DOCUMENTED INFORMATION

(DOCUMENTS AND RECORDS – TEMPLATES)

ISO 9001:2015

Documented Information

(Documents and Records – Templates ISO 9001:2015)

Preface:

An organization can benefit fully from the implementation of ISO 9001:2015, only if it is understood, implemented and internal auditing done by its own personnel.

Keeping this in mind, in the interest of the client organizations, the templates are given for the minimum documentation requirements to satisfy the standard.

It may be noted that:

- ***There are only four documents which are mandatorily required to be maintained as per the standard. These are:***
  - ***The scope of the quality management system (Cl. 4.3)***
  - ***The quality policy (Cl. 5.2)***
  - ***Quality objectives (Cl. 6.2):***
  - ***The characteristics of the products to be produced, the services to be provided or activities to be performed and Results to be achieved (Cl. 8.5.1 (a))***

- ***Additionally, the standard requires the organization to maintain documented information necessary to support the operation of processes(Cl. 4.4.2)***

- ***Quality manual, for example is not a requirement. Again, Procedures on Document control, Internal auditing, Corrective action, Preventive action and Control of nonconforming products, which were mandatory in the earlier version viz. ISO 9001:2008, are not a requirement in ISO 9001:2015.***
  Any additional documents prepared will be at the organization's discretion. However all the documents, if maintained by an organization, shall be controlled as per clause 7.5 of the standard.

- ***There are 21 documented information required to be retained (records).***

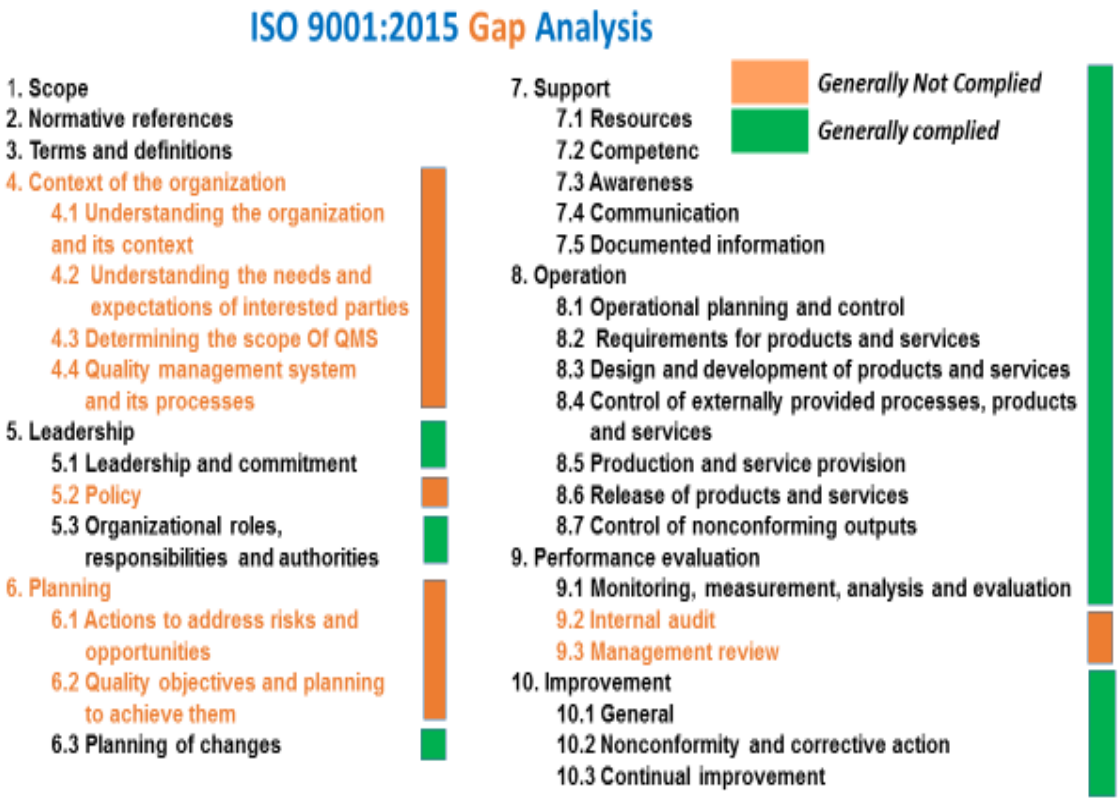
- ***No detailed risk analysis or any formal risk assessment methods like SWOT, FMEA, ISO 31001, are necessary. However, the organization may adapt any formal risk assessment methods, as their discretion.***

Documented Information AGSI Illustrative samples

(Documents and Records – Templates ISO 9001:2015)

INTRODUCTION

The Standard has seven requirements (clauses 4 to 10), which need to be complied.
The requirements are listed below:



You may observe that, most organizations already have a well-established system.
They can conduct a gap-analysis of existing arrangements vis-à-vis the standard's requirements. A typical gap-analysis outcome is illustrated above.

