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| TESDA-OP-IAS-01-F05  Rev. No. 02 – 02/16/2021 | | | | | | | |
|  | | | | | | | |
| **TVI/COMPANY COMPLIANCE AUDIT REPORT** | | | | | | | |
| **OBJECTIVES OF AUDIT** | | **To determine the continuous compliance of the TVI/Company on the program registration requirements and guidelines** | | | | | |
| **REGION** | |  | | | | | |
| **DISTRICT/PROVINCE** | |  | | | | | |
| **NAME OF TVI/Company** | |  | | | | | |
| **ADDRESS** | |  | | | | | |
| **PROGRAM** | |  | | | | | |
| **DATE REGISTERED** | |  | | | | | |
| **DATE OF AUDIT** | |  | | | | | |
| **AUDIT METHOD** | |  | | | | | |
| **No.** | **List of Equipment/Tools** | | **No. of units required in the TR *(Minimum)*** | **No. of Actual units available and its Condition at the time of audit** | | **No. of lacking units** | **REMARKS** |
| **good** | **defective** |
| **EQUIPMENT** | | | | | | | |
| 1. |  | |  |  |  |  |  |
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| **No.** | **List of Equipment/Tools** | | **No. of units required in the TR *(Minimum)*** | **No. of Actual units available and its Condition at the time of audit** | | **No. of lacking units** | **REMARKS** |
| **good** | **defective** |
| **TOOLS** | | | | | | | |
| 1. |  | |  |  |  |  |  |
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\*use additional sheet/s if necessary.

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| **No.** | **REQUIRED FACILITIES** | | **LIST OF FACILITIES AVAILABLE** | | **REMARKS** | |
| **Space Requirement** | **Total Area in Sq. Meters** | **Space Requirement** | **Total Area in Sq. Meters** |
| 1. |  |  |  |  | **🞏 C 🞏 NC Lacking: \_\_\_\_\_\_\_\_\_** |  |
|  |  |  |  |  | **🞏 C 🞏 NC Lacking: \_\_\_\_\_\_\_\_\_** |  |
|  |  |  |  |  | **🞏 C 🞏 NC Lacking: \_\_\_\_\_\_\_\_\_** |  |
|  |  |  |  |  | **🞏 C 🞏 NC Lacking: \_\_\_\_\_\_\_\_\_** |  |
|  | **Total Workshop Area** |  | **Total Workshop Area** |  |  | |

\*use additional sheet/s if necessary.

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| **OVERALL AUDIT RESULTS: 🞏 COMPLIANT 🞏 NON-COMPLIANT** | | |
|  | | |
| **General Findings:** | | |
| **Area/Process** | **Details of Audit Findings** | |
| Corporate and Administrative Documents |  | |
| Curricular Requirements |  | |
| **Area/Process** | **Details of Audit Findings** | |
| Faculty and Personnel |  | |
| Program Guidelines |  | |
| Support Services |  | |
| Other Requirements |  | |
| Mandatory Assessment and Submission of  MIS 03-02 |  | |
| Program Performance Measures |  | |
| Other Observations |  | |
|  |  | |
| **Prepared by:** | | **Concurred by:** |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *(Signature over Printed Name)* | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *(Signature over Printed Name)* |
| Lead Auditor | | Auditee |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *(Signature over Printed Name)* | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Auditor Member | | Title/Designation |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *(Signature over Printed Name)* | |  |
| Auditor Member | | Date: \_\_\_\_\_\_\_\_\_\_\_\_ |
| Date: \_\_\_\_\_\_\_\_\_\_\_\_ | |  |

**TVI/COMPANY 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:

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|  | Face-to-face Auditing Method | Virtual Auditing Method and Blended Online and Table Auditing Method |
| TVI/Company Head/ Representative | After the closing meeting but within the day of audit | After the closing meeting but within the day of audit |
| PO/DO | Within one (1) working day after the conduct of audit | Within one (1) working day after receipt of the TVI-signed TESDA-OP-IAS-01-F05 |

