define. If so per Section 16 of the <i>Standard</i>	Yes	Yes
When will QMC review the actions?	At the following audit	At the following audit	At the following audit	At the following audit	See CAR process of Section 6 and at the following audit

- 5.8 Repetitive CAR. Failure to effectively implement a corrective action for a previous CAR will result in a new CAR being marked "Repetitive". Repetitive CAR(s) indicate a breakdown of the management system and will affect the decision made by the CRG and may put the certification at risk. See Section 7.
- 5.9 At the conclusion of the audit, the Audit Scope sheet will be acknowledged by a management team representative or designated management representative and the auditor. Acknowledging this form indicates that the audit has been completed as described on the form and that the Participant and Applicant understands the audit results and requirements for completing any Corrective Action Requests. It also indicates that there were no conflicts of interest between the auditor and the company.
- 5.10 The auditor will perform a Documentation Review, in accordance with the audit plan, of the quality manual and procedures to assess their ongoing compliance. Additionally, the auditor may choose to conduct a Documentation Assessment during the audit if they deem it necessary to assess the Participant's compliance with the *GRs*.



CERTIFICATION PROGRAMS

- 5.11 Demonstration of capability as noted in the *GRs* and *Supplements* can be Representative Work or Mock Exercises. Representative work is work that is of equal or greater complexity, follows the QMS, and can be used to demonstrate capability for a certification program or endorsement. Mock exercises are a demonstration of capability that use an approved exercise provided by AISC Certification, not actual work, to demonstrate capability for a certification program or endorsement. If a Participant/Applicant plans to use Representative Work or Mock Exercise(s) during their audit they must notify the assigned auditor in advance of the audit.

SECTION 6 CORRECTIVE ACTION REQUEST PROCESS

- 6.1 An auditor may issue Corrective Action Requests (CARs) during the Audit. If so, the Participant and Applicant has 30 calendar days from the last day of the audit to respond to each CAR. Evidence for ALL CARs must be in PDF format and uploaded to the participant portal at the same time. If your evidence requires video, host the video file on your own platform (e.g. DropBox, YouTube, etc.) and submit a link to the video in a PDF document.

Failure to submit evidence for all CARs via the participant portal and by the due date indicated on the Audit Scope Sheet will result in the certification(s) being Withdrawn or Denied.

- 6.2 Each CAR response must include the completed CAR form which contains:
- Actions to immediately correct or contain the nonconformance
 - Result of root cause analysis
 - Actions taken to correct root cause and prevent recurrence
 - Supporting evidence files that verify the planned actions have been implemented
 - The Corrective Action Plan (previously Part 2 of the CAR form)
- 6.2.1 The CAR form and evidence will be reviewed by QMC. If the reviewer makes a request for additional evidence, the Participant or Applicant has 14 days to respond. If the reviewer makes a second, which is the **final** request for additional evidence, the Participant or Applicant has 7 days to respond. **When a request for additional evidence has been made for more than one CAR, the evidence for ALL CARs (where additional evidence has been requested) must be submitted at the same time.**

Failure to respond to a request for additional evidence for any of the CARs within the stated timeframes will trigger an “unsatisfactory” result. Any CAR that does not receive satisfactory evidence after the three attempts will be marked “unsatisfactory”. All reviews of corrective action, whether satisfactory or unsatisfactory, are then forwarded to AISC and the CRG for final determination.

Submittal of PQRs, WPSs, or WPQRs does not constitute approval by AISC or QMC. The applicant or participant is responsible for preparing and maintaining documents conforming to the applicable



CERTIFICATION PROGRAMS

welding code.- Reference AWS D1.1:2020 Clause 1.5.2., AASHTO/AWS D1.5:2020 Clause 7, et al.

Due to Repetitive CARs or systemic QMS issues, an additional audit to verify CAR effectiveness may be required by the CRG, **even if all CARs are responded to with satisfactory results**. This additional audit must be completed prior to certification being granted or renewed.

- 6.3 If the Participant or Applicant chooses to dispute or “challenge” the issuance of a CAR, they must complete the Corrective Action Plan Response section of the CAR being disputed with the reason(s) for the challenge, then upload the response to the audit in the participant portal. This must be done within 15 days of the conclusion of the audit. Any CAR appeal received after this date will be declined.

Challenging a CAR(s) does not negate a Participant’s/Applicant’s obligation to resolve all other CARs within the required timeframe.

The Participant or Applicant will then be contacted by AISC concerning the challenge, and an investigation will follow. The investigation concludes with a decision by AISC on the challenge, and the Participant or Applicant will be advised of the results and any additional actions needed.

Submission, investigation and decisions of the challenged CAR will not result in any discriminatory actions against the Participant or Applicant.

- 6.4 All documents required for the corrective action process, including evidence, shall be submitted in English.

SECTION 7 CERTIFICATION DECISIONS

- 7.1 The AISC CRG determines the certification status of all Participants and Applicants. It is the role and responsibility of the CRG to deny, grant, expand, renew, reduce, or withdraw certification based on objective evidence of a Participant’s or Applicant’s ability to satisfy these *GRs*. Please note Certification fees will not be refunded based on a CRG decision.