It is observed that requirements marked green are complied with in most organizations.

Only those marked red viz. "Context of the organization, Quality policy, Risks and opportunities, Quality objectives, Internal audits and Management reviews" are not formally covered.

Hence an organization may focus on the requirements not covered.

Further an organization to start with, need concentrate on the requirements relevant to them. For example, an organization not responsible for design and development of product or service may initially ignore clause 8.3; or an organization may not have any property belonging to customer or external providers (Ref. clause 8.5.3); a trading organization may not have any testing equipment to be calibrated.

Documented Information AGSI Illustrative samples

(Documents and Records – Templates ISO 9001:2015)

Contents: **Page**

<< Company name>>		
Iss.: 00 Rev.:00	**COMPANY PROFILE**	**Reviewed by:**
Date: dd-mm-yy		**Approved by:**

Company name:		
Address:		
Tel. nos.		
Email:		
Website:		
Key personnel: (Name and contact numbers)	Director:	
	Works Manager:	
	….	
	….	
Products:		
Major customers:		
Scope:		

<< Company name>>		
Iss.: 00 Rev.:00	**Relevant External and Internal Issues**	Reviewed by:
Date: dd-mm-yy	**Document no.: 01** *(Ref. Clause 4.1)*	Approved by:

(Illustrative example)

Issue	External/Internal	+ve/-ve	Type
Unskilled workers	Internal	-ve	Performance/ Capabilities
Dependency on import of raw materials	External	-ve	Economic
Competition	External	-ve	Market
Highly regulated industry	External	-ve	Legal
Committed top management	Internal	+ve	Organizational structure
Modern automated machinery	Internal	+ve	Capabilities/ Resources
Availability of resources such as water, electricity	External	+ve	Local
High demand for the product	External	+ve	Market

<< Company name>>		
Iss.: 00 Rev.:00	**Needs and Expectations of Interested Parties**	**Reviewed by:**
Date: dd-mm-yy	**Document no.: 02** *(Ref. clause 4.2)*	**Approved by:**

(Illustrative example)

Relevant Interested Parties	Needs and Expectations
Customer	Product/ service conformity, price, availability or delivery
End users or beneficiaries	Quality, price, delivery, safety, after sales service
External providers/ suppliers	Contracts which have been entered into with them
Statutory and regulatory authorities	Licenses, Consents, Trademarks, etc.; Orders issued by regulatory agencies;
Trade and professional associations	Treaties, conventions and protocols; voluntary principles or codes of practice;
Local community groups & NGOs	Agreements with community groups or non-governmental organizations; environmental commitments
Trade Unions	Working environment, Salary, Employer-employee relations

<< Company name>>		
Iss.: 00 Rev.:00	Scope of the quality management system	Reviewed by:
Date: dd-mm-yy	Document no.: 03 *(Ref. clause 4.3)*	Approved by:

(Illustrative example)

Manufacture & Supply of Precision Gears & Gear Boxes.

Exclusion:

Clause 8.3 Design of the product is not applicable.

Justification:

The product is manufactured as per the specifications and drawings given by the customer.

Note: *Scope is a mandatory document (clause 4.3)*

<< Company name>>		
Iss.: 00 Rev.:00	**Process flow-chart**	**Reviewed by:**
Date: dd-mm-yy	**Document no.: 04** ***(Ref. clause 4.4)***	**Approved by:**

<< Please attach the process flow-chart>>

<< Company name>>		
Iss.: 00 Rev.:00	List of documented procedures	Reviewed by:
Date: dd-mm-yy	Document no.: 05 *(Ref. clause 4.4)*	Approved by:

LIST OF DOCUMENTED PROCEDURES

Procedure no.	Title	Applicable clauses

Documented Information

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<< Company name>>		
Iss.: 00 Rev.:00	**List of formats and records**	**Reviewed by:**
Date: dd-mm-yy	**Document no.: 06** *(Ref. clause 4.4)*	**Approved by:**

