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| **Proceso- Auditado** | | | **Ciudad** | | **Informe No.** | | |
| **Nombre** | **Código** | **Líder Responsable** | **Fecha del Informe** | **Año** | | **Mes** | **Día** |
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| 1. **INFORMACION GENERAL** | | | | | | | | | | | | | |
| **AUDITORÍA NO.** |  | | **Fecha de Inicio** | **Año** | **Mes** | | **Día** | **Fecha de Cierre** | | **Año** | **Mes** | | **Día** |
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| **Auditor Líder** | |  | | | | | | | | | | | |
| **Grupo Auditor** | |  | | | | | | | | | | | |
| **Auditados** | | **Nombre** | | | | **Cargo** | | | **Proceso-Subproceso** | | | **Código** | |
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| 1. **GENERALIDADES DE LA AUDITORIA INTERNA** | |
| **Objetivo** |  |
| **Alcance** |  |
| **Recursos Requeridos** |  |
| **Identificación de los Criterios de la Auditoría** | |
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| 1. **RESULTADO DE LA AUDITORIA** | | | | | |
| **3.1 RESULTADO DETALLADO (hallazgos relevantes)** | | | | | |
| **No.** | **Hallazgo** | **Requisito de la Norma** | **Tipo de Hallazgo** | | |
| **NO CONFORMIDAD** | | **Observación** |
| **Mayor** | **Menor** |
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| **3.2 FORTALEZAS (aspectos por mantener)** | **3.3 DEBILIDADES (aspectos por mejorar)** |
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| 1. **CONCLUSIONES** |
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| 1. **ANEXOS** |
| **1.Plan de Auditoria**  **2.Acta de Apertura y cierre de la auditoria**  **3. Lista de Verificación**  **4. Plan de acción** |

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| **Auditor Líder** | |
| Nombre | Firma |

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| **ADMINISTRACION DEL SGC** | | | | | | | |
| **Recibido en SGC** | | | | **Aprobado por SGC** | | | |
| **Administración de Calidad** | **Fecha** | | | **Representante de la Dirección** | **Fecha** | | |
| **Año** | **Mes** | **Día** | **Año** | **Mes** | **Día** |
| Firma |  |  |  | Firma |  |  |  |