DOE LABORATORY ACCREDITATION PROGRAM ASSESSMENT QUESTIONNAIRE

Laboratory Name _____

Assessment Date _____

Please provide DOELAP with your evaluation of the assessment process by rating the following process areas. For any question rated Poor or Fair, please comment below. Please suggest improvements for the DOELAP.

		Poor	***Fair***	***Good***	***Very Good***	***Excellent***
1.	Your control over the assessment scheduling	○	○	○	○	○
2.	The findings were factual and reflected deviation from requirements	○	○	○	○	○
3.	Relevance of the assessment findings (are statements of fact significant to improving the quality of your process?)	○	○	○	○	○
4.	Rate how well the findings enabled you to identify appropriate corrective actions	○	○	○	○	○
5.	Clarity of the assessment report	○	○	○	○	○
6.	Helpfulness of DOELAP personnel in the assessment process	○	○	○	○	○
7.	Overall effectiveness of the assessment (was this time well spent?)	○	○	○	○	○

8. Enter Comments in the table below if needed

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Please return this questionnaire to DOELAP at beanlc@id.doe.gov. Thank you for your valuable feedback.