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Kalos Procedure-05

Planning & Conducting AS9100/AS9120 Audits

Maintained in accordance with ISO 17021, ***AS9101***, ***AS9104***, ***ICOP Certification Scheme Resolutions Log***, and supporting IAF Mandatory Documents

Items formatted in bold, italics are Aerospace specific requirements.

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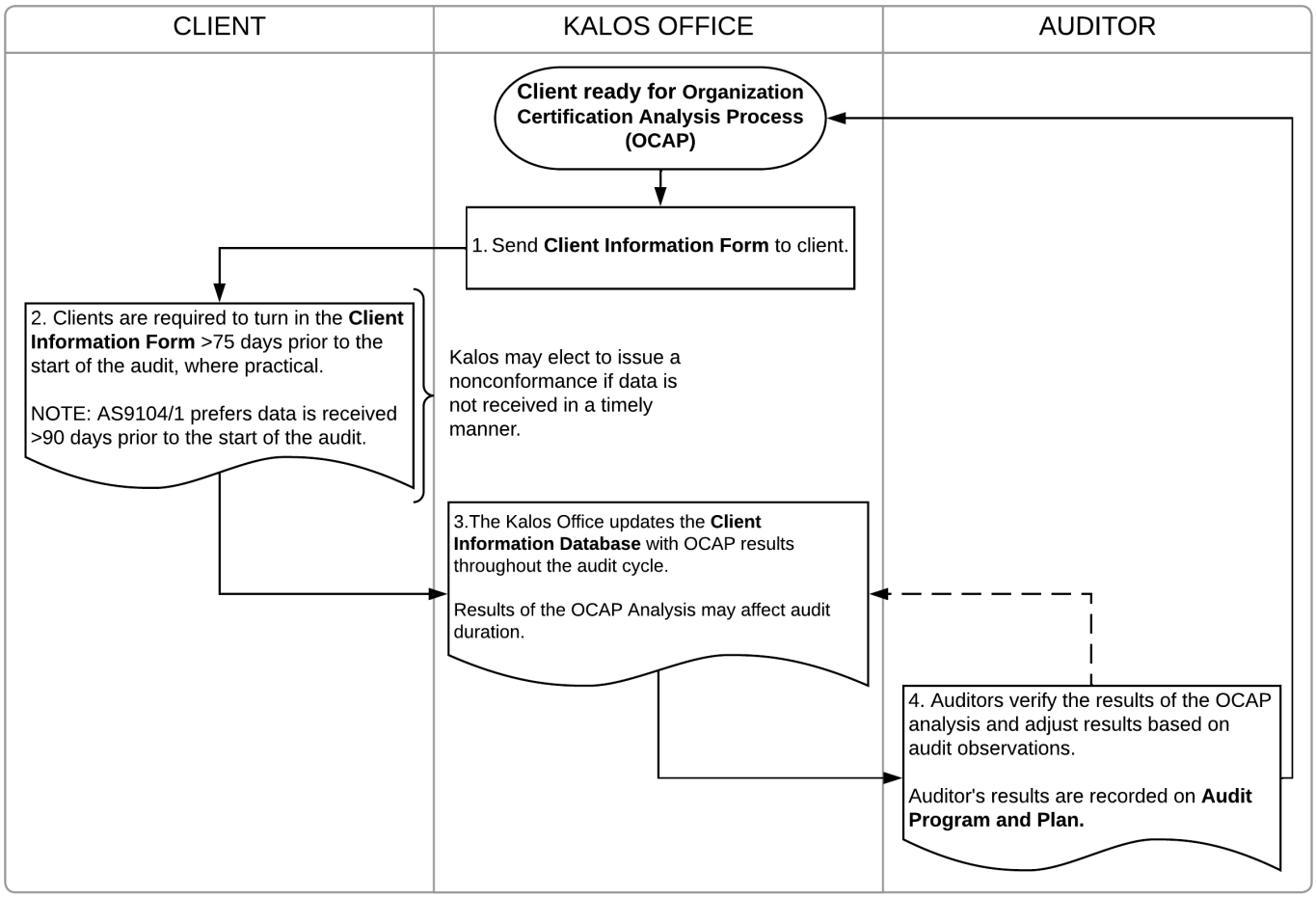
1. Organization Certification Analysis Process (OCAP) and Performance Data Collection

