



# National Information Security Compliance Framework (NISCF) National Information Assurance (NIA) V2.1 Certification

## SERVICE REQUEST FORM

[NCSA-NISCF-CERT-NIA-RQTF]

### Request Information

Request Type

Current Certificate  
of Compliance ID

(If Request type is "Request for NIA Certification Scope Expansion" or "Request for NIA Re-Certification", provide the current Certification ID.)

### Applicant Information

Applicant Name

(The Organization name should be as stated on the Establishment Card)

Applicant Commercial Registration Number  
(Not Applicable for Government Agencies)

Applicant Establishment Card Number

Applicant Address

P.O. Box

Email

Telephone Number

Website

If the applicant is raising the request on behalf of a different organizations (i.e., NIA Certification Service Subjects), provide the details mentioned in Appendix A.



## Nominated Representative (NR)

All Applicants and Certified Organizations shall formally appoint a Nominated Representative (NR) (Contact Person) who as the duly authorized representative of the applicant that shall have the authority and responsibility for all matters relating to NIA Certification and for maintaining the link and communication between the Applicant or Certified Organization and NCSA.

### Nominated Representative (NR) 01

Name of Individual

Position/Role

Telephone No.

Mobile

Email

### Nominated Representative (NR) 02

Name of Individual

Position/Role

Telephone No.

Mobile

Email

## Implementation Details

Kindly provide the legal name of any Service Provider that assisted in the implementation of NIA requirements.



## Declaration

I/We the undersigned hereby:

- Declare that we have the authority, on behalf of this Applicant / Certified Organization, to submit this request and affirm that the information provided herein is accurate and correct to the best of our knowledge and belief.
- Acknowledge that the National Cyber Security Agency (NCSA) reserves the right to withdraw or cancel the request if the information provided is found to be inaccurate, untrue, or outdated.
- Understand that any collected information, referred to as Personal Data, will be processed in accordance with the NCSA Privacy Notice.
- Agree that the designated Nominated Representative(s) have knowledge and understanding of all requirements relating to NIA Certification Service and possess positive attitude toward NIA Certification Service and its related processes and act with diligence and integrity.
- Recognize that the NCSA has full discretion to decline the request if the applicant is not eligible to NIA Certification Service request, Scope Expansion or Re-Certification request.
- Consent to comply with the NISCF NIA Certification Service Agreement, terms and Conditions, relevant NISCF Certification Standards, and all applicable requirements, including any future changes in the NISCF NIA Certification Requirements published by the NCSA.
- Agree to submit, as part of the NIA Certification Service request (application), two (2) copies of a duly executed NIA Certification Service Agreement.
- Agree to provide the relevant documents required in NCSA-NISCF-CERT-NIA-SS (National Information Security Compliance Framework (NISCF) - National Information Assurance (NIA) Certification Scoping Standard) as part of the request.

(To be printed, signed, and sealed by an Authorized Signatory as per the establishment card/Computer Card. Please attach copies of the Establishment Card and Signatory QID for verification purposes).

Full Name

Position/Role

Date

.....  
Signature



## For Verification

### Establishment Card

Front

Click to Upload Photo

Back

Click to Upload Photo

### Signatory Qatar ID

Front

Click to Upload Photo

Back

Click to Upload Photo

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### Company Seal



## Appendix A - Subjects Information

If the applicant is raising the request on behalf of a different organizations (i.e., NIA Certification Service Subjects), please provide the below information for the NIA Certification Service Subjects:

Subject Name

(The Organizations names should be as stated on the Establishment Card)

Subjects Commercial Registration Numbers  
(Not Applicable for Government Agencies)

Subjects Establishment Card Number

Subjects Address(es)

P.O. Box

Email(s)

Telephone Number

Website(s)

Kindly provide an explanation of the relationship between the Applicant and subjects.