



AUDITOR EVALUATION WORKSHEET (June 2017 Edition)

Completion Instructions

Use the following guidance to complete the Auditor Evaluation Worksheet (see Appendix 1).

- 1. Auditor Name – Enter the full name of the auditor being evaluated.
2. Evaluator Name – Enter the full name of the evaluator.
3. Applicant Name – Enter the business name of the auditee, as it appears on the agreement or audit report.
4. Audit Service – Enter the name of audit service (e.g., GAP&GHP, Harmonized GAP, QTV, PSA, Tomato Audit Protocol, etc.).
5. Auditor’s Role – Check the role that the auditor took on this audit.
6. Audit End Date – Enter the last date of the audit activity.
7. Evaluation Type – If the evaluator was onsite with the auditor, check Witness. If the audit was an offsite review of an audit that was already completed and the evaluator is reviewing the report and other supporting documents (e.g., Service Request, FV-651), check Desk.
8. Service Type – Check the appropriate box for the audit service that was provided, following this guide:

Table with 2 columns: Audit Service and Action. Row 1: For DOV, GAP & GHP, IP, PSA, QTV, Sprout, Unprocessed Pilot, or USAID | Check "Process". Row 2: For Almond PEC or GroupGAP QMS | Check "System".

- 9. Service Location – Enter the full address of the audit site, as it appears on the audit report.
10. Scope of Audit – Enter all scopes that were included in the audit (e.g., Part 1 Farm Review and Part 4 Storage & Transportation (USDA GAP&GHP), Post-Harvest Operations with Global Markets Addendum (Harmonized), Canned Addendum (PSA)).

11. **Pages 2 and 3 Evaluation Worksheet – Element Criteria** – For Sections I through VII, fill in the sub-numbers with “A,” “N,” “U,” or “N/A,” for Acceptable, Needs Improvement, Unacceptable, or Not Applicable, respectively, as appropriate for each of the individual items.
12. **Comments** – If entering “A” for Acceptable, you may add a comment below the rating if you wish to offer more detail regarding that rating, but it is not mandatory. When entering “N” for Needs Improvement, “U” for Unacceptable, or “N/A” for Not Applicable, you **must** enter a comment justifying the rating. The comment spaces are expandable to allow for any needed comments for each criteria.
13. **Preliminary Rating** – For sections I through VII, enter the letter rating (“A,” “N,” “U,” or “N/A”) based on what was entered for the Element Criteria of each section on the subsequent pages. The Preliminary Rating should be equal to the lowest rating provided in the applicable section of the Element Criteria evaluation. For example, if you rated all four elements of section I as “A,” then the Preliminary Rating for section I should be “A.” If you rated one of the elements in section II as “U,” one of the elements as “N,” and two as “A,” then the Preliminary Rating for section II should be “U.”
14. **Overall Rating** – Indicate the Overall Rating by inserting the appropriate statement from the Overall Rating list provided in the blue box, just above.
15. **Justification Summary** – Provide written justification for the Overall Rating as well as any general comments about the auditor/audit.

Note: The auditor evaluation will not be considered complete and final unless this written justification is provided.
16. **Auditor Signature** – The auditor must sign here, either handwritten or electronically.
17. **Date** – The date of the auditor’s signature (not required if signed electronically).
18. **Evaluator Signature** – The evaluator must sign here, either handwritten or electronically.
19. **Date** – The date of the evaluator’s signature (not required if signed electronically).