Time requirements will be enforced upon accreditation to AS9104/1:2022

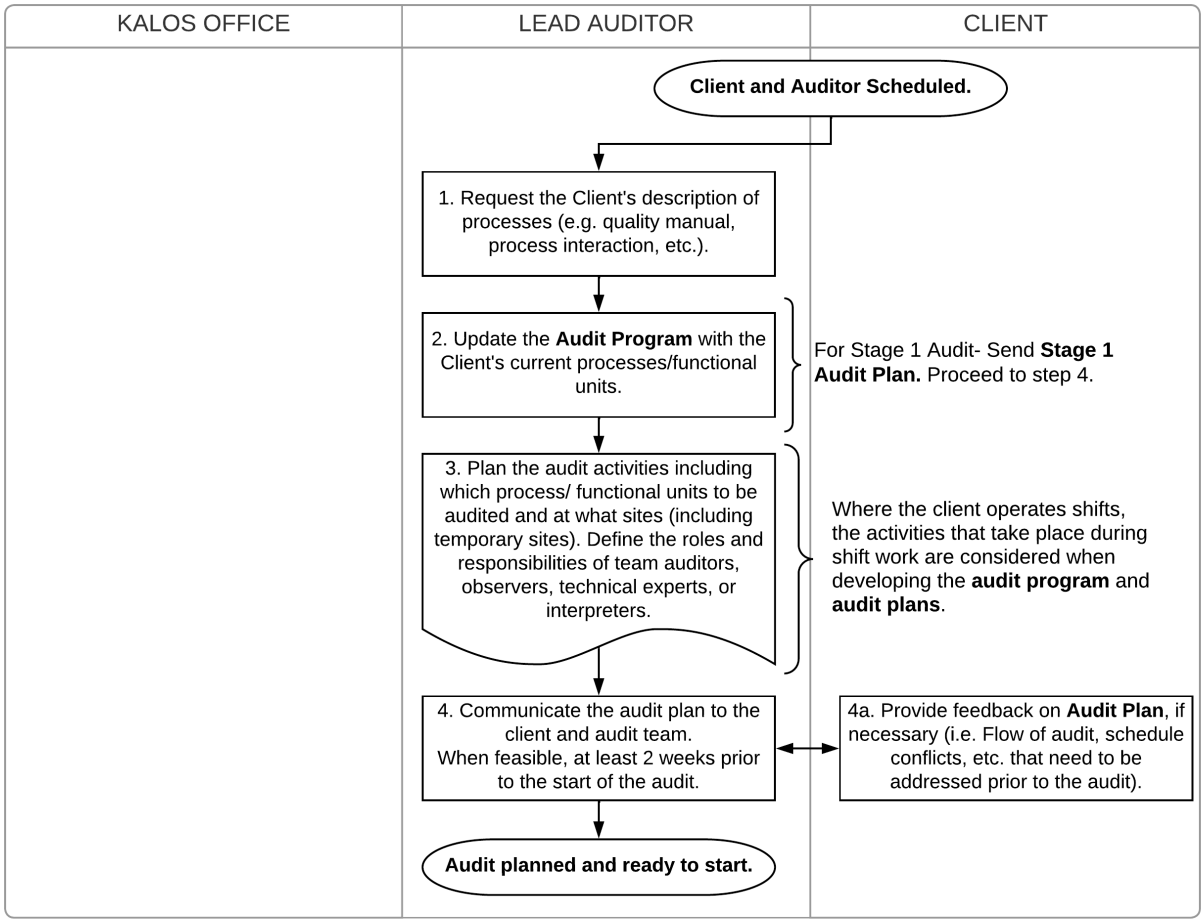


1.1 ***Kalos in conjunction with clients performs a comprehensive analysis of the organization's QMS scope, site structure, certification audit program, and risk assessment. The results and supporting information are documented and retained (see AS9104/1 Figure 1).***

- The analysis is:
  - Conducted prior to initial certification and updated for each surveillance or recertification audit;
  - Verified and the verification documented by the CB's audit team; and
  - Updated by the audit team and adjustments made to the audit plan or program, as applicable.

NOTE: Data from Stage 1 activities can be used to document the analysis of the organization.

