TESDA-OP-IAS-02-F04

Rev. No.01 - 05/20/2022

**ASSESSMENT AND CERTIFICATION COMPLIANCE AUDIT REPORT**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Assessment Center | : |  | | | | |  | |
| Address | : |  | | | | |  | |
| Accreditation Number | : |  |  | **AUDIT METHOD** | : |  | | |
| Qualification | : |  |  | **OVERALL AUDIT RESULTS** | : | **🞏 COMPLIANT** | | **🞏 NONCOMPLIANT** |

| **Process** | **Area** | **Details of Audit Findings**  (to be accomplished by the Auditor) | **Degree of Criticality** | |
| --- | --- | --- | --- | --- |
| **NC** | **OFI** |
| **Accreditation of Assessment Center** |  | *Requirement:*  *Non-conformity:* |  |  |
|  | *Requirement:*  *Non-conformity:* |  |  |
| **Competency Assessment** |  | *Requirement:*  *Non-conformity:* |  |  |
|  | *Requirement:*  *Non-conformity:* |  |  |
| **Other Observations** |  |  | | |

|  |  |
| --- | --- |
| Prepared by: | Concurred by: |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Name of Lead Auditor | Name of AC Representative (Auditee) |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| Name of Member Auditor | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Designation |
| Name of Member Auditor |  |
| Date: \_\_\_\_\_\_\_\_\_\_\_\_ | Date: \_\_\_\_\_\_\_\_\_\_\_\_ |

**ASSESSMENT AND CERTIFICATION COMPLIANCE AUDIT REPORT**

*INSTRUCTIONS*

1. This Report shall be accomplished by the Lead and Member Auditors and shall be provided to the following within the specified timeline:

|  |  |  |
| --- | --- | --- |
|  | Face-to-face Auditing Method | Remote Audit Method and Blended Audit Method |
| Assessment Center | After the closing meeting but within the day of audit | On the same day of the Closing Meeting |
| PO/DO | Within one (1) working day after the conduct of audit to ACs | Within one (1) working day after receipt of the AC-signed TESDA-OP-IAS-02-F04 *subject to provisions of 7.5.1.b* |

1. This form shall be accomplished as follows:
   1. **Assessment Center –** Name of Assessment Center (AC) audited
   2. **Address –** Address of AC audited
   3. **Accreditation Number –** Accreditation Number of AC qualification audited
   4. **Qualification –** Qualification title audited
   5. **OVERALL AUDIT RESULTS –** Put a check "✓" mark to indicate whether the AC is COMPLIANT[[1]](#footnote-2) and NONCOMPLIANT[[2]](#footnote-3) at the time of audit.
   6. **AUDIT METHOD –** Audit method employed during actual conduct of compliance audit
   7. **AREA** – specify the process area which the audit findings relate to (e.g. Administrative Requirements, Physical Structure-Location, Organize the Conduct of Assessment, Assessment Documentation and Reporting, among others)
   8. **Details of Audit Findings –** detailed description or information of the audit findings in relation to the complete, accurate, concise, and clear record of the audit conducted consistent with the format provided under section 7.4.5.b and 7.4.6.c of this Operating Procedure. Audit findings are lifted from the Assessment and Certification Compliance Audit Checklist (TESDA-OP-IAS-02-F03 or -F03-A) duly accomplished by the lead and member auditors. Indicate “COMPLIANT” to those Process having no nonconformity at the time of audit.
   9. **Degree of Criticality –** Put a check "✓" mark on the applicable row to indicate the criticality[[3]](#footnote-4) of individual audit findings.
   10. **Other Observations –** Details/information of observations noted for which no specific Process/Question has been provided in the Compliance Audit Checklists but are required in other TESDA-issued policies and guidelines.
   11. **Prepared by –** names and signatures of the Lead and Member Auditors who prepare the report and the date it was signed.
   12. **Concurred by –** name and signature of AC auditee who concurs to the content of the report and the date it was signed.
2. The report shall be prepared in two (2) copies to be distributed as follows:

|  |  |  |
| --- | --- | --- |
| *Original* | – | Assessment Center and/or AC Manager |
| *Copy 2* | – | Provincial/District Office concerned, through the Lead Auditor, together with the copies of pieces of evidence gathered and other supporting documents, if any. |

1. Refers to the status of an Assessment Center at the time of audit where ALL assessment requirements and guidelines of TESDA are complied with. [↑](#footnote-ref-2)
2. Refers to the status of an Assessment Center at the time of audit where any one of the assessment requirements and guidelines of TESDA are not complied with. [↑](#footnote-ref-3)
3. NC (Nonconformity) refers to a failure to comply with the requirements while OFI (Opportunity for Improvement) refers to an observed situation which is not nonconformity, but where the results achieved are not optimal, less than well-organized, or over complicated. [↑](#footnote-ref-4)