| Assurion | CUSTOMER FEED BACK FORM | Doc: Assurion/F/13 |
|---|---|---|
| | | Issue: 01 |
| | | Rev.: 00 |
| | | Date: 15/03/2026 |

We thank you for providing the opportunity to audit your management system. Your feedback is most important for us for improving our certification process further. Kindly provide your feedback as per the following:

| **ORGANISATION NAME** | _____ |
|---|---|

| **Type of Audit** | **Stage 1** | ☐ | **Stage 2** | ☐ | **Surveillance** | ☐ | **Re-Certification** | ☐ | **Special** | ☐ |
|---|---|---|---|---|---|---|---|---|---|---|
| **Date** | _____ | | | | | | | | | |
| **Audit Team** | **Team Leader** | _____ | | | **Team Member(s)** | _____ | | | | |
| **Audit Standard(s)** | ISO 27001 | ☐ | ISO 42001 | ☐ | | | | | | |

| **Section** | **Description** | **SA** | **A** | **N** | **D** | **SD** | **Point** |
|---|---|---|---|---|---|---|---|
| Audit Preparation | 1. The audit Plan was sent sufficiently in advance | ☐ | ☐ | ☐ | ☐ | ☐ | **SA (5):** Strongly Agree |
| | 2. The audit team was well prepared for the audit. | ☐ | ☐ | ☐ | ☐ | ☐ | **A (4):** Agree |
| Punctuality | 3. The audit was carried out as per the programme. | ☐ | ☐ | ☐ | ☐ | ☐ | |
| Audit | 4. The opening and closing meeting was carried out professionally. | ☐ | ☐ | ☐ | ☐ | ☐ | **N (3):** Neutral |
| | 5. The questions the audit team asked are relevant and easy to understand. | ☐ | ☐ | ☐ | ☐ | ☐ | |
| | 6. The audit team gave you enough explanation for your questions. | ☐ | ☐ | ☐ | ☐ | ☐ | **D (2):** Disagree |
| | 7. The audit team was fair and impartial. | ☐ | ☐ | ☐ | ☐ | ☐ | |
| Ethics | 8. The audit team concentrated his/her attention on the audit. | ☐ | ☐ | ☐ | ☐ | ☐ | **SD (1):** Strongly Disagree |
| | 9. The audit team didn't make any unreasonable demand. | ☐ | ☐ | ☐ | ☐ | ☐ | |
| Effectiveness | 10. Issues found at the audit were helpful and valuable for improving your management system. | ☐ | ☐ | ☐ | ☐ | ☐ | |

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| | | | | | |
|---|---|---|---|---|---|
| Others | Do you want this audit team to assess your management system next time? | YES | ☐ | NO | ☐ |
| | Any Suggestions? | _____ | | | |

| Details provided By | Position | Date | Signature |
|---|---|---|---|
| _____ | _____ | _____ | |

| Evaluation Result | Excellent (90% or over) | Good (75 to 89%) | Average (60 to 74%) | Unsatisfactory (less than 60%) |
|---|---|---|---|---|
| | ☐ | ☐ | ☐ | ☐ |

**Reviewed by**

**(CEO)**
(Signature) _____

**Comment:** _____