2. Audit Program & Planning



2.1 *AQMS Audit Teams*

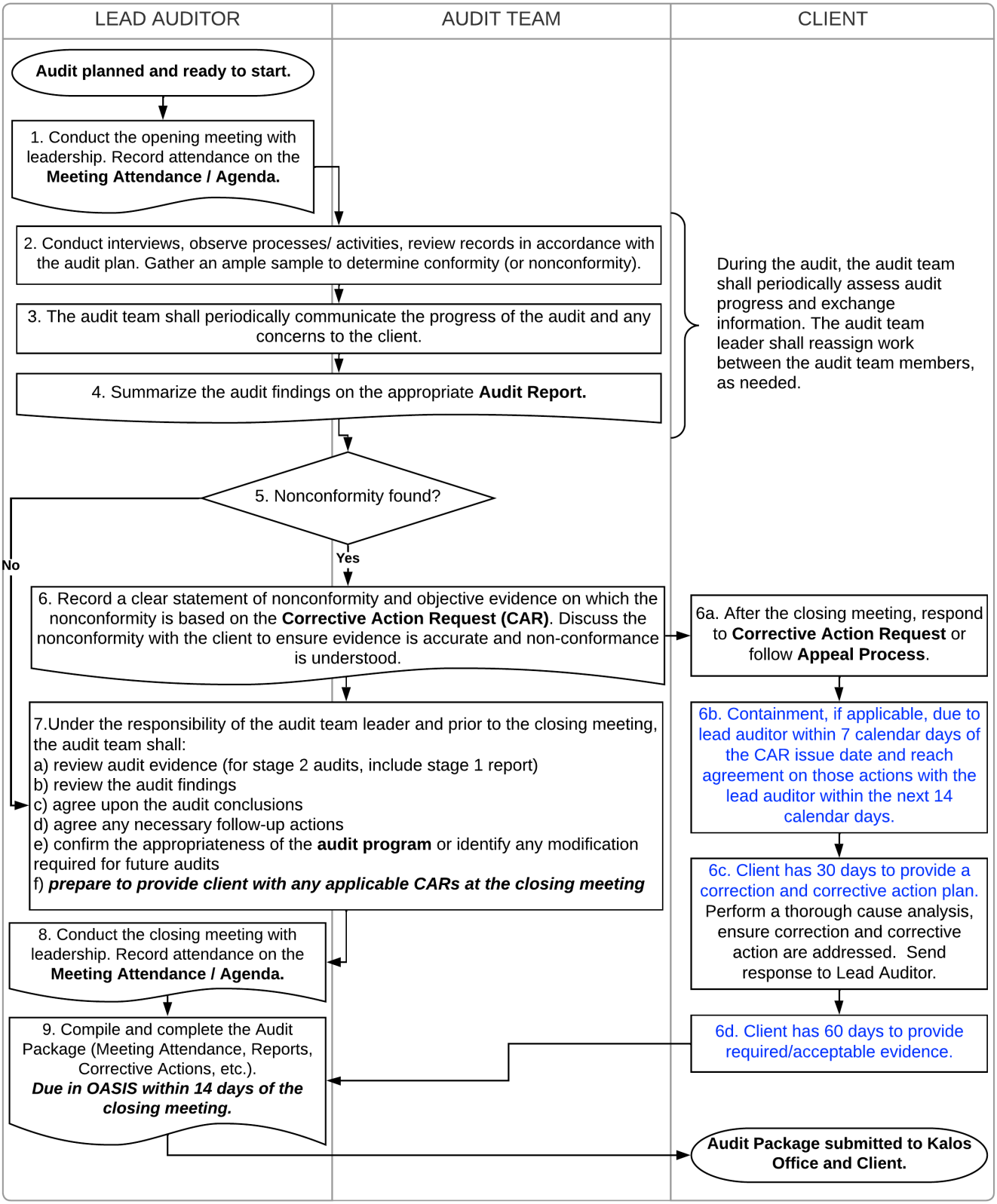
- ***The Team Leader, in consultation with Kalos Scheduler, plans the audit considering auditor competence, background knowledge in Standards and technological/industrial sectors.***
- ***The audit plan demonstrates that the lead auditor has assigned auditors to effectively audit the client sites.***
- ***Audit team leader must ensure that an AEA is on-site and actively involved at each site during the entire audit***.
- ***The background knowledge of the audit team may be supplemented by an organization briefing, specific training, or the assignment of experts (e.g., subject matter or technical experts from industry or professional institutions).***

2.2 [Intentionally Blank]