APPENDIX I - AUDITOR EVALUATION WORKSHEET

[Electronic Version of the Auditor Evaluation Worksheet](#)



**SPECIALTY CROPS INSPECTION DIVISION
AUDITOR EVALUATION WORKSHEET**

Send completed worksheet to Auditor, Auditor's Supervisor, and FVAudits@ams.usda.gov (Federal Auditors) or the appropriate Federal Program Manager (Fed-State Auditors)		
AUDITOR NAME: Click here to enter text. 1	AUDITOR'S ROLE: <input type="checkbox"/> Auditor 5 <input type="checkbox"/> Team Leader <input type="checkbox"/> Team Member	AUDIT END DATE: Click here to enter a date. 6
EVALUATOR NAME: Click here to enter text. 2	EVALUATION TYPE: <input type="checkbox"/> Desk 7 <input type="checkbox"/> Witness	SERVICE TYPE : <input type="checkbox"/> Process 8 <input type="checkbox"/> System
APPLICANT NAME: Click here to enter text. 3	SERVICE LOCATION: Click here to enter text. 9	
AUDIT SERVICE: Click here to enter text. 4	SCOPE OF AUDIT (INCLUDE ELEMENTS AUDITED): Click here to enter text. 10	

Preliminary Rating: Determine a Preliminary Rating for each element, providing written justification for each rating. Use the Element Criteria evaluation on the subsequent pages to determine the Preliminary Rating. The rating levels consist of:
 "A" – Acceptable
 "N" – Needs Improvement
 "U" – Unacceptable, and
 "NA" – Not Applicable.

RATING ELEMENTS	PRELIMINARY RATING:
I. SUBJECT KNOWLEDGE	Choose an item.
II. PLANNING AND PREPARATION	Choose an item.
III. DOCUMENT ADEQUACY REVIEW	Choose an item.
IV. ONSITE ASSESSMENT	Choose 13 item.
V. PREPARING AND DISTRIBUTING AUDIT REPORT	Choose an item.
VI. FOLLOW-UP ACTIVITIES	Choose an item.
VII. PROFESSIONALISM	Choose an item.

Overall Rating: Indicate the Overall Rating with the appropriate classification, listed below. Provide written justification for the rating.

Acceptable = All Elements are either rated "Acceptable" or "Needs Improvement". Any element rated "Needs Improvement", in the opinion of the evaluator, does not compromise the integrity of the audit program.
Unacceptable = At least one element is rated "Unacceptable" or numerous elements are rated "Needs Improvement", and thereby, in the opinion of the evaluator, compromise the integrity of the audit program when considered in their totality.

OVERALL RATING: <input type="text" value="14"/>		JUSTIFICATION SUMMARY: <input type="text" value="15"/>	
Choose an item.		Click here to enter text.	
AUDITOR SIGNATURE (ELECTRONIC SIGNATURE PERMISSIBLE) <input type="text" value="16"/>		DATE Click here to enter a date. <input type="text" value="17"/>	
EVALUATOR SIGNATURE (ELECTRONIC SIGNATURE PERMISSIBLE) <input type="text" value="18"/>		DATE Click here to enter a date. <input type="text" value="19"/>	

AUDITOR NAME: <input type="text" value="Click here to enter text."/>	<input type="text" value="1"/>	AUDIT END DATE: <input type="text" value="Click here to enter a date."/>	<input type="text" value="2"/>			
AMS Auditor Evaluation Worksheet – Element Criteria			A*	N*	U*	N/A*
I. Subject Knowledge						
1. Understand and apply specific requirements of the AMS audit or accreditation program being audited.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Understand, apply, and reference documents (<i>guidance, instructions, policies, procedures</i>) applicable to the AMS.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Perform audit activities in accordance with audit principles, policies and procedures applicable to the specific program.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Understand and is familiar with the industry being audited (<i>usage, common practices, equipment, and tools</i>).		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
COMMENTS:						
Click here to enter text.		<input type="text" value="12"/>				
II. Planning and Preparation						
1. Appoint the audit team leader, select audit team, and assign work, as applicable.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Identify resources required for the audit.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Determine feasibility of audit and make cost effective travel arrangements.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Establish initial contract and arrange for the audit with the auditee.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Prepare an accurate and complete audit plan and other necessary documents.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
COMMENTS:						
Click here to enter text.		<input type="text" value="12"/>				
III. Document Adequacy Review						
1. Review documents accurately and efficiently.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Complete within the agreed time schedule.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
COMMENTS:						
Click here to enter text.		<input type="text" value="12"/>				
IV. Onsite Assessment						
1. Conducted a well-organized opening meeting.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
a. Introduce team.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Restate purpose and scope of audit.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Identify auditee representative and communication channels.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

