


Document Code	Client Feedback				
ACTS-IMS/03/37					

Assessed organization		Ref#	
Auditor		Audit date (From/To)	

We ask you to evaluate our audit team and our organization.

Please complete this form and send it us by e-mail to info@acts.pk



CUSTOMER SATISFACTION QUESTIONS

Cross the box interesting
NS = not satisfactory S = satisfactory G = good E = excellent

n.	ASPECT	NS	S	G	E	Comments
1	Competence of Lead Auditor					
2	Compliance of audit programme					
3	General behaviour of Auditor					
4	Judgements and corrective actions carried out by Auditor (s)					
5	General opinion about ACTS staff					
6	Behaviour of ACTS administrative staff					
7	Clarity of questions asked by Auditor					
8	Clarity of commercial and technical documentation			X		

Areas for possible improvement

Satisfactory

Prepared and Reviewd by: GM Certification 	Approved by: CEO 
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