2.3 Shift Auditing ***(Resolution 173)***

- ***For processes that occur on more than one shift, all shifts (including weekend shifts) shall be audited during the normal hours of work for the shift.***
- ***The audit team shall audit the process activity, including interviews of personnel and observation of process activity and controls during the normal working hours of the shift.***
- ***Auditing limited to only a review of a shift's outputs (e.g., documented information, product, etc.) is not considered to be adequate.***
- ***Shift auditing, whereby a longer day is planned, cannot reduce required audit duration.***

3. Conducting the Audit



3.1 ***In addition, in case of a non-single site certification structure:***

- ***the AEA shall conduct site specific opening meetings; or***
- ***a central opening meeting shall be conducted with representatives from all sites, either physically or by means of electronic/distance meeting methods (e.g., net-meeting, Webex, Meet-me).***

3.2 Audit activities include:

- conducting the opening meeting
- performing document review while conducting the audit
- communicating during the audit
- assigning roles and responsibilities of guides and observers
- collecting and verifying information
- generating audit findings
- preparing audit conclusions
- conducting the closing meeting

3.3 In the event an audit is unable to be completed, or audit objectives are not met, the lead auditor is to communicate this with the client and contact the Kalos office immediately. The office will determine the appropriate action to be taken on a case-by-case basis (e.g. rescheduling, adding time to subsequent surveillance, exchanging an auditor, etc.)

3.4 [Intentionally left blank]

3.5 [Intentionally left blank]

3.6 ***Nonconformity Management***

- Containment, if applicable, due to lead auditor within 7 calendar days of the CAR issue date and reach agreement on those actions with the lead auditor within the next 14 calendar days.
- Client has 30 days to provide a correction and corrective action plan.
- Client has 60 days to provide required/acceptable evidence.
- The Lead Auditor will reply with feedback/ status within 7 calendar days of Client submission.
- All audits require evidence of correction to be submitted.
- Initial/ Recertification audits require evidence of corrective action to be submitted.

3.7 ***AQMS Clients must provide copies of the audit report and associated documents/records to their customers and potential customers, upon request, unless justification can be provided (e.g., competitor confidentiality, conflict of interest). Client may provide access to this data through the OASIS database or by providing the audit report directly to the customer.***

3.8 [Intentionally left blank]

3.9 Table: Report Package

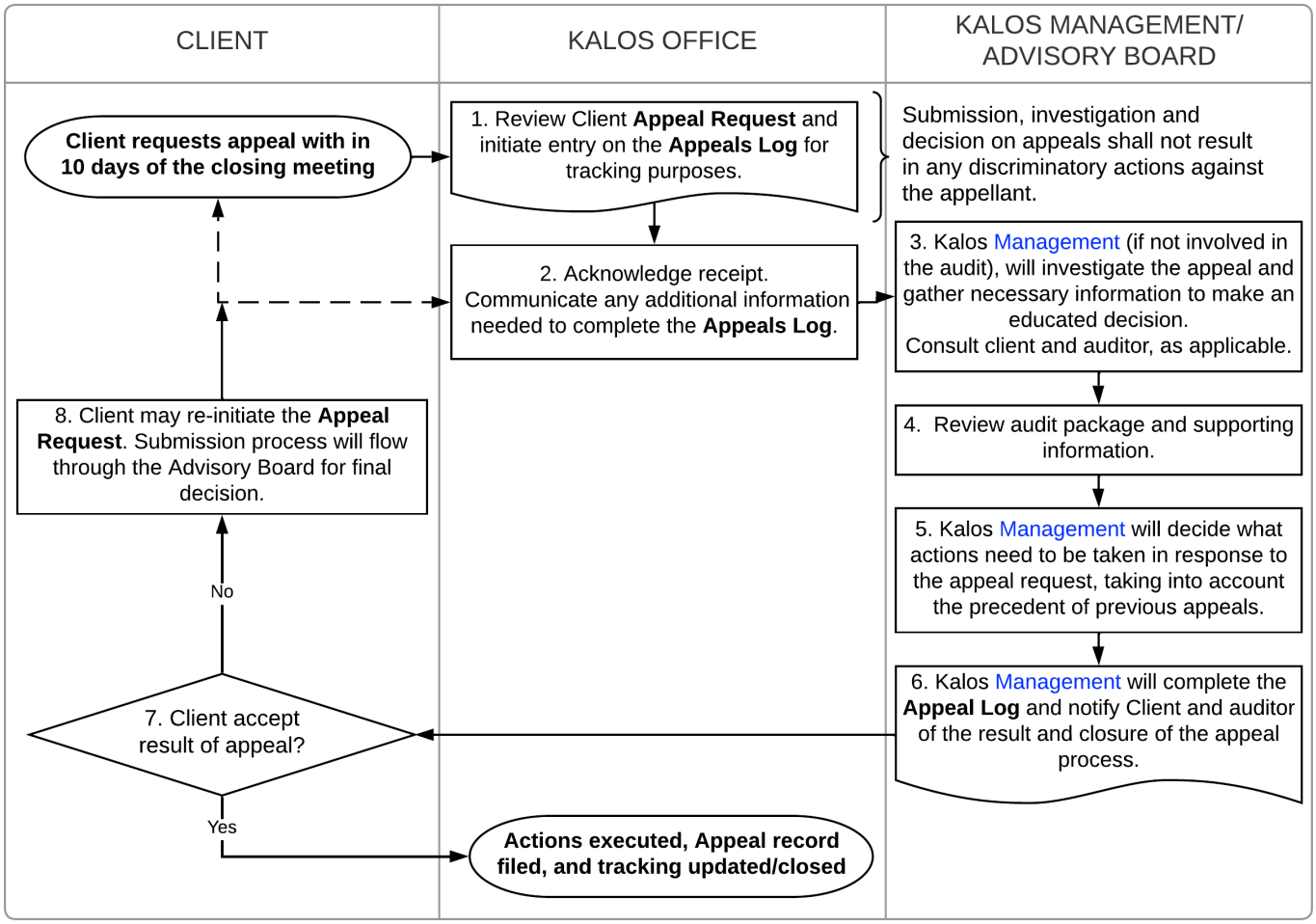
The following table explains the reports required for each type of audit conducted.