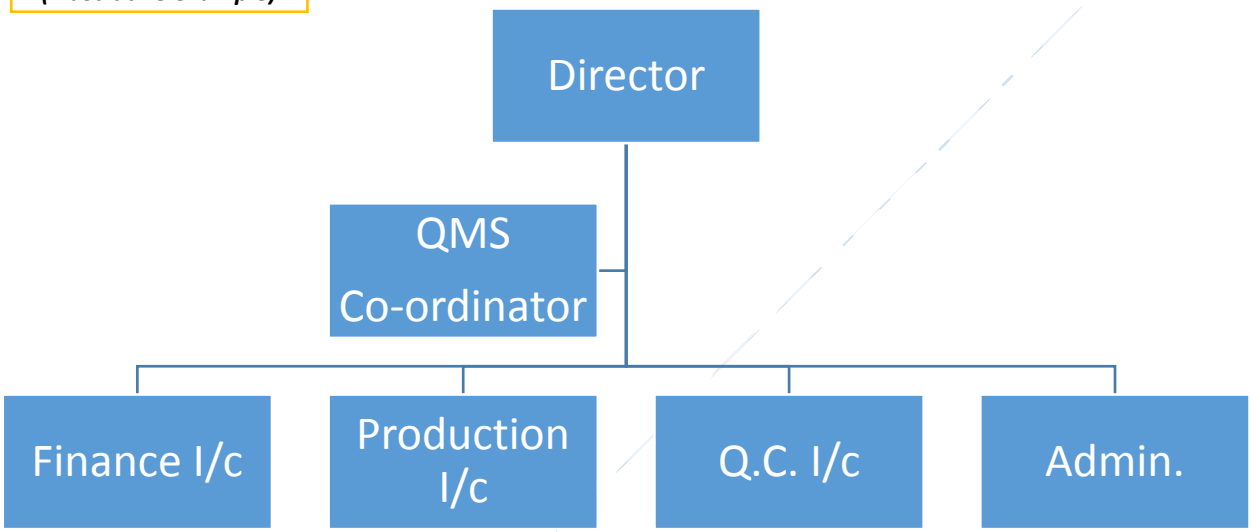
LIST OF FORMATS/ RECORDS

Sr. no.	Format no.	Clauses applicable	Title
01	**F – 01**	7.1.5.1	**List of Measuring Equipment and Calibration Status** *(Evidence of fitness for purpose of monitoring and measuring resources)*
02	*	7.1.5.2	Evidence of the basis used for calibration of the monitoring and measurement resources (when no international or national standards exist)
03	**F – 02**	7.2	**Education, Experience and Training Records of the Employees** *(Evidence of competence of person(s) doing work under the control of the organization that affects the performance and effectiveness of the QMS)*
04	**F – 03**	7.2	**Employees' Training Needs Matrix**
05	**F – 04**	7.2	**Employee Training Records**
06	*	8.2.3	Results of the review and new requirements for the products and services
07	*	8.3.2	Records needed to demonstrate that design and development requirements have been met
08	*	8.3.3	Records on design and development inputs
09	*	8.3.4	Records of the activities of design and development controls
10	*	8.3.5	Records of design and development outputs
11	*	8.3.6	Design and development changes, including the results of the review and the authorization of the changes and necessary actions
12	**F – 05**	8.4.1	**Supplier Selection/ Initial Evaluation**
13	**F – 06**	8.4.1	**Supplier Re-evaluation**
14	**F – 07**	8.4.1	**Approved Supplier List**
15	*	8.5.2	Evidence of the unique identification of the outputs when traceability is a requirement
16	**F – 08**	8.5.3	**Property belonging to customers or external providers – lost, damaged or otherwise found unsuitable for use** *(Records of property of the customer or external provider that is lost, damaged or otherwise found to be unsuitable for use and of its communication to the owner)*
17	**F – 09**	8.5.6	**Control of changes *(which affect the conformity to requirements)*** Results of the review of changes for production or service provision, the persons authorizing the change, and necessary actions taken
18	**F – 10**	8.6	**Product Release Approval** *(Records of the authorized release of products and services for delivery to the customer including acceptance criteria and traceability to the authorizing person(s))*
19	**F – 11**	8.7	**Nonconforming outputs** *(Records of nonconformities, the actions taken, concessions obtained and the identification of the authority deciding the action in respect of the nonconformity)*
20	**F – 12**	9.1.2	**Customer Feedback**
21	**F – 13**	9.1.2	**Customer Complaint Register**
22	**F – 14**	9.1.2 9.1.1	**Customer Complaint Record** ***(****Results of the evaluation of the performance and the effectiveness of the QMS)*
23	**F – 15**	9.2.2	**Internal audit plan**
24	**F – 16**	9.2.2	**Internal Audit intimation**
25	**F – 17**	9.2.2	**Internal Audit Schedule**
26	**F – 18**	9.2.2	**Internal Audit Report** *(Evidence of the implementation of the audit programme and the audit results)*
27	**F – 19**	9.3.3	**Management Review meeting – Intimation and Agenda**
28	**F – 20**	9.3.3	**Management Review meeting – Minutes** *(Evidence of the results of management reviews)*
28	**F – 21**	10.2.2	Evidence of the nature of the nonconformities and any subsequent actions taken
30	**F – 22**	10.2.2	Results of any corrective action

