

## WENATCHEE SCHOOL DISTRICT #246 - INTERNAL AUDIT REPORT

Department Audited:	Date of the Audit:
Procedures Audited:	Auditor(s):
Objective of the Audit:	
Personnel Contacted During the Audit:	
Were there any nonconformances found during the audit? <input type="checkbox"/> No <input type="checkbox"/> Yes, If yes, describe	
C/A Report Numbers Issued to this Area: <input type="checkbox"/> N/A	
Over-All Summary of the Audit Results:	
Opportunities for Improvement, Observations or Concerns:	
Audit Report prepared by: _____ Date: _____	
Management Review Date: _____ Signed: _____	
Comments (optional):	