Legend	Required	If Applicable	Optional	Not Required

	Stage 1	Stage 2	Surveillance	Recertification	Transfer[2]	Corrective Action Revisit	Special
FM-05-08 AQMS Client Information Update Request ***(includes OCAP, Specification Matrix, and PBS/RS data from client)***			X	X			
FM 05-01 B Notification of Audit (NOA), Audit Calculation, Risk, and Recertification Review (*RR section completed for RC audits only*) ***(includes OCAP, Specification Matrix, and PBS/RS data from office)***	X	X	X	X	X	X	X
FM-05-03 AS Stage 1 Audit Planning Package	X						
FM-05-10 AS Audit Planning Package ***(includes OCAP, Specification Matrix, and PBS/RS data from auditor)*** ○ ***If possible, please send a draft to the client prior to Stage 1 audit.***	X	X	X	X	X	X[1]	X
AS9101 Form 1 Stage 1 Report	X			X			
AS9101 Form 2 QMS Matrix		X	X	X			
AS9101 Form 3 Process Effectiveness Assessment Report (PEAR)		X	X	X			
AS9101 Form 4 Nonconformity Report		X	X	X	X		X
AS9101 Form 5 Audit Report		X	X	X	X		X
AS9101 Form 6 Supplemental Audit Report							X
FM-05-05 AS Pre-transfer Planning Package					X		
FM-05-06 AS Pre-Transfer Review					X		
FM-05-07 Corrective Action Re-visit Report						X	
AS Standards Matrix Checklists – *coming soon*							

1. CAR Revisit Plan can be added to the original audit plan or attached as a separate audit plan.
2. Resolution 166: The requirement to conduct a stage 1 and stage 2 audit if within the last 12 months of certification expiry per EN9104-1:2013 or AS/JISQ9104-1:2012 clause 8.8c need not be applied.

4. Appeals



LEGEND: START/ STOP | PROCESS STEP | DECISION | DOCUMENT | DATABASE UPDATED | PREPARATION

5. OASIS Data Management

5.1 Client and audit data are managed in OASIS in accordance with AS9104 and AS9101.

5.2 Refer to **KP-04 Client Bill of Rights & Responsibilities** for OASIS requirements for AS9100/AS9120 Certified Organizations.

