

Organization Name: ABC
Format No-

Standard: FSSC 22000

Schedule for the company-wide Internal Audit No-----

Date----- Fm: MR To: -----

Kindly note that your department/ function will be audited as per the following schedule and you are requested to extent cooperation to the auditors.

Date of Audit ----- Audit **Criteria:** Based on FSMS manual/Quality system procedures/work Instructions & ISO 22000:2018 and FSSC 22000 additional requirements

Date	Time	Audit Scope	Auditor (s)	Auditee(s)	ISO22000/FSSC 22000 Clause

Prepared by:

Dated signature of MR