**APPLICATION FORM FOR THE DEMING PRIZE**

Date:

 (month / day / year)

To: The Chairman of the Deming Prize Committee

- Name of the Organization:

- Address of the Organization:

- Name of Principal Representative:

 (First Name) / (Last Name) (Affiliation)

(Signature)

We would like to apply for the Deming Prize.

(Year)

- Reason for Applying:

**[Declaration for Application]**

Does your organization satisfy the following conditions? (Tick appropriate response)

a) The organization provides or is involved in providing the products and the services that are socially and economically significant.

( )Yes ( )No

1. The organization is responsible for the entire or the important part (planning, design and development, manufacturing, distribution, sales, services etc.) of the function that is necessary to perform the integrated quality assurance system for products and services mentioned in Item a) above.

( )Yes ( )No

c) The organization has the responsibility and the authority to manage people, materials, and financial resources that are necessary to perform the function mentioned in Item b) above.

( )Yes ( )No

If you have anything to supplement regarding the above a) ~c), kindly elaborate below.

**[Competitor Information]**

Members of the Deming Prize Committee who carry out examinations include those who works for a company and those who provide trainings to organizations as an instructor. In case there are certain competitors that you wish to avoid having examiners from, please specify the company name below.

※Unless company name(s) specified above, we will consider that assigning examiners in charge based on non-disclosure agreement made between the Deming Prize Examination Committee and the examiners should not cause any problem.

- Principal Contact Person

Name:

 (First / Last )

Affiliation (Department):

Telephone: Facsimile:

Email:

We have transferred the amount JPY (amount) as application fee on (date) .