



# IC3S

CC Certification Body, STQC Directorate,  
Indian Common Criteria Certification Scheme (IC3S),  
MeitY, Government of India

## Application for Product Certification

Organization name [If the client is different from the organization to be certified, please provide full details]									
Organization address (Full mailing address)									
Contact person									
Contact tel #									
Contact fax #									
Contact e-mail									
Description of business activities of the organization [Or specific reference to the relevant attached documentation]									
Description of the locations from which the organization operates [Or specific reference to the relevant attached documentation]									
Description of the product - IT Product - Protection Profile (PP)	(Full name, version, platform(s), initial evaluation or re-evaluation etc.)								
Whether the product is totally developed by the organization or a part of it is outsourced ( provide details)									
Evaluation Assurance Level (EAL) [Tick as appropriate]	<table border="0"> <tr> <td>EAL 1</td> <td><input type="checkbox"/></td> </tr> <tr> <td>EAL 2</td> <td><input type="checkbox"/></td> </tr> <tr> <td>EAL 3</td> <td><input type="checkbox"/></td> </tr> <tr> <td>EAL 4</td> <td><input type="checkbox"/></td> </tr> </table>	EAL 1	<input type="checkbox"/>	EAL 2	<input type="checkbox"/>	EAL 3	<input type="checkbox"/>	EAL 4	<input type="checkbox"/>
EAL 1	<input type="checkbox"/>								
EAL 2	<input type="checkbox"/>								
EAL 3	<input type="checkbox"/>								
EAL 4	<input type="checkbox"/>								



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### Evaluation Assurance Augmentations (optional)

List any augmentations to the selected EAL

### Scope of certificate recognition Note (√)

<input type="checkbox"/>	CCRA (Protection Profiles and EAL1-4)
<input type="checkbox"/>	EA MLA (Mutual recognition according to regulations issued by EA or IAF)

CCRA and EA-MLA could be chosen together.

<input type="checkbox"/>	National
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CCTL contracted by the organization (in case applicable)

Organisation name

Date of contract signing

Lead evaluator	Title	
E-mail address	Phone	Mobile Phone
CCTL certification point of contact	Title	
E-mail address	Phone	Mobile phone



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Organization information to be listed publicly (e.g. on the "In evaluation list")

Sponsor/ Organisation		
Sponsor/ Organisation's full mailing address		
Sponsor/ Organisation's web address		
Sponsor/ Organisation's certification point of contact		Title
E-mail address		Telephone
List of the documents to be attached with the application		
Document	Appendix	Document Title and version
Security Target		
Protection Profile		
Other attachments:		
Application filled in by (Name and Designation)		
Signature		
Date		
<p><b>PS :Please enclose an application fee of Rs.25,000/- plus applicable GST through Bharat Kosh Portal</b></p>		
<p>Please provide any other information you have about your organization to help us to give you a quotation. For example: brochures, your Web address.</p>		
<p>Thank you for completing this application. We look forward to a successful partnership</p>		