

Corrective Action Recommendations Format

Audit Report

Audit Title:

Audit Date:

Department/Area Audited:

Report Number:

Prepared By:

Date Prepared:

Summary of Findings

Briefly describe the main audit findings that require corrective action.

Corrective Action Recommendations Table

#	Finding	Recommended Corrective Action	Person Responsible	Target Completion Date	Status
1	[Describe the issue or non-conformity]	[Proposed corrective action]	[Name/Position]	[MM/DD/YYYY]	[Open/Closed/In Progress]
2	[Describe the issue or non-conformity]	[Proposed corrective action]	[Name/Position]	[MM/DD/YYYY]	[Open/Closed/In Progress]

Follow-up and Verification

State how and when the implementation of corrective actions will be verified (e.g., by review, re-audit, documentation).

Important Notes

- This document serves as an official record for tracking the implementation and closure of audit findings.
- All corrective actions should be specific, measurable, achievable, relevant, and time-bound (SMART).
- Updates to the status of corrective actions should be documented promptly.
- Verification of completed actions must be performed to ensure effectiveness before closure.
- Maintain confidentiality of sensitive findings and responsible personnel details.