AUDITOR NAME:	Click here to enter text.	AUDIT END DATE:	Click here to enter a date.			
AMS Auditor Evaluation Worksheet – Element Criteria		A*	N*	U*	N/A*	
d.	Inform auditee that they will be kept aware of audit progress.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e.	Confirm that needed resources and facilities are available.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
f.	Explain the conditions under which the audit will be terminated.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
g.	Explain that audit findings and associated information is releasable under FOIA.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
h.	Explain the audit appeal process.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2.	Understand and clearly identify audit team roles, responsibilities and timeframes. Facilitate an effective and efficient audit.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3.	Controlled the audit effectively: lead the audit team in communications with the auditee, reach audit conclusions and prevent and resolve conflicts.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4.	Communicated (both orally and in writing) in a clear, concise and understandable manner. Vocabulary, tone and style were adapted to the individual or group to whom they were addressing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5.	Resolve any disputes diplomatically, tactfully and quickly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6.	Observe and be actively aware of physical surroundings and activities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.	Review records and verify audit evidence.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8.	Ask open-ended questions to effectively acquire information.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9.	Follow auditee company's policies and safety procedures at all times.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10.	Collect and verify information pertaining to the audit. (or coordinated the collection and verification of information).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11.	Based audit findings on verifiable evidence available within the scope of the audit. Contribute to audit findings (team member).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12.	Decisively and accurately classified audit findings based on the severity, frequency of occurrence, and risks associated with the findings.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13.	Inform auditee representative of audit findings, as they are noted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14.	Conduct a well-organized closing meeting that:					
a.	Present the audit findings and conclusions in a manner that is clear and understandable to the auditee.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b.	Provide the auditee an opportunity to ask questions on any audit findings.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c.	Reiterate observations that require further guidance and consideration from AMS.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d.	Explain the audit appeal process.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e.	Encourage the auditee to provide feedback on the quality of service received from AMS.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
COMMENTS:						
Click here to enter text.		12				
V. Preparing and Distributing the Audit Report						
1.	Audit documentation, checklist and audit notes are accurate, complete, neat, and provide sufficient information to prepare the report.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2.	Prepares an audit report that:					
a.	Objectively and accurately document the results of the audit.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b.	Is checked for spelling, and grammatically correct.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	11	
c.	Is submitted within established timeframes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d.	Is distributed to the appropriate persons.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

AUDITOR NAME:	Click here to enter text.	AUDIT END DATE:	Click here to enter a date.		
AMS Auditor Evaluation Worksheet – Element Criteria		A*	N*	U*	N/A*
3. Audit documentation is properly filed, stored, or disposed.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
COMMENTS:					
Click here to enter text.		12			
VI. Follow-up Activities					
1. Assess corrective actions according to program requirements within established timeframes.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Submitted audit charges and travel vouchers, as appropriate.		<input type="checkbox"/>	11		<input type="checkbox"/>
COMMENTS:					
Click here to enter text.		12			
VII. Professionalism					
1. Acted professionally with the highest degree of ethical conduct (<i>honesty, integrity and impartiality</i>).		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Maintain confidentiality and security of information learned during the audit.		<input type="checkbox"/>	11		<input type="checkbox"/>
COMMENTS:					
Click here to enter text.		12			

*Element Criteria Rating Guidance:
Acceptable (A) means that performance in this area is generally effective and practices are consistently demonstrated at an acceptable level. The employee maintains an adequate scope of personal and professional qualities and performs additional responsibilities as assigned.
Needs Improvement (N) means that performance in this area meets <i>minimum requirements but needs improvement</i> because practices are not consistently demonstrated at an acceptable level.
Unacceptable (U) means that performance in this area is ineffective and requires improvement to attain a minimum level of competency.
Not Applicable (N/A) means that performance in this area was not observed and cannot be rated.

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