*** Organization to develop formats/ records as appropriate.**

<< Company name>>		
Iss.: 00 Rev.:00	Organization Chart & Responsibilities and authorities	Reviewed by:
Date: dd-mm-yy	Document no.: 07 *(Ref. clause 5.1)*	Approved by:

(Illustrative example)



<< The chart may be further extended>>
< <Organizational Roles, Responsibilities and Authorities of individual positions may be described >>

Responsibilities and authorities

Sr. no.	Designation	Responsibilities	Authorities	Remarks, if any
01	Director			
02	Finance I/c			
03	Production I/c			
04	Q.C. i/c			
05	Admin. I/c			
06	Production Supervisor			
07	Purchase I/c			
..	..			
..	..			

<< Company name>>		
Iss.: 00 Rev.:00	Quality policy	Reviewed by:
Date: dd-mm-yy	Document no.: 08 *(Ref. clause 5.2)*	Approved by:

Illustrative example

Quality Policy

The << Company name >>, manufacturing << products names e.g. electronic consumer products >>, is committed to achieve total customer satisfaction by providing the best quality of products meeting or exceeding customer expectations through complying with all applicable requirements and continual improvement of quality management system with respect to the context of the organization and its strategic direction.

_____ _____

(Director) **Date**

***Note:* Quality Policy is a mandatory document (clause 5.2)**

<< Company name>>		
Iss.: 00 Rev.:00	**Risks and Opportunities**	**Reviewed by:**
Date: dd-mm-yy	**Document no.: 09** *(Ref. clause 6.1)*	**Approved by:**

Illustrative example

ISSUES/ REQUIREMENTS/ PROCESSES	RISK	OPPORTUNITY	ACTION
Unskilled workers *(-ve)*	• Less productivity • Adverse effect on quality	• Training • Employ skilled labour	
Dependency on imports for raw materials *(-ve)*	• Price fluctuation (based on exchange rates)	• Find indigeous substitutes	
Poor market for the products / High competition *(-ve)*	• Low sales • Less profitability	• Increase and or give better training to marketing staff • Establish branch offices	
Old machinery/ manual controls *(-ve)*	• Adverse effect on productivity and product quality	• Replace with modern automated machines	
Required process parameters not attained *(-ve)*	• Adverse effect on product quality	• Improve preventive maintenance • Replace with better machinery/equipment	

Documented Information

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<< Company name>>		
Iss.: 00 Rev.:00	**Quality objectives**	**Reviewed by:**
Date: dd-mm-yy	**Document no.: 10** *(Ref. clause 6.2)*	**Approved by:**

Illustrative example

Quality Objectives for the year 01.04.2020 to 31.12.2020

Quality Objective	Present Value	Responsibility	Target Date	How results are evaluated?
Reduce waste by 5 %	3 %	Production I/c.	31.12.2020	Monthly waste generation data
Increase sales turnover by 10%	5.2 Cr	Sales Director	31.12.2020	Annual sales data
Increase the percentage of buses that will run to the scheduled timetable by 5%	90 %	Transport I/c.	30.12.2020	Monthly review data
….				
….				
….				
…				

Note:

- *"Quality Objectives" is a mandatory document (clause 6.2)*
- **Organization shall establish Quality objectives at relevant functions, levels and processes needed for the quality management system.**

Documented Information

(Documents and Records – Templates ISO 9001:2015)

< Company name>>		
Iss.: 00 Rev.:00	**List of Measuring Equipment and Calibration Status**	**Reviewed by:**
Date: dd-mm-yy	**Format no.: F-01** *(Ref.: clause 7.1.5.1)*	**Approved by:**

Illustrative example

As on (date): _____

Sr. no.	Unique identity no.	Description	Calibrated on:	Next calibration due on:	Current Status
01	Ver./01	Vernier caliper	20.02.2020	20.02.2021	Valid
02	Ver./02	Vernier caliper			
03	Mic./01	Micrometer			
04	Bal./01	Electronic balance			
05	Bal./02	Electronic balance			
06	Hyg./01	Hygrometer			
07	Ten./01	Tensile strength testing equipment			
08	….	….			
09	….	….			
10	….	….			
..					
..					
..					
..					
..					

