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| **Title:** | **Report No. :** |
| **Standard:** | **Date of Audit:** | **Date of Report:** |
| **Audit Team:**  |  |

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| 1. **Introduction**
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| 1. **Summary of Positive Findings and Areas of Concern**
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| 1. Positive Findings
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| 1. Areas of Concern
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| 1. **Report on non-conformity raised**
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| Total NCRs: |  |
| Total Opportunity for Improvement (OFI)s: |  |

 (Refer to details in *Appendix 2)* |
| 1. **Status of previous audit findings**
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| 1. **Audit Conclusion**
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| Prepared by:(Lead Auditor)Name: Date: | Reviewed by:(Director of CQA)Name: Date: | Approved by:(Vice Chancellor)Name: Date: |