- 7.1.1 The following definitions apply to CRG decisions:

Deny - the CRG has determined that the Participant’s/Applicant’s QMS or a portion of the QMS has failed to meet the *GRs* and the requested certification(s) or endorsements will not be granted or renewed.

Grant - the CRG has determined that the Participant or Applicant has successfully demonstrated the capability to meet the *GRs* and certification will be granted or renewed.

Expand - Following an application to add another certification or endorsement to an existing



CERTIFICATION PROGRAMS

Participant's/Applicant's certification scope, the CRG has determined that the additional criteria has been met and the certification scope includes new certification(s) and/or endorsement(s).

Renew - the CRG has reviewed the results of the renewal audit and has approved certification.

Suspend - This may occur as a result of a CRG decision or as part of the Appeal process. The current certification is still valid until it expires and **will not** be renewed until further actions, designated by the CRG, are successfully completed. Furthermore, the Participant or Applicant will not be listed on the AISC Certification Search "Find a Certified Company".

Withdraw - the CRG has made the decision to no longer continue the certification process and any issued certificates will be withdrawn immediately. Or upon review of the audit results, the CRG has determined that one or more certifications or endorsements will not be approved and the new scope of the certification will immediately reflect the removal of those certifications or endorsements.

- 7.1.2 Conditional Certifications. The CRG may grant a conditional certification status when conditions do not provide for the Audit to be performed as a site assessment, and it is conducted as a remote assessment. This may occur for initial applications and scope change applications.

The difference between a "Conditional Certification" and a certification is that the physical portion or direct observation of the operations of the shop or field processes have not been assessed, but the quality management system including procedures, manual and records have been reviewed and/or assessed through the remote assessment.

Conditional Certifications can be used assist new applicants and scope change applicants in obtaining a certification status when travel to the company or jobsite is prohibited by travel restrictions.

See 7.4.2 for more details on Continuation Audits.

- 7.2 Certification decisions for Participants or Applicants receiving no CARs:

- Upon completion of the audit, QMC will perform a quality review of the results.
- QMC's review along with audit findings are received and reviewed by AISC certification technical staff for program compliance.
- QMC and AISC reviews are then forwarded to the CRG for a certification determination.

Certification decisions for Participants or Applicants receiving CARs

- Upon completion of the audit, QMC will perform a quality review of the results.
- QMC's review along with audit findings are reviewed by AISC certification technical staff for program compliance.
- AISC and QMC reviews are forwarded to the CRG for certification determination. See Section 6 for further details on the CAR review process.



CERTIFICATION PROGRAMS

- 7.3 When making certification decisions, the CRG will also review and consider the following: prior three-year certification history, audit findings, and late or missing CAR evidence as part of the basis for determining certification.

Audit findings from an individual audit may or may not lead to a negative decision. However, if the audit findings reveal a pattern of repetitive non-conformances over the past three years, it may indicate a breakdown in the Participant's QMS. Repetitive non-conformances or non-conformances that reflect management disregard for their own quality management system are grounds for an additional audit or withdrawal of certification.

- 7.4 For Participants, the CRG may choose to grant certification for less than one year, if it is determined that an Additional Audit is needed to provide evidence of an effectively functioning QMS. Certification will not be granted until an additional audit is successfully completed.

When an Additional Audit is required, any associated costs will be assessed according to the current fee schedule. No additional scope(s) will be considered in this additional audit. AISC also reserves the right to conduct short-notice or Unannounced Audits, if required, as a means to perform the additional audit. See 7.4.1 for more details on Additional Audits.

- 7.4.1 Additional Audit - This audit type is used as a continuation to a renewal audit, initial audit, or by the appeal, or complaint process, and it may be required for the Participant or Applicant's certification to continue, be renewed, or be granted. The CRG may require a more in-depth review of a participant's/applicant's management system due to:

- Reviewing CAR effectiveness
- Closing any open CAR(s)
- Repetitive CAR(s)
- Appeals
- Complaints/Allegations

There are additional fees associated with these audits

- 7.4.2 Continuation Audit - These audits are the continuation of a remote or site assessment. They are noted as a "B Audit Work" in the Audit Type detail.

- They can be performed to maintain a "conditional certification" status for an initial application or scope change.
- They are used when an erector does not have an active jobsite, or unforeseen conditions do not allow for steel erection, or the fabrication shop portion of the audit to be completed.
- They do not include audits performed for appeals or complaints.
- A continuation audit can be used to verify the effectiveness of CARs from the audit that is being continued.
- Open CARs cannot be closed out during a continuation audit.



CERTIFICATION PROGRAMS

- Additional costs may be incurred by the Participant or Applicant for Continuation Audits.

7.5 All Applicants and Participants have the right to Appeal any decision made by the CRG. The process of Section 9 is to be followed to Appeal a CRG decision.

7.5.1 All Applicants and Participants have the right to issue a complaint to AISC about any portion of the certification process. For complaints made to AISC concerning a certified company by parties involved in the contract, see Section 10 Complaint Process.

7.6 AISC will publish all companies that hold a current and valid certification on its website. The information disclosed includes company name, location, company website and phone number, certifications held, AISC Membership status and AISC Sustainability Partner participation.