Note:

- ***The calibrations were conducted by external NABL accredited laboratory. All the records are separately available.***
- ***This is a mandatory record (clause 7.5)***
  (Organization shall retain appropriate Documented Information as evidence of fitness of purpose of monitoring and measurement resources.)

<< Company name>>		
Iss.: 00 Rev.:00	**Employee competency matrix**	Reviewed by:
Date: dd-mm-yy	**Document no.: 11** *(Ref.: clause 7.2)*	Approved by:

Illustrative example

Sr. no.	Designation	Qualification	Experience (Minimum) /Training
01	Director	..	..
02	Finance manager	Post graduate in commerce/ MBA (Finance)	1 year in similar function
03	H.R. manager	Graduate in any discipline	1 year in HR function
04	Admin. Manager	Graduate in any discipline	1 year in HR function
05	Production manager	Diploma in Engineering	1 year in production function of similar organization
06	Q.C. manager	Degree in Science or Diploma in eng.	1 year in production function of similar organization
07	Production supervisor	..	..
08	M/c operator	..	..
09	Chemist	..	..
10	….	..	
11	….		
12	….		
..	….		
..	….		
..	….		
..	….		

<< Company name>>		
Iss.: 00 Rev.:00	**Education, Experience and Training Records of the Employees**	**Reviewed by:**
Date: dd-mm-yy	**Format no.: F-02** *(Ref.: clause 7.2)*	**Approved by:**

Illustrative example

Sr. no.	Emp. No.	Name	Designation	Dt. of joining	Qualification	Total Exp. (Yrs.)	Training	Any gap from the required criteria? Action to fulfil the criteria (state any additional training requirement)
01	S 001	Vivek	Plant Mgr.	01.01.2019	B.E. (Mech.)	15	• On-job training • ISO LA	Competent
02	S 002	Prasad	Purch. Mgr.	01.01.2020	B.Com.	Nil	• Nil	Need to be given on-the-job training for 6 months before assigning the job
03							•	
04							•	
05							•	
06							•	

<< Company name>>		
Iss.: 00 Rev.:00	**Employees' Training Needs Matrix**	Reviewed by:
Date: dd-mm-yy	**Format no.: F-03** *(Ref.: clause 7.2)*	Approved by:

Illustrative example

Training calendar for the period January 2020 to December 2020

Sr. no.	Training	Faculty proposed	Duration	Target participants	Month planned	Status
01	ISO Awareness	External	4 Hours	All employees	June	
02	ISO 9001:2015 internal auditor Training	External	2 Days	Selected persons from Production, QC, Purchase, Marketing & Admin	June	
03	Welding techniques	External/ Production I/c	1 Day	Production supervisors & operators	July	
04	First-aid	External	4 Hrs.	All employees	August	
05	..	..	..	..	..	
06	..	..	..	..	..	
..						
..						
..						
..						
..						
..						
..						
..						

<< Company name>>		
Iss.: 00 Rev.:00	**Employee Training Records**	**Reviewed by:**
Date: dd-mm-yy	**Format no.: F-04** *(Ref.: clause 7.2)*	**Approved by:**

Illustrative example

Training subject: _____ Faculty: _____

Date: _____ Time: _____

Sr. no.	Name	Dept.	Emp. No.	Signature	Validated by	Remarks

<< Company name>>		
Iss.: 00 Rev.:00	**Supplier Selection/ Initial Evaluation**	**Reviewed by:**
Date: dd-mm-yy	**Format no.: F-05** *(Ref.: clause 8.4)*	**Approved by:**

Illustrative example

Supplier data	**Supplier name:**	
	Address:	
	Contact person(s):	
	Contact nos.:	
	Products / Services:	
	Manufacturing/ service capability:	
	Major customers:	

Evaluation by company	**Company requirements of products/ services:**		
	Supplier capability to supply:		
	Feedback from supplier's customers (if any):		
	Any samples tested? Results?		
	Any visits to supplier site/ premises made? What is the feedback?		
	Conclusion:	**□ Approved □ Rejected**	**Remarks:**

Reviewed by: _____ **Authorized by: _____**

Date: _____ **Date: _____**

<< Company name>>		
Iss.: 00 Rev.:00	**Supplier Re-evaluation**	**Reviewed by:**
Date: dd-mm-yy	**Format no.: F-06** *(Ref.: clause 8.4)*	**Approved by:**

Illustrative example

Supplier performance evaluation for the period: 01.04.20.. to 31.03.20..