1. This form shall be accomplished as follows:
   1. **REGION** – Region where the TVI/Company is located/registered
   2. **DISTRICT/PROVINCE** – Name of the province/district where the TVI/Company is located/registered
   3. **NAME OF TVI/Company –** Name of the TVI/Company audited
   4. **ADDRESS –** Address of the TVI/Company audited
   5. **PROGRAM –** Title of program/qualification audited
   6. **DATE REGISTERED –** Date when the program was registered
   7. **DATE OF AUDIT –** Inclusive dates of the actual conduct of audit
   8. **AUDIT METHOD** – Audit method employed during actual conduct of compliance audit
   9. **List of Equipment/Tools** – The list of tools and equipment for the delivery of training as listed and evaluated during program registration application. The number of items could exceed from the recommended list of tools and equipment required in the TR
   10. **No. of units required in the TR (Minimum)** – The minimum number of units in the recommended list of tools and equipment required in the TR
   11. **No. of Actual units available and its Condition at the time of audit** – The actual physical count of units available at the TVI/Company premises and its Condition at the time of audit

* good – Equipment/tools present/counted are serviceable and in working condition
* defective – Equipment/tools present/counted are damaged, malfunction, missing safety guards, attachments that do not connect to the tools securely, etc.
  1. **No. of lacking units –** Number of units lacking during physical count. The difference between the No. of units required in the TR (Minimum) and the No. of Actual units available (sum of good and defective units)
  2. **REMARKS –** Details/information/explanation of observations noted, if any, of the individual equipment/tools/facilities inspected

|  |  |
| --- | --- |
| * 1. **REQUIRED FACILITIES** |  |
| * Space Requirement | The minimum space and area requirements based on the TR (e.g. for the teaching/learning and circulation areas, etc.) |
| * Total Area in Sq. Meters |
|  | *Page 1 of 2* |
| * 1. **LIST OF FACILITIES AVAILABLE** |  |
| * Space Requirement | The actual space and area available at the TVI/Company premises at the time of audit (e.g. for the teaching/learning and circulation areas, etc.) |
| * Total Area in Sq. Meters |

* 1. **🞏 C 🞏 NC Lacking: \_\_\_\_\_\_\_\_** – Put a check "✓" mark on the applicable row to indicate whether the TVI/Company is C and NC[[1]](#footnote-1) on the minimum space and area requirements at the time of audit. If NC, indicate the lacking space and/or area in the space provided
  2. **OVERALL AUDIT RESULTS –** Put a check "✓" mark to indicate whether the TVI/Company is COMPLIANT[[2]](#footnote-2) and NON-COMPLIANT[[3]](#footnote-3) at the time of audit. If the overall audit result is COMPLIANT, indicate “COMPLIANT” for those Area/Process of the Program Registration Requirements.
  3. **Details of Audit Findings –** description or information of the audit findings per Area/Process of the Program Registration Requirements in relation to the complete, accurate, concise, and clear record of the audit conduct consistent with the format provided under section 6.7.2.7 of the Operating Procedure[[4]](#footnote-4). Audit findings are lifted from the Compliance Audit Checklists (TESDA-OP-IAS-01-F04-A, -F04-B, -F04-C or -F04-D) duly accomplished by the lead and member auditors.

**–** Otherwise**,** indicate “COMPLIANT” for those Area/Process of the Program Registration Requirements that are compliant at the time of audit.

* 1. **Other Observations –** Details/information of observations noted for which no specific Process/Question has been provided in the Compliance Audit Checklists.
  2. **Prepared by –** names and signatures of the Lead and Member Auditors who prepares the report and the date it was signed.
  3. **Concurred by –** name and signature of TVI/Company auditees who concurs to the content of the report and the date it was signed.

1. The report shall be prepared in two (2) copies distributed as follows:

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| --- | --- | --- |
| *Original* | – | TVI/Company Head/Representative |
| *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. C = Compliant; NC = Non-Compliant [↑](#footnote-ref-1)
2. Refers to the status of TVI/Company’s Registered Program at the time of audit where ALL program registration requirements and guidelines of TESDA are complied with. [↑](#footnote-ref-2)
3. Refers to the status of TVI/Company’s Registered Program at the time of audit where any one of the program registration requirements and guidelines of TESDA are not complied with. [↑](#footnote-ref-3)
4. Operating Procedure on Compliance Audit – Program Registration (TESDA-OP-IAS-01) [↑](#footnote-ref-4)