	Regulatory Standards Division	Document # QF 205.4	Revision 1
Title:	Internal Audit Feedback Form		Page 1 of 1

Revision History

REV	Description of Change	Author	Effective Date
1	Simplify and clarify terminology	RDB	02/03/06

Audit Date:	Area Audited:

1. Were you notified in advance that there was going to be an audit?	Yes	No	
2. Did you receive an audit plan prior to the audit?	Yes	No	
3. Did an initial meeting take place?	Yes	No	
4. Did the lead auditor keep you informed during the Audit? Comments:	Yes	No	
5. Was an exit meeting held?	Yes	No	
6. Was the *final* audit report issued within 10 working days?	Yes	No	
7. Were the audit team members courteous to the auditees?	Yes	No	Comments:
8. Would you allow these audit team members to return? Comments:	Yes	No	
9. Did the auditors act professionally at all times? Comments: Please rate us from 1 to 5 with 1 being Poor and 5 being Excellent.	1 2 3 4 5		
10. Was this audit of benefit to your branch or line of business? Comments: Please rate us from 1 to 5 with 1 being Poor and 5 being Excellent.	1 2 3 4 5		

Please return completed form to management representative.