**Section A. General Information & Overview (TO BE COMPLETED BY THE APPLICANT)**

|  |  |
| --- | --- |
| **Programme/Institution name:** |  |
| **City:** |  |
| **Country:** |  |
| **Certificate number (ID Access):** |  |
| **Date of Communication of the Change:** |  |
| **Date Accreditation Finishes:** |  |
| **Source of information:** | [email/telephone/Interim Audit] |
| **Edition of standards used for accreditation:** |  |

**Select accredited area affected by the change:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Area** | **Patient** | **HSCT** | | **Immune Effector Cells** | |
| **Allogeneic** | **Autologous** | **Allogeneic** | **Autologous** |
| **Clinical** | **Adult** |  |  |  |  |
| **Paediatric** |  |  |  |  |
| **HPC, Marrow Collection** | **Adult** |  |  |  |  |
| **Paediatric** |  |  |  |  |
| **HPC, Apheresis Collection** | **Adult** |  |  |  |  |
| **Paediatric** |  |  |  |  |
| **Processing** |  |  |  |  |  |

|  |
| --- |
| **Information regarding the changes affecting the accreditation of the centre** |
| [Give summary of all changes and all clarifications brought by the applicant.] |

**Section B. JACIE Office Corrective Actions (TO BE COMPLETED BY THE JACIE OFFICE)**

|  |  |
| --- | --- |
| **Action taken by the JACIE Office** | |
| **Date Communicated to the centre:** |  |
| [Give summary of all actions required to the centre to assess the change reported among the JACIE Standards:  (Requested documentation, inform the National Representative, inform the Accreditation Committee….)] | |

|  |  |
| --- | --- |
| **Assessor assigned for the assessment:**  **(if applicable)**: |  |

|  |  |
| --- | --- |
| **Assessment of documentation:** | |
| **Date documentation is received:** |  |
| **Date assessor’s assessment is received:** |  |
| [Give summary of the assessor’s assessment] | |

|  |  |
| --- | --- |
| **Accreditation Committee Final Decision (IF APPLICABLE)** | |
| **Date change is communicated to the JAC:** |  |
| **Date decision is communicated to the centre:** |  |
| [Give summary of the JACIE Accreditations Committee final decision: On-site visit, Suspension Withdrawal….] | |