7.7 Participants who hold a current valid certificate or conditional certification letter are eligible to use and display the Certified Fabricator or Certified Erector logo, as applicable. The appropriate logos can be found on the Participant's account page on the participant portal.

7.8 Multiple fabricator/manufacturer certifications and endorsements for the same facility location are included on a single certificate. Erector certification and endorsements are included on a single certificate.

7.9 For Participants and Applicants of the erector certification program, the certificate will cover their regional office(s) or operation(s) only if all of the following conditions are met:

- The regional office(s) or operation(s) is doing business under the same company name.
- The Executive Management is the same as for the main office.
- The same Quality Management Systems were audited for the main office and project site.

Regional offices **will not** be listed on the AISC Certified Company directory nor will AISC grant additional certificates for regional offices or list them on your main office certificate.

7.10 The Certificate contains the following information:

- Name of the company holding the certification
- Address of the certified facility, which is the address where the audit occurs (for Erectors, this is the address of the corporate office)
- Listing of the certification(s) and endorsement(s) held
- Date certificate was issued
- Date certificate expires
- Signature of the AISC officer
- Certification Number

In addition,

- Only one facility address will be listed on a certificate.
- Certificates are non-transferable; see GR1.1.2 ownership, location, and company name changes.



CERTIFICATION PROGRAMS

- For companies with multiple fabrication shops, regardless of location, each facility must apply for certification with a separate application and hold a separate certificate.

7.11 The duration of certification is typically 12 months, and its expiration date is noted on the participant's certificate or conditional certification letter. A pdf of the certificate or conditional certification letter will be uploaded to the participant portal and can be found under the files section of your most recent audit. AISC does not provide physical copies of the certificates. Exceptions to this will be communicated to the Participant or Applicant by AISC. Certificates are considered null and void if the AISC Certification Review Group (CRG) or Appeals Review Board (ARB) withdraw it.

SECTION 8 MAKING CHANGES TO THE CERTIFICATION SCOPE (for Participants changing a current certificate)

8.1 A Participant may request changes to their certification.

- **Expanding the scope of certification.** The Participant must complete the AISC Certification Scope Change Application when they wish to apply to add additional certification(s) and/or endorsements to a current certificate.
- **Withdrawing certification.** The Participant may withdraw one or more of their current certifications and/or endorsements by completing the Request Withdrawal form found on the account page of your participant portal. Upon the decision to withdraw or if a Participant is no longer in business, the current the certifications and/or endorsements will be withdrawn upon acceptance of the withdrawal request.

Participants that withdraw one or more of their certification(s) and/or endorsement(s) will be required to follow the scope change application process to regain certification.

8.2 Changes to the certification scope may require additional submittals, documentation assessment, remote assessment, site assessment, demonstration of capability(s), and fees. All scope change requests shall be submitted to AISC for review.

Audits will not be rescheduled to accommodate a scope change.

8.3 Participants can submit scope change applications at any time. For timely processing, submit requests at least six months before the next renewal audit. Note that not all scope changes can be incorporated into scheduled audits due to documentation review time, audit duration adjustments, and auditor qualifications. Scope changes not included in a renewal audit will be conducted as separate audits and will incur a renewal audit fee.

The following are required to be submitted for a scope change:

- [Scope Change Application](#)
- [Application Document Submittal](#) for the AISC Certification(s)/Endorsement(s) being applied for must be submitted at the time the application form is submitted.
- Scope Change fees can be found on the Fee Schedule. See GR 1.10. AISC payment must be received within 14 days of the application.



CERTIFICATION PROGRAMS

SECTION 9 APPEAL PROCESS

- 9.1 Participants or Applicants that have their certifications and/or endorsements withdrawn or denied may reapply six months after the date of notification by AISC per the terms of the withdrawal letter they received from the Certification Review Group or the Appeals Review Board. Alternatively, the decision may be appealed using the AISC *Appeal Policy for Certification Determination (Appeal Policy)*. Certification fees will not be refunded.
- 9.2 Participants and Applicants will abide by the [AISC Appeal Policy](#).
- 9.3 [A Participant's audit week will not be changed due the results of the appeal process.](#)
- 9.4 [If a Participant withdraws the certifications and/or endorsements during the appeal process. Any certificate extensions will be withdrawn immediately.](#)

SECTION 10 COMPLAINT PROCESS

- 10.1 Any applicant/participant (referred to as the complainant) in the AISC Certification program may file a complaint concerning their own certification experience, which may include applications, audits, reviews, CAR(s) response or other actions under direct control of AISC Certification.
- 10.2 All other complaints that are found to be outside GR10.1 activities will be referred to the [AISC Complaint and Allegation Policy](#).
- 10.3 Each complaint will be acknowledged, reviewed, and validated. Valid complaints will be investigated and actions taken to resolve the complaint. Complaints and the context of the complaint shall be maintained confidential.
- 10.4 Results of the complaint, including any actions taken, will be communicated to the complainant.
- 10.5 Submission, investigation and decisions on complaints will not result in any discriminatory actions from AISC or QMC against the complainant.