

**Key and supplementary comparisons (and pilot studies) - registration and progress form**

| Comparison conducted by   |                            | in  | Date:  |
|---|----------------------------|---|--|
| 1. Subfield:  |                            | RMO internal identifier                     |  |
| 2. KCDB identifier:<br><i>(for KCs and SCs) (to be attributed by the BIPM)</i>              |                            |   |  |
| 3. Type of comparison:<br><br>Key          Supplementary          Pilot study               |                            | 4. Short description:                       |  |
| 5. Measurand and nominal value(s):  |                            |   | Special characters for copying<br><i>(if required)</i> |
| 6. Parameter(s):  |                            |   |  |
| 7. Transfer device(s)/sample(s):  |                            |   |  |
| 8. Pilot/Coordinating laboratory(ies) ( <i>acronyms and countries</i> ):                    |                            |   |  |
| 9. Participating institutes ( <i>acronyms and countries</i> ):                              |                            |   |  |
| 10. Progress: <i>(please note date and tick appropriate box to indicate current status)</i> |                            |   |  |
| <b>Date</b>   | <b>Status</b>              | <b>Pilot</b>                                | <b>Supplementary</b>                                   |
|   | Planned                    |   |  |
|   | Protocol complete/approved |   |  |
|   | In progress                |   |  |
|   | Measurement completed      |   |  |
|   | Report in progress         |   | Draft A<br>Draft B                                     |
|   | Report submitted to        |   |  |
|   | Results approved           |   |  |
|   | Approved for equivalence   |   |  |
|   | Abandoned                  |   |  |
| Comments:   |                            | Publication reference:                      |  |
| 11. Measurement start date:   |                            | 12. (Expected) measurement completion date: |  |
| 13. Contact person's name:  |                            |   |  |
| Address:  |                            | Tel.:                                       |  |
|   |                            | Fax:  |  |
|   |                            | e-mail:                                     |  |
|   |                            | Web:  |  |

Completed copy to be forwarded to a) CCXX Executive Secretary;

b) relevant CC Key Comparison WG Chairman;

c) Regional coordinator as appropriate;

d) KCDB Coordinator (except Pilot studies): [BIPM.KCDB@bipm.org](mailto:BIPM.KCDB@bipm.org)