gapiii containment cERTIFICATION

AUDIT attendance sheet

Organization :

Audit start date:

Audit end date:

Attendance for:

|  |  |  |  |
| --- | --- | --- | --- |
| [ ]  | Opening meeting | Venue: |  |
| [ ]  | Audit session | Venue: |  | Element: |  |
| [ ]  | Closing meeting | Venue: |  |

| **No.** | **Name** | **Department** | **Job title/function** | **Signature** |
| --- | --- | --- | --- | --- |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| 5 |  |  |  |  |
| 6 |  |  |  |  |
| 7 |  |  |  |  |
| 8 |  |  |  |  |
| 9 |  |  |  |  |
| 10 |  |  |  |  |
| 11 |  |  |  |  |
| 12 |  |  |  |  |
| 13 |  |  |  |  |
| 14 |  |  |  |  |
| 16 |  |  |  |  |
| 17 |  |  |  |  |
| 18 |  |  |  |  |
| 19 |  |  |  |  |
| 20 |  |  |  |  |