

SQAS-AFRICA Audit Feedback Form

Purpose

This report shall enable auditees (audited organisations) to provide feedback on their perception of the value and performance of the auditor for use as an input to auditors' competence review for their CAIA certification.

Please contact the CAIA office should there be any queries or any clarification required.

Auditor Name & Surname:		
Date of Audit:		
Questionnaire Completed by:		
Auditee Company Name:		
Auditee Company Contact Details	E-mail	
	Telephone	

Complete as appropriate

Scoring Legend	A: Exceeds requirement/expectation	B: Adequately meets requirements			
	C: Needs to improve	D: Does not meet requirements			
Conduct of auditor	Comments	A	B	C	D
Relevant industry knowledge					
Knowledge of audit standard/requirements					
Working systematically					
Time keeping. Not side-tracked. No wasting of time on unrelated issues					
General attributes	Comments	A	B	C	D
Listening – attentively, without undue interruptions					
Diplomacy – tactful, subtle					
Appropriately dressed					
Polite and courteous					
Acting ethically under all circumstances					
Cool, calm, collected, not liable to excessive emotion when put under pressure during the audit					
Interpersonal skills					
Auditor expressed him/herself logically					
Audit outcomes and feedback	Comments	A	B	C	D
Auditor gave clear feedback on non-conformances					

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Auditor made sound judgement based on evidence					
Interpretation of results					
Clear explanations of non-conformances					
The audit objectives were achieved					
The auditor adequately handled queries (if applicable)					
Pre-audit notifications	Comments	A	B	C	D
Informed timeously of the audit plan					
Contacted timeously to inform you of expected time of arrival of auditor/s					
Contacted timeously to request pre-audit documentation for review					
Auditor arrived on time					
Opening meeting	Comments	A	B	C	D
The following clearly defined/attended to:	-	-	-	-	-
• Introductions					
• Verification and review of audit plan					
• Audit scope & criteria					
• Audit objectives and process					
• Confidentiality					
• Explanation of the roles of the auditor & auditee					
Closing meeting	Comments	A	B	C	D
Disclaimer explained (sampling basis of audits)					
Clear summary of non-conformances					
Interpretation of results					
Method of reporting and time period					
Details related to any corrective action and follow up					
Complaints/Disputes/Appeals					
Any questions were adequately answered					
Audit Report	Comments	A	B	C	D
Report submitted timeously					
Report accurate, reflective of audit outcome					
Any report queries resolved satisfactorily					

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Name: (Auditee):	
Signature (Auditee):	
Date of completion:	

FOR CAIA USE ONLY	
Confirmation - please mark the appropriate statement	
I would recommend this auditor to be certified as a SQAS-AFRICA auditor	<input type="checkbox"/>
I would not recommend this auditor to be certified as a SQAS-AFRICA auditor	<input type="checkbox"/>
I refrain from commenting on whether this auditor should be certified as a SQAS-AFRICA auditor	<input type="checkbox"/>
Strengths <small>(Where specific mention is applicable)</small>	
Weaknesses <small>(Where specific mention is applicable)</small>	

Name (CAIA):	
Signature (CAIA):	
Date of completion:	