Supplier data	**Supplier name:**	
	Address:	
	Contact person(s):	
	Contact nos.:	
	Products / Services:	
	Manufacturing/ service capability:	

Parameter	No. batches/ Qty. Received or No. of times services availed (A)	Satisfactory (B)	Unsatisfactory (C)	% Satisfactory (D) = (B)x 100/(A)	Remarks
Quality					
On-time					
Price					

Average % = _____

Remarks: Supplier can be continued/ discontinued/ any other action as per management decision

<< Company name>>		
Iss.: 00 Rev.:00	**Approved Supplier List**	Reviewed by:
Date: dd-mm-yy	Format no.: F-07 *(Ref.: clause 8.4)*	Approved by:

Illustrative example

Sr. no.	Supplier name	Products/ Services	Last Evaluated on (Date)	Next Evaluation Due on (Date)

Documented Information

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<< Company name>>		
Iss.: 00 Rev.:00	**Product Specifications**	**Reviewed by:**
Date: dd-mm-yy	**Document no.: 12** *(Ref.: clause 8.5.1)*	**Approved by:**

Illustrative example

Product: Sulphuric acid

Sr. no.	Parameter	Value	Tolerance
01	H_2SO_4	96%	+/- 0.5%
02	Ash content	< 50 ppm	-
03	Appearance	Clear	-
04	Fe	< 25 ppm	-
05	Cr	< 1.5 ppm	-
--	--	--	-

Authorized Signature: _____ Date: _____

- ***This is a mandatory document (clause 8.5.1)***
  (The availability of documented information that defines:
  1) the characteristics of the products to be produced, services to be provided, or the activities to be performed;
  2) the results to be achieved.)

<< Company name>>		
Iss.: 00 Rev.:00	**Property belonging to customers or external providers – lost, damaged or otherwise found unsuitable for use**	**Reviewed by:**
Date: dd-mm-yy	**Format no.: F-08** *(Ref.: clause 8.5.3)*	**Approved by:**

Illustrative example

Sr. no.	Customers'/ external provider	Property lost, damaged or otherwise found unsuitable for action	Evidence of reporting this to the customer or external provider
01			
02			

- ***This is a mandatory document (clause 8.5.3)***
  (When the property of a customer or external provider is lost, damaged or otherwise found to be unsuitable for use, the organization shall report this to the customer or external provider and retain documented information on what has occurred)
- ***Note: A customer's or external provider's property can include:***
  - ***Materials***
  - ***Components***
  - ***Tools and equipment***
  - ***Premises***
  - ***Intellectual data, and***
  - ***Personal data***

<< Company name>>		
Iss.: 00 Rev.:00	**Control of changes** *(which affect the conformity to requirements)*	**Reviewed by:**
Date: dd-mm-yy	**Format no.: F-09** *(Ref.: clause 8.5.6)*	**Approved by:**

Illustrative example

Type of the change:	□Documentation □Process □Specification □Machinery □Any other (specify)
Description of the proposed change:	
Reason for the change:	□External provider (e.g. Delivery delays, quality issues, etc.) □Internal issues (e.g. critical equipment failure, recurring nonconforming products, etc.) □External issues (e.g. new or modified customer or statutory and regulatory requirements) □Any other (specify)
Proposed controls:	
Review of the proposed changes and controls:	
Actions arising from the review:	
Changes authorized by:	
Documented information retained:	□Minutes of the review activities □Verification and validation results □Any other (please specify)

<< Company name>>		
Iss.: 00 Rev.:00	**Product Release Approval**	**Reviewed by:**
Date: dd-mm-yy	**Format no.: F-10** *(Ref.: clause 8.6)*	**Approved by:**

Illustrative example

Product: Sulphuric acid

Bx. No.: _____ Date of production: _____

TEST RESULTS

	Specification		Actual	Remarks
	Parameter	Value		
01	H_2SO_4	96%+/- 0.5%	96.25	o.k.
02	Ash content	< 50 ppm	60 ppm	Higher
03	Appearance	Clear	Clear	o.k.
04	Fe	< 25 ppm	5 ppm	o.k.
05	Cr	< 1.5 ppm	0.5 ppm	o.k.
..	..	..	..	..
..	..	..	..	..

