



# Audit Checklist Template

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## Audit Information

- ☐ Audit type: \_\_\_\_\_
- ☐ Audit scope: \_\_\_\_\_
- ☐ Audit date: \_\_\_\_\_
- ☐ Auditor(s): \_\_\_\_\_
- ☐ Department/Area: \_\_\_\_\_
- ☐ Contact person: \_\_\_\_\_
- ☐ Previous audit date: \_\_\_\_\_
- ☐ Follow-up required: \_\_\_\_\_

## Pre-Audit Preparation

- ☐ Audit notification sent %i Date: \_\_\_\_\_
- ☐ Documents requested %i Received: \_\_\_\_\_
- ☐ Audit plan prepared %i Approved: \_\_\_\_\_
- ☐ Team briefing conducted %i Date: \_\_\_\_\_
- ☐ Tools/templates ready %i Confirmed: \_\_\_\_\_
- ☐ Schedule confirmed %i Date: \_\_\_\_\_
- ☐ Access arranged %i Confirmed: \_\_\_\_\_
- ☐ Logistics planned %i Complete: \_\_\_\_\_

## Opening Meeting

- ☐ Introductions made
- ☐ Audit purpose explained
- ☐ Scope confirmed
- ☐ Schedule reviewed
- ☐ Methodology explained
- ☐ Questions addressed
- ☐ Cooperation requested
- ☐ Confidentiality assured

## Document Review

- ☐ Policies reviewed %i Current: Y/N
- ☐ Procedures examined %i Adequate: Y/N
- ☐ Records inspected %i Complete: Y/N
- ☐ Reports analyzed %i Accurate: Y/N
- ☐ Approvals verified %i Proper: Y/N
- ☐ Contracts reviewed %i Compliant: Y/N

- ☐ Licenses checked %i Valid: Y/N
- ☐ Certifications verified %i Current: Y/N

## Process Evaluation

- ☐ Process documented %i Rating: \_\_\_\_\_
- ☐ Controls identified %i Rating: \_\_\_\_\_
- ☐ Compliance verified %i Rating: \_\_\_\_\_
- ☐ Efficiency assessed %i Rating: \_\_\_\_\_
- ☐ Risks evaluated %i Rating: \_\_\_\_\_
- ☐ Improvements noted %i Count: \_\_\_\_\_

## Compliance Verification

- ☐ Requirement understood %i Y/N
- ☐ Evidence reviewed %i Y/N
- ☐ Compliance confirmed %i Y/N
- ☐ Exceptions noted %i Count: \_\_\_\_\_
- ☐ Action required %i Y/N

## Testing & Sampling

- ☐ Sample size: \_\_\_\_\_
- ☐ Selection method: \_\_\_\_\_
- ☐ Tests performed: \_\_\_\_\_
- ☐ Pass rate: \_\_\_\_\_ %
- ☐ Failures documented: \_\_\_\_\_
- ☐ Root cause identified: \_\_\_\_\_

## Observations & Findings

- ☐ Category: \_\_\_\_\_
- ☐ Severity: High/Medium/Low
- ☐ Description: \_\_\_\_\_
- ☐ Evidence: \_\_\_\_\_
- ☐ Impact: \_\_\_\_\_
- ☐ Recommendation: \_\_\_\_\_
- ☐ Management response: \_\_\_\_\_

## Interview Notes

- ☐ Position: \_\_\_\_\_
- ☐ Date/Time: \_\_\_\_\_
- ☐ Topics covered: \_\_\_\_\_
- ☐ Key points: \_\_\_\_\_
- ☐ Follow-up needed: \_\_\_\_\_

## Physical Inspection

- ☐ Cleanliness: \_\_\_\_\_
- ☐ Organization: \_\_\_\_\_
- ☐ Safety: \_\_\_\_\_
- ☐ Security: \_\_\_\_\_
- ☐ Maintenance: \_\_\_\_\_
- ☐ Compliance: \_\_\_\_\_

## Risk Assessment

- ☐ Risk level: High/Medium/Low
- ☐ Controls in place: \_\_\_\_\_
- ☐ Control effectiveness: \_\_\_\_\_
- ☐ Residual risk: \_\_\_\_\_
- ☐ Action required: \_\_\_\_\_

## Closing Meeting

- ☐ Findings presented
- ☐ Recommendations discussed
- ☐ Questions answered
- ☐ Next steps agreed
- ☐ Timeline established
- ☐ Report delivery date set

## Post-Audit Actions

- ☐ Report drafted %j Date: \_\_\_\_\_
- ☐ Report reviewed %j Date: \_\_\_\_\_
- ☐ Report finalized %j Date: \_\_\_\_\_
- ☐ Report delivered %j Date: \_\_\_\_\_
- ☐ Action plan received %j Date: \_\_\_\_\_
- ☐ Follow-up scheduled %j Date: \_\_\_\_\_

## Audit Conclusion

- ☐ Objectives met: Y/N
- ☐ Overall rating: \_\_\_\_\_
- ☐ Major findings: \_\_\_\_\_
- ☐ Recommendations: \_\_\_\_\_
- ☐ Follow-up required: Y/N
- ☐ Next audit date: \_\_\_\_\_

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