[CB's letterhead containing name and address]

Scope Certificate

Scope Certificate Number xxxxx

Certification_body_name certifies that

Name_of_Certified_Company

License Number xxxxxx

Certified Company_address_line1 Certified Company_address_line2 [*if applicable*] Certified Company_address_line3 [*if applicable*] Town, Postcode State/province, Country/area has been audited and found to be in conformity with the

GLOBAL ORGANIC TEXTILE STANDARD (GOTS) Version X.X

Product categories as mentioned below (and further specified in the product appendix) conform with this standard:

Product_Category1 (PC0000); Product_Category2 (PC0000); Product_Category3 (PC0000); Product_Category4 (PC0000); Product_Category5 (PC0000) ...

Process categories carried out under responsibility of the above mentioned company for the certified products cover:

Process_Category1* (PR0000); Process_Category2* (PR0000); Process_Category3 (PR0000) Process_Category4 (PR0000); Process_Category5* (PR0000) ...

*The processes marked with an asterisk may be carried out by subcontractors.

This Certificate is valid until: YYYY-MM-DD

[Repeat on every page] Place and Date of Issue Place, YYYY-MM-DD

Signature of Authorised Person

Name of Authorised Signatory

Certification Body

mp /

Stamp / Logo of CB



Standard Logo

Certification Body Accredited by: Name of Accreditation Body Accreditation Number: xxxxxxx

This scope certificate provides no proof that any goods delivered by its holder are GOTS certified. Proof of GOTS certification of goods delivered is provided by a valid transaction certificate (TC) covering them.

The issuing body may withdraw this certificate before it expires if the declared conformity is no longer guaranteed.

For directions on how to authenticate this certificate, please visit GOTS' web page 'Approved Certification Bodies'.

A_sentence_that_references_the_certificate_to_stipulations_of_the_contract_with_the_licensee_and/or_clauses_of certifier's_scope_specific_stipulations. [Optional]

[CB's letterhead containing name and address]

Scope Certificate Number xxxxxx (continued) Name_of_Certified_Entity GOTS Version X.X

Under the scope of this certificate, the following products are covered.

Products Appendix

Product Category	Product Details	Material Composition*	Label Grade
Product_category (PC0000)	Product_detail (PD0000)	0% Raw_material1 (RM0000) + 0% Raw_material2 (RM0000)	Label_grade_name
Product_category (PC0000)	Product_detail (PD0000)	0% Raw_material1 (RM0000) + 0% Raw_material2 (RM0000)	Label_grade_name
Product_category (PC0000)	Product_detail (PD0000)	0% Raw_material1 (RM0000) + 0% Raw_material2 (RM0000)	Label_grade_name
Product_category (PC0000)	Product_detail (PD0000)	0% Raw_material1 (RM0000) + 0% Raw_material2 (RM0000)	Label_grade_name
Product_category (PC0000)	Product_detail (PD0000)	0% Raw_material1 (RM0000) + 0% Raw_material2 (RM0000)	Label_grade_name

*Quantification (percentages) of material composition is optional.

[Repeat on every page] Place and Date of Issue Place, YYYY-MM-DD

Signature of Authorised Person

Name of Authorised Signatory

Certification Body

Stamp / Logo of CB





[CB's letterhead containing name and address]

Scope Certificate Number xxxxxx (continued) Name_of_Certified_Entity GOTS Version X.X

Under the scope of this certificate, the following facilities have been audited and found to be in conformity with the Standard.

Facility Appendix

Facility Name	Address	Process Categories	
Facility_name1 (main)	Facility_address_line1 Facility_address_line2 [<i>if applicable</i>] Facility_address_line3 [<i>if applicable</i>] Town, Postcode State/province, Country/area	Process_category1 (PR0000); Process_category2 (PR0000); Process_category3 (PR0000); Process_category4 (PR0000)	
Facility_name2 Facility_address_line1 Facility_address_line2 [<i>if applicable</i>] Facility_address_line3 [<i>if applicable</i>] Town, Postcode State/province, Country/area		Process_category1 (PR0000); Process_category2 (PR0000); Process_category3 (PR0000); Process_category4 (PR0000)	
Facility_name3 Facility_address_line1 Facility_address_line2 [if applicable] Facility_address_line3 [if applicable] Town, Postcode State/province, Country/area		Process_category1 (PR0000); Process_category2 (PR0000); Process_category3 (PR0000); Process_category4 (PR0000)	

Non-Certified Subcontractor Appendix

Subcontractor Name (Facility Name)	Address	Process Categories	
Subcontractor _name (Facility_name)	Facility_address_line1 Facility_address_line2 [<i>if applicable</i>] Facility_address_line3 [<i>if applicable</i>] Town, Postcode State/province, Country/area	Process_category1 (PR0000); Process_category2 (PR0000); Process_category3 (PR0000); Process_category4 (PR0000)	
Subcontractor _name (Facility_name) Facility_address_line2 [if applicable] Facility_address_line3 [if applicable] Town, Postcode State/province, Country/area		Process_category1 (PR0000); Process_category2 (PR0000); Process_category3 (PR0000); Process_category4 (PR0000)	

Independently Certified Subcontractor Appendix

Subcontractor Name (Facility Name)	Licence Number	Expiry Date	Address	Process Categories
Subcontractor_name (Facility_name)	(Subcontractor_ license _number)	YYYY-MM-DD	Facility_address_line1 Facility_address_line2 [<i>if applicable</i>] Facility_address_line3 [<i>if applicable</i>] Town, Postcode State/province, Country/area	Process_category1 (PR0000); Process_category2 (PR0000); Process_category3 (PR0000); Process_category4 (PR0000)
Subcontractor_name (Facility_name)	Subcontractor_ license _number)	YYYY-MM-DD	Facility_address_line1 Facility_address_line2 [<i>if applicable</i>] Facility_address_line3 [<i>if applicable</i>] Town, Postcode State/province, Country/area	Process_category1 (PR0000); Process_category2 (PR0000); Process_category3 (PR0000); Process_category4 (PR0000)

[Repeat on every page]

Place and Date of Issue Place, YYYY-MM-DD

Signature of Authorised Person

Name of Authorised Signatory

Certification Body

Stamp / Logo of CB Standard Logo



This electronically issued document is the valid original version. [if applicable]

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