Q.C. I/c. _____ Date: _____

☐ **Accepted**

☐ **Accepted under concession**

☐ **Rejected**

Remarks, if any: _____

_____

Authorized Signature: _____ Date: _____

<< Company name>>		
Iss.: 00 Rev.:00	**Nonconforming outputs**	**Reviewed by:**
Date: dd-mm-yy	**Format no.: F-11** *(Ref.: clause 8.7)*	**Approved by:**

Illustrative example

Sr. no.	Date	Nonconforming output & description of the nonconformity	Actions taken to correct nonconformity • Correction (repairs/ re-work) • Segregation, containment, return or suspension) • Informing customer • Recalls • Authorization under concession • Any other	Authorized by	Further action (e.g. when a nonconformity is corrected after it is detected, it should be verified)	Remarks

<< Company name>>		
Iss.: 00 Rev.:00	**Customer Feedback**	**Reviewed by:**
Date: dd-mm-yy	**Format no.: F-12** *(Ref.: clause 9.1.2)*	**Approved by:**

Illustrative example

Dear customer

We request you to spare a few minutes of your valuable time and send us your feedback as per the format below. We always endeavor to deliver to you best of our products and service. This will help us to further improve the quality of our product and the service we render to you.

Please tick (√) the appropriate boxes in the below columns:

Rating->	Excellent …… Poor					Remarks
	5	4	3	2	1	
Product quality						
Were the products delivered in time as agreed?						
Were our staff polite during all communications?						
Were all the information required regarding our products given to you satisfactorily?						
Product packaging						
Price						
…..						

Any suggestions from you to further improve our product and service quality:

_____

_____

Name and signature: _____ Date: _____

Company name: _____

<< Company name>>		
Iss.: 00 Rev.:00	**Customer Complaint Register**	**Reviewed by:**
Date: dd-mm-yy	**Format no.: F-13** ***(Ref.: clause 9.1.2)***	**Approved by:**

Sr. no.	Complaint No.	Date	Name of complainant	Complaint in brief	Date response sent/ complaint attended	Date Complaint closed	Remarks

<< Company name>>		
Iss.: 00 Rev.:00	Customer Complaint Record	Reviewed by:
Date: dd-mm-yy	Format no.: F-14 *(Ref.: clause 9.1.2)*	Approved by:

Complaint No.: _____ **Date:_____**

Complainant: **(Name, address, Contact person, Tel. no., email)**	
Document Ref	
Description of problem/complaint	
Root cause:	
Correction:	
Corrective Action/Response	
CA Verified by (with date)	
CA Approved by(with date)	
Complaint closed on	

Entered by: _____ **Date: _____**

<< Company name>>		
Iss.: 00 Rev.:00	**Internal audit plan**	**Reviewed by:**
Date: dd-mm-yy	**Format no.: F-15** *(Ref.: clause 9.2)*	**Approved by:**

Year: January 20.. to December 20..

Frequency: Once in a year

Month -> Dept./ Function ↓	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Top management												
QMS coordinator												
H.R.												
Purchase												
Marketing												
Design & development												
Production												
Q.C.												
Stores												
Despatch												
…												
…												

<< Company name>>		
Iss.: 00 Rev.:00	**Internal audit intimation**	**Reviewed by:**
Date: dd-mm-yy	**Format no.: F-16** *(Ref.: clause 9.2)*	**Approved by:**

To:
Mr. ……. (Director)
Mr. ……. (Works Manager)
Mr. ……. (……)
……
……..

Dear All,

Sub.: Schedule of ISO 9001:2015 internal audit

The Internal audit of our organization is scheduled on …….
The details of the date, time, department, auditors and auditees are as given in the attached audit schedule.

Please confirm your presence for the audit.

……..
(QMS coordinator)

Attached: Internal audit schedule

<< Company name>>		
Iss.: 00 Rev.:00	Internal audit schedule	Reviewed by:
Date: dd-mm-yy	Format no.: F-17 *(Ref.: clause 9.2)*	Approved by:

Standard: ISO 9001: 2015 **Internal Audit no.: _____**

Dates of audit: __ , ___ , April 20..

Date	Time	Department/ Function	Auditee	Auditors
.. Apr. (Day 1)	10.00 to 11.00	Top Management	..	Auditor A & B
	11.00 to 12.00	QMS coordinator	..	..
	12.00 to 13.00	H.R	..	Auditor A
	12.00 to 13.00	Sales & Marketing	..	Auditor B
.. Apr (Day 2)	10.00 to 13.00	Production	..	Auditor A
	15.00 to 17.00	Q.C	..	..
	10.00 to 12.00	Stores	..	Auditor B
	15.00 to 17.00	Despatch	..	..