5.3 The table below describes the OASIS data management responsibilities and timelines (***reference AS9104/1 8.5***).

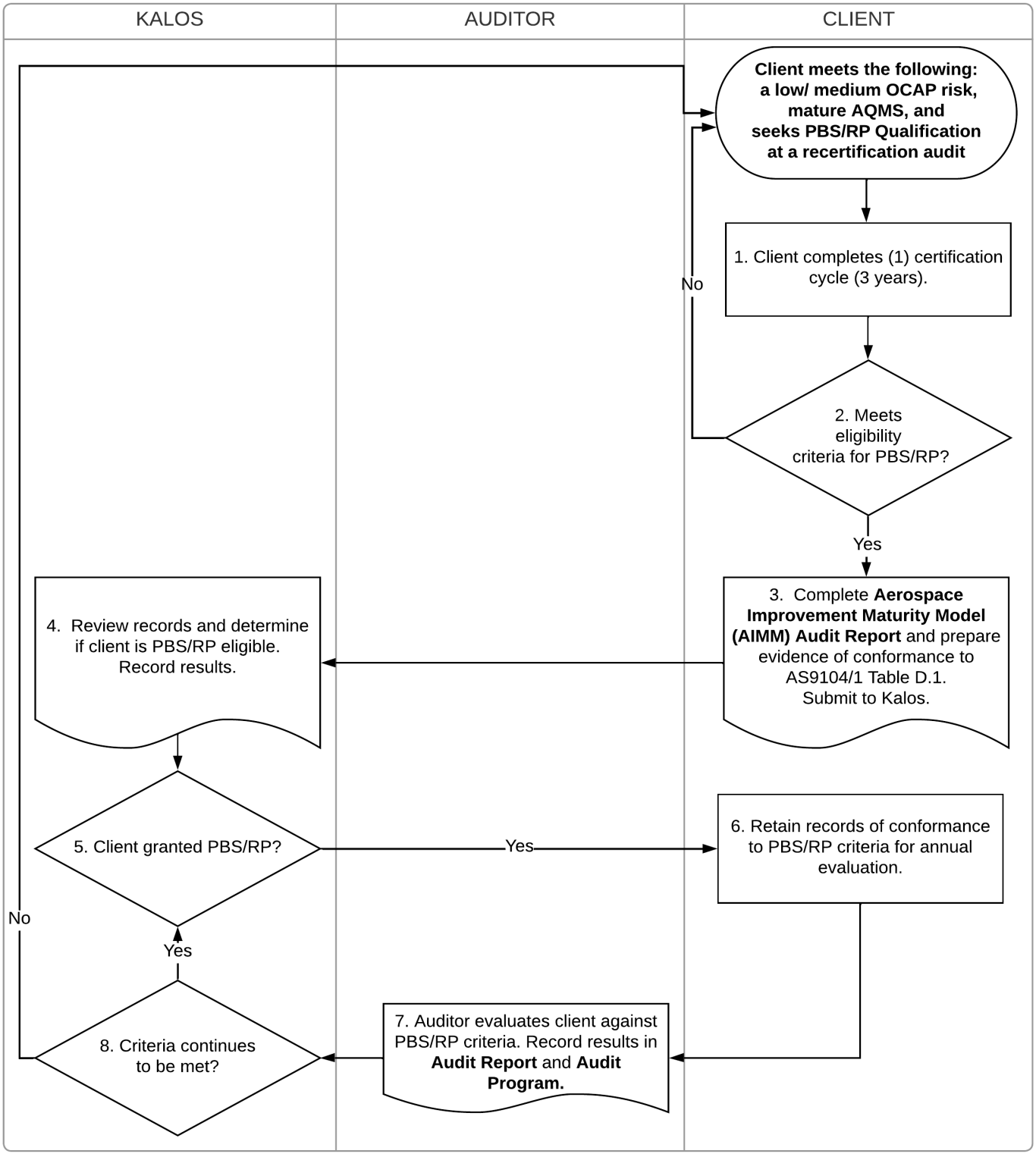
Description of Data Entered	Responsible Party	Timeline
APPENDIX C – INFORMATION TO BE UPLOADED INTO THE ONLINE AEROSPACE SUPPLIER INFORMATION SYSTEM DATABASE 1. Data Input: • Certificate identification, including issue/reissue and expiry date. • Scope of certification. • Type of audit performed (i.e., initial, surveillance, recertification, special). • Audit dates and number of on-site audit days (i.e., number of auditors and number of days spent by the audit team); for example, 3 auditors spend 4 days = 12 audit days. • The number of organization employees per site listed on the certificate. • Name of lead auditor. • Name(s) of other Aerospace Experience Auditors (AEAs) and Aerospace Auditors (AAs) that participated on the audit. • The applicable AQMS standard and revision level (e.g., AS9100C) against which the audit was performed. NOTE: For each standard (i.e., 9110, 9110, 9120) a separate entry is required. • Number of major and minor nonconformities per clause for the applicable AQMS standard(s). • Audit summary. • Organization identified exclusions; identified by clauses for the applicable standard. • Process Effectiveness Assessment Report (PEAR) data: – PEAR identification number; – Effectiveness level; – Process name; – Standard(s) clause(s); – Site; – Auditor(s) name; – Issue date; and – Audit report number.	Kalos	***For audits involving a certification decision, the CB shall be responsible for the input of the required data into the OASIS database within 30 days after the certificate issue date.*** ***For all other audits, the CB shall submit the required data into the OASIS database within 90 days after the on-site visit date.***
○ ***Organization name, address, and locations included on the certification (approval by the CB is required prior to revising this data).*** ○ ***The name(s) and e-mail address(es) of the organization's OASIS database administrator(s).*** ○ ***The organization's contact person, phone, fax, e-mail address, and website, as applicable.***	Client OASIS Administrator	Client's must update OASIS information upon initial entry and maintain the information.

