Period of Validity ………………………………..

Clauses to focus on ……………………………………………………….………………………………………

*(based on importance of the processes, areas to be audited and results of previous internal audit)*

| **Requirements of ISO/IEC****17011:2017** | **Months of the year** |
| --- | --- |
| **Jul** | **Aug**  | **Sep**  | **Oct**  | **Nov**  | **Dec**  | **Jan**  | **Feb**  | **Mar**  | **Apr**  | **May**  | **Jun**  |
| **4** | **General Requirements** |  |  |  |  |  |  |  |  |  |  |  |  |
| 4.1 | Legal entity |  |  |  |  |  |  |  |  |  |  |  |  |
| 4.2 | Accreditation agreement |  |  |  |  |  |  |  |  |  |  |  |  |
| 4.3  | Use of accreditation symbols and other claims of accreditation  |  |  |  |  |  |  |  |  |  |  |  |  |
| 4.4 | Impartiality requirements |  |  |  |  |  |  |  |  |  |  |  |  |
| 4.5 | Financing and liability  |  |  |  |  |  |  |  |  |  |  |  |  |
| 4.6 | Establishing accreditation schemes |  |  |  |  |  |  |  |  |  |  |  |  |
| **5** | **Structural Requirements**  |  |  |  |  |  |  |  |  |  |  |  |  |
| **6** | **Resource Requirements** |  |  |  |  |  |  |  |  |  |  |  |  |
| 6.1 | Competence of personnel |  |  |  |  |  |  |  |  |  |  |  |  |
| 6.2 | Personnel involved in the accreditation process |  |  |  |  |  |  |  |  |  |  |  |  |
| 6.3 | Personnel records |  |  |  |  |  |  |  |  |  |  |  |  |
| 6.4 | Outsourcing |  |  |  |  |  |  |  |  |  |  |  |  |
|  | Relevant IAF documents |  |  |  |  |  |  |  |  |  |  |  |  |
| **7** | **Process** **Requirements** |  |  |  |  |  |  |  |  |  |  |  |  |
| 7.1 | Accreditation requirements |  |  |  |  |  |  |  |  |  |  |  |  |
| 7.2 | Application for accreditation |  |  |  |  |  |  |  |  |  |  |  |  |
| 7.3 | Resource review |  |  |  |  |  |  |  |  |  |  |  |  |
| 7.4 | Preparation for assessment |  |  |  |  |  |  |  |  |  |  |  |  |
| 7.5 | Review of documented information |  |  |  |  |  |  |  |  |  |  |  |  |
| 7.6 | Assessment |  |  |  |  |  |  |  |  |  |  |  |  |
| 7.7  | Accreditation decision-making |  |  |  |  |  |  |  |  |  |  |  |  |
| 7.8 | Accreditation information |  |  |  |  |  |  |  |  |  |  |  |  |
| 7.9 | Accreditation cycle |  |  |  |  |  |  |  |  |  |  |  |  |
| 7.10 | Extending accreditation |  |  |  |  |  |  |  |  |  |  |  |  |
| 7.11 | Suspending withdrawing or reducing accreditation |  |  |  |  |  |  |  |  |  |  |  |  |
| 7.12 | Complaints |  |  |  |  |  |  |  |  |  |  |  |  |
| 7.13 | Appeals |  |  |  |  |  |  |  |  |  |  |  |  |
| 7.14 | Records on CABs |  |  |  |  |  |  |  |  |  |  |  |  |
|  | Relevant ILAC, IAF, AFRAC documents |  |  |  |  |  |  |  |  |  |  |  |  |
| **8** | **Information requirements** |  |  |  |  |  |  |  |  |  |  |  |  |
| 8.1 | Confidential information |  |  |  |  |  |  |  |  |  |  |  |  |
| 8.2 | Publicly available information |  |  |  |  |  |  |  |  |  |  |  |  |
| **9** | **Management systems requirements** |  |  |  |  |  |  |  |  |  |  |  |  |
| 9.1 | General |  |  |  |  |  |  |  |  |  |  |  |  |
| 9.2  | Management system |  |  |  |  |  |  |  |  |  |  |  |  |
| 9.3 | Document control |  |  |  |  |  |  |  |  |  |  |  |  |
| 9.4 | Records control |  |  |  |  |  |  |  |  |  |  |  |  |
| 9.5 | Nonconformities and corrective actions |  |  |  |  |  |  |  |  |  |  |  |  |
| 9.6 | Improvement |  |  |  |  |  |  |  |  |  |  |  |  |
| 9.7 | Internal audits |  |  |  |  |  |  |  |  |  |  |  |  |
| 9.8 | Management reviews |  |  |  |  |  |  |  |  |  |  |  |  |
| F2.25 | Internal Audit for on-site activities |  |  |  |  |  |  |  |  |  |  |  |  |

|  |  |
| --- | --- |
|  | **Internal audit planned** |
|  | **Internal audit carried out** |
|  | **Corrective action taken for non-conformity raised** |
|  | **Implemented corrective action verified**  |

**Applicable documents**

1. ISO/IEC 17011:2017: Conformity assessment – Requirements for accreditation bodies accrediting conformity assessment bodies
2. IAF/ILAC A2: 01/2018 IAF/ILAC MRAs: Requirements and Procedures for Evaluation of a Single Accreditation Body
3. IAF/ILAC-A1/A2: Addendum 01/2021 - IAF/ILAC Approach to Remote Peer Evaluations of Regions and Single Accreditation Bodies during the COVID-19 Pandemic

**Internal Audit Team for *(insert year)***

|  |  |  |  |
| --- | --- | --- | --- |
| **Internal Auditor** | **Auditee** | **Clause of ISO/IEC 17011** | **Period** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

……………………………………………. ……………………………………… Prepared Approved

 Quality Manager Director, MAURITAS

……………………………………………. …………………………………………

 Date Date