Prepared by: _____ **Approved by: _____**

Date: _____ **Date: _____**

<< Company name>>		
Iss.: 00 Rev.:00	Internal audit report	Reviewed by:
Date: dd-mm-yy	Format no.: F-18 *(Ref.: clause 9.2)*	Approved by:

The internal audit of our organization was carried out as scheduled on …….
The findings are summarized below.
The findings are classified as improvement points (I) or non-conformances (NC), as necessary. Appropriate corrective actions plans and the target dates for the completion are required to be prepared by the respective departmental heads.

Sr. no.	Department	Persons audited	Auditor/s	Findings	NC/I
01	Top management	..	..	..	..
..	..	..	..	..	..
..	..	..	..	..	..
..	..	..	..	..	..
07		Mr. AKW (Purchase mgr.) Mr. BV (Purchase asst.)	ABK	Clauses: 8.4 Supplier selection/ evaluation/ re-evaluation criteria, Approved suppliers' list were available, controlled and could be readily accessed. The following P.O.s were verified. 1. P.O. no. A….05 dated …… for materials ..xx.. from supplier M/s. …M 2. P.O. no. B.. 08 dated ….. for materials ..yy.. from supplier M/s. …N Both the P.O.s contained all the required information such as product description, specifications, qty., delivery time, packaging and transport requirements, etc. Both the suppliers were listed in the approved suppliers' list. Their selection/ evaluation/ re-evaluation records were verified and were found complied with the approved criteria. Materials of P.O. no. A….05 were found to be received as per the delivery requirements specified. These were checked/ tested by the Q.C. personnel and found to be complied. Records available.	Nil
..	..	..	..	..	..

Prepared by: _____ **Approved by: _____**

Date: _____ **Date: _____**

<< Company name>>		
Iss.: 00 Rev.:00	Management Review meeting – Intimation and Agenda	Reviewed by:
Date: dd-mm-yy	Format no.: F-19 *(Ref.: clause 9.3)*	Approved by:

To:
Mr. ……. (Director)
Mr. ……. (Works Manager)
Mr. ……. (……)
……
…….

Dear All,

Sub.: Management Review Meeting – Intimation and Agenda

The Management Review meeting of our organization is scheduled on ……..……
The details of the date, time and venue are as under:
Date: _____ Time: _____ Venue:_____

AGENDA

1. **The status of actions from previous management reviews**
2. **Changes in external and internal issues that are relevant to quality management system**
3. **Customer satisfaction and feedback from relevant interested parties**
4. **The extent to which quality objectives have been met**
5. **Process performance and conformity of products and services**
6. **Nonconformities and corrective actions**
7. **Monitoring and measurement results**
8. **Audit results**
9. **The performance of external providers**
10. **The adequacy of resources**
11. **The effectiveness of actions taken to address risks and opportunities**
12. **Opportunities for improvement**

Please confirm your presence for the audit.

…….
(QMS coordinator)

<< Company name>>		
Iss.: 00 Rev.:00	**Minutes of Management Review Meeting**	**Reviewed by:**
Date: dd-mm-yy	**Format no.: F-20** ***(Ref.: clause 9.3)***	**Approved by:**

Minutes of the Management Review Meeting

Attendees:

Mr. ……. (Director)
Mr. ……. (Works Manager)
Mr. ……. (……) - *Absent*
……
…….

Agenda Points	Discussion	Actions	Responsibility & Target Date
1. The status of actions from previous management reviews			
2. Changes in external and internal issues that are relevant to quality management system			
3. Customer satisfaction and feedback from relevant interested parties			
4. The extent to which quality objectives have been met			
5. Process performance and conformity of products and services			
6. Nonconformities and corrective action			
7. Monitoring and measurement results			
8. Audit results			
9. The performance of external providers			
10. The effectiveness of actions taken to address risks and opportunities			

Output of the meeting:

Agenda point	Discussion	Action/Responsibility/ Target date
Adequacy of resources		
Any changes in qms required?		
Opportunities for improvement		

Prepared by: _____ **Approved by: _____**
Date: _____ **Date: _____**

<< Company name>>		
Iss.: 00 Rev.:00	**Nonconformity and corrective action report (NC CAR)**	**Reviewed by:**
Date: dd-mm-yy	**Format no.: F-21** *(Ref.: clause 10.2)*	**Approved by:**

Dept./ Area	NC. No.	Date	Standard	Clause no.
			ISO 9001:2015	

Details of nonconformity:

Auditor Raising the NC		Person(s) Responsible for implementing the CA		Target Date
Name	**Signature**	**Name**	**Signature**	

Root cause:

Correction:

Corrective action plan:

Corrective action plan accepted	Corrective action implementation/ effectiveness verified & NC closed
(Auditor) (Date)	**(Auditor) (Date)**

Your feedback on niranjanr47@gmail.com