6. Integrated Management Systems

The audit plan shall ensure that:

- ***All areas and activities applicable to each AQMS standard covered by the scope of the visit are assessed by competent authenticated AQMS auditors.***
- ***Sufficient time is allocated to accomplish a complete and effective audit of the client's management system(s) for the AQMS standards covered by the scope of the audit.***
- ***The audit team, as a whole, satisfies the competence requirements for the relevant technical area(s) for each certification scheme covered by the scope of the combined audit. In cases where the audit team leader does not have the competence required to audit all AQMS standards covered by the combined audit, individual team members shall be appointed as the 'lead auditor' for each applicable standard and be responsible for any related recommendations that fall outside the competence of the audit team leader.***
- ***All applicable elements of each AQMS standard relevant to the scope of the combined audit shall be adequately assessed. For example, when conducting a combined audit of an IMS covering 9100 and 9120, it would be unacceptable to verify the effectiveness of the system for "corrective action" by only auditing samples relevant to one of the standards (e.g., 9100).***
- ***In some limited activities associated to the audit plan, it may be appropriate for AQMS auditors to audit aspects of an AQMS standard for which they are not formally qualified (e.g., 9100 AEA reviewing 9120 aspects):***
    - ***areas where the requirements of the AQMS standards and the technical knowledge to undertake the audit is common (e.g., control of documents);***
    - ***areas where the AQMS auditor verifies compliance with requirements which are administrative in nature; or***
    - ***confirmation of evidence/close out of an audit trail.***

7. Performance Based Surveillance/Recertification Process Qualification



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7.2 General

- When a client applies for PBS/RP, the following table requirements apply:

PBS/RP QUALIFICATION REQUIREMENTS AND CRITERIA
A. Completion of one AQMS certification cycle.
B. The OCAP risk analysis from 8.5.1.5 results in a low/medium risk for each site, including the central function.
C. Implementation of an Internal Audit Program in accordance with ISO 19011, including: • Annual audit of all applicable AQMS requirements; and • Defined, structured, multiple event audit program that adjusts throughout the calendar year based upon: - performance; - customer complaints; - risk; and - change management.
D. Internal auditor competency that includes: • Auditor(s) that have completed a TPAB approved ASD Lead Auditor course (reference 9104/3).
E. Organization has an ethics policy that includes communication and reporting processes.
F. No externally identified major nonconformity (e.g., CB, customers, regulatory authorities), as defined in 9101, in the past 12 months related to internal audit, management review, or corrective action processes issued to either a single site or to the central function within a multi-site structure.
G. No certificate suspension due to an AQMS nonconformance in the past six years.
H. Meeting customer satisfaction metrics, based on customer provided data.

