1. **General Information:**

|  |  |  |
| --- | --- | --- |
| **Name of Certification Body:** |  | **CB Accreditation**  **Number, where applicable:** |
| **Address of Certification Body:** |  | |

|  |  |
| --- | --- |
| **Assessment Team Members:** |  |
| **Name of Technical Expert:** |  |

|  |  |
| --- | --- |
| **Certification Body details:** | |
| **Audit Team:** |  |
| **Auditor witnessed** |  |

|  |  |
| --- | --- |
| **Certified organisation details:** | |
| **Audited Company:** |  |
| **Business Sector:** |  |
| **Number of employees:** |  |

|  |  |
| --- | --- |
| **Type of audit:** Certification audit (Stage 1 or 2) / Recertification audit / Surveillance audit  *(Please delete as appropriate)* | |
| **Date and duration of the audit:** |  |
| **Date and duration of MAURITAS’s witnessing:** |  |

1. **Knowledge of Business Management practices (***Knowledge of general organisation types, size structure and work place practices, documentation systems and information technology)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Satisfactory:** | **Yes:** |  | **No:** |  |

1. **Knowledge of Client’s Business sector** *(Knowledge of the terminology, practices and processes of the client sufficient to understand the sector)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Satisfactory:** | **Yes:** |  | **No:** |  |

1. **Knowledge of Client products, processes and organisation** *(Knowledge related to the types of products or processes of the client sufficient to understand how such an organisation can operate)*
2. **To be filled by Technical Expert for QMS**

*(Auditor demonstrated knowledge of: Terminology and technology specific to the technical area, statutory and regulatory requirements, characteristics of products, services, processes specific to the technical area, infrastructure and environment for operation of processes affecting product and service quality, provision of externally provided processes, products and services)*

1. **To be filled by Technical Expert for FSMS/HACCP**

*(Auditor demonstrated knowledge of: Ability to identify PRP, Food Safety Hazards, Legal Requirements, ability to determine if there are any specific seasonality factors, specific cultural and social customs, specific factors required to audit the FSMS/HACCP, food product, process or service, ability to identify food-borne microbiological hazards, chemical hazards, physical hazards, allergens, food safety labelling requirements, food safety regulations that are relevant to the food chain category, ability to evaluate the organisation’s capacity to identify and meet applicable food safety regulation and labelling requirements)*

1. **To be filled by Technical Expert for ISMS**

*(Auditor demonstrated knowledge of: Information and communication technology specific to the technical area;* *information security technologies and practices specific to the technical area; identification of information security related threats and vulnerabilities and related mitigations; relevant information security controls and* *related legal requirements)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Satisfactory:** | **Yes:** |  | **No:** |  |

1. **Other relevant skills** *(Language skills appropriate to all levels within the client organisation, Note-taking and report-writing skills, Presentation skills, Interviewing Skills)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Satisfactory:** | **Yes:** |  | **No:** |  |

1. **Comments on CB findings in case significant findings not reported or identified by the CB’s audit team, if applicable**
2. **Conclusion regarding coverage of audit (Technical part)**
3. **No. of Non-Conformities raised during Witness Assessment by Technical Expert**

|  |  |
| --- | --- |
| **Major** |  |
| **Minor** |  |

.............. ..........................................................

**Date Signature**