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Client Feedback

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

 $\label{eq:cross} Cross \ the \ box \ interesting \\ NS = not \ satisfactory \ S = satisfactory \ G = good \ E = excellent \\$

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					

Areas for possible improvement				
Satisfactory				

Prepared	and	Reviewd	by:
Manager	Cert	ification	

Que y

Approved by:

CEO

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