**Scope and Purpose**

This form is used for supplier self-evaluation of their performance towards NKT Photonics. All questions in table must be answered as completely as possible and returned within the requested time period to **NKTP\_Quality-DK@nktphotonics.com.**

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| **NKT Photonics A/S greatly appreciates your response and willingness to share information with us. Please evaluate your performance towards NKT Photonics in the below Supplier Self Evaluation table.**  |  |
|  |  |
| **All information provided to NKT photonics A/S will be treated as confidential.** |  |
|  |
| 1. **Basic information**
 |   |
| Company name |   |
| Address |  |
| Telephone |   |
| e-mail |   |
| Contact person |   |
| Place of manufacture |   |
| Founded year |   |
|  |  |
| 1. **From latest annual report**
 |   |
| Annual Turnover |   |
| NKTP-share thereof |   |
| Investment related to turnover (in %) |   |
| Number of employees |   |
| EBITDA as a % of Turnover |   |
|  |  |
| 1. **Do you work according to the 10 principles of Global Compact by UN?**
 |   |
|  **- see: www.unglobalcompact.org/AboutTheGC/TheTenPrinciples/index.html** |   |
|  |  |
| 1. **Do you have an implemented and documented Quality management system**
 |   |
| according to ISO 9001, ISO13485 or similar? |   |
| If yes, please forward copy of certificate(s) |   |
| If no, please inform if you work according to another QM-system |   |
| Do you have a Q-department? |   |
| 1. **Do you have an implemented and documented environmental management system**
 |   |
| according to ISO 14001, EMAS or similar? |   |
| If yes, please forward a copy of the certificate. |  |
| If no, please forward your company’s policy or process |   |
| 1. **Does your company have a written and implemented Health & Safety management system**
 |   |
| system according to ISO 45001, BS 18001, or similar Health & Safety management system |  |
| If yes, please forward a copy of the certificate. |  |
| If no, please forward your company’s policy or process |  |
|  |  |
| 1. **Do you accept audits from NKT Photonics and or 3. party assisting NKT Photonics?**
 |   |
|  |  |
| 1. **Do you have full traceability for the products you sell to NKTP?**
 |   |
|  |  |
| 1. **How good is your knowledge about the products that NKTP manufacture?**
 |  |
| (1-10, where 10 is full knowledge) |   |
|  |  |
| 1. **Quality**
 |   |
| Do you have a procedure for handling non-conformities and claims from customers? |   |
| Do you produce medical devices or sub-components to medical devices?  |   |
|  |  |
| 1. **Do you have employees primarily responsible to secure that all logistic issues linked to our purchase, including information about?**
 |   |
| Deviations/changes/obsolete items are in place |   |
| If yes, please state name |   |
|  |
| 1. **Are you compliant with RoHS, Conflict Minerals, WEEE and REACH regulations?**
 |   |
| If yes, please attach the corresponding documentation (certificates, statements, etc.) |   |
|  |  |
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