- ***Multi-site organizations eligible for PBS/RP include the following auditing program requirements:***
  - ***During surveillance, the central function and 33% of the sites, rounded up to the nearest whole number;***
  - ***At recertification all remaining sites and the central function; and each site, process, and AQMS standard clause is audited at least once every 48 months.***
- ***A special audit used for adding a site(s) to an existing certificate using PBS/RP requires a certificate decision. The site(s) added to the PBS/RP program are audited using recertification criteria during surveillance, prior to the next recertification decision.***

7.3 [Intentionally left blank]

7.4 [Intentionally left blank]

7.5 ***When using PBS/RP, audit durations are calculated as follows:***

- ***For a single site structure, audit duration may be reduced up to 33% from the AS9104/1 Table 8 calculation. No more than 50% reduction allowed.***
- ***For multi-site structures, audit duration for each site shall be calculated using the "Recertification Audit Duration" requirements from AS9104/1 Table 8 for surveillance and recertification. This number may be reduced up to 33% per site. No more than 50% reduction allowed.***
  NOTE: This applies at initiation of PBS/RP and at any time during the certification cycle.
- ***For multi-site structures using PBS/RP for the central function, audit duration shall be calculated using the "Surveillance Audit Duration" requirements from Table 8 and may be reduced 33% for surveillance and recertification.***

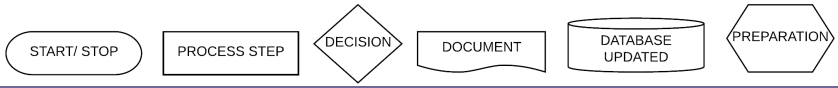
7.6 [Intentionally left blank]

7.7 [Intentionally left blank]

7.8 Annual Performance Based Surveillance/Recertification Process Adjustments

CERTIFICATE ISSUE	PBS/RP ADJUSTMENT
A. Certificate suspension related to the QMS during the certification cycle	Not eligible for PBS/RP. Not eligible for the remainder of certification cycle plus one more certification cycle.
B. OCAP results reflect overall high risk	Improvement plan shall be established; CB follow-up is required. No reduction in PBS/RP audit duration reduction for the central function per 8.5.3.5.c. Utilize the recertification criteria to calculate audit duration regardless of the audit type. If the high risk is not addressed by the next annual audit, then no sites are eligible for PBS/RP audit duration reductions, including the central function.
C. Failure to re-affirm the PBS/RP qualification criteria are met	Establish an improvement plan and CB follow-up is required. No PBS/RP audit duration reduction per 8.5.3.5 for any sites, including the central function. If PBS/RP criteria is not met at recertification planning, then PBS/RP is not allowed.
D. OCAP risk analysis is high for organization or site(s)	No PBS/RP audit duration reduction per 8.5.3.5 for the site(s). Include the site(s) in the annual audit plan.
E. Externally identified major AQMS nonconformity issued to a site(s)	No PBS/RP audit duration reduction per 8.5.3.5 for the site(s). Include the site(s) in the annual audit plan.
F. Site(s) is not meeting or exceeding customer satisfaction metrics on the latest customer provided data	No PBS/RP audit duration reduction per 8.5.3.5 for the site(s). Include the site(s) in the annual audit plan.

NOTE: Site risk analysis should be performed when there is available site data to determine on-going effectiveness of PBS/RP.



Revision History *(previous revision history on file in FM 01-06 Operations Log – Document History tab)*	**Approved By**	**Date**

Updated per Kalos 2026 Internal Audit:
• [KA-2026-053] -Bold/Italic formatting cleaned up.
• [KA-2026-033] *Added Section 1.3:* Shift Auditing
  ○ For processes that occur on more than one shift, all shifts (including weekend shifts) shall be audited during the normal hours of work for the shift.
  ○ The audit team shall audit the process activity, including interviews of personnel and observation of process activity and controls during the normal working hours of the shift.
  ○ Auditing limited to only a review of a shift's outputs (e.g., documented information, product, etc.) is not considered to be adequate.
  ○ Shift auditing, whereby a longer day is planned, cannot reduce required audit duration.
• Moved Section 3.2 "Audit activities include" from KP-02.
• [KA-2026-037] Added to Section 3.6 "Nonconformity Management" from Meeting Agenda, so all documents match.
• Move Report Table down to Section 3. Update Report table to match current form numbers and names.
• [KA-2026-047] Added 4.2 "Refer to KP-04 Client Bill of Rights & Responsibilities for OASIS requirements for AS9100/AS9120 Certified Organizations." Update table to clarify requirements.
	Michaela Scarla	3/18/2026