



Auditor Evaluation Form

In the interest of continual improvements, we invite your comments to the following questions:

Auditor Name:			
Company:			
Date Evaluation Completed		Your name:	

	Strongly Disagree	Disagree	Agree	Strongly Agree
1. The auditor was courteous and professional				
2. Any written communication received from the auditor is easily understood, organised and well written				
3. The auditor kept us informed throughout the audit process?				
4. The auditor responds adequately and confidently to questions and within a reasonable timeframe (48 hours)				
5. Recommendations are clearly stated and will provide assistance to our company in bringing improvements to our safety program.				

The auditor provided our company with a written quote and scope of work (yes/no):

Please provide any additional comments on your experience with this auditor:

Any additional comments:

Please submit completed evaluation to info@yukonsafety.com, or to our office at 478 Range Road, Whitehorse, YT, Y1A 3A2

Thank you for taking the time to complete this evaluation.

