Organisation name Site or unit		FORM Service Declaration	
Document ID	GOV-FRM-001	**Version**	1.0
Status	Blank form, to adapt	**Issue date**	
Review date		**Replaces**	
Owner		**Approved by**	
Signature			

Form · GOV-FRM-001 · Version 1.0 · Approved by the ASF Expert Committee

Supports: 2A.2

1. Purpose

The signed declaration of which services the facility provides, with its review date.

2. How to complete

- Complete one form per patient, per area or per period, as the purpose states.
- Tick Yes, No or N/A. Any No is actioned at once and reported to the person named in the procedure.

3. Checks

Item to check	Standard reference
Services provided (list each service and setting)	Declared [EC]
Services not provided	Declared [EC]
Named clinical lead for each service	Yes [EC]
Signed by chief executive	Yes [EC]
Review date	Set, not more than 12 months [EC]

4. Evidence

Reference	Note
E-009	ASF Expert Committee consensus.

5. Change history

Version	Date	What changed	Approval
1.0	—	First approved version	Approved by the ASF Expert Committee

6. References

- Accréditation Sans Frontières (2026). ASF Expert Committee consensus on Standard 1. (E-009)

Download this document as PDF