TUSKEGEE UNIVERSITY

UNIVERSITY AUDIT

University Audit Request Question

Purpose — *This questionnaire is used to gather information on areas of concern which would support in scoping the audit request objective.*

Requestor Details

- Name of Requestor
- Date
- Title Position
- Department
- Contact Information   Phone   Email

Audit Request Details

Which department or area is being audited?

What is the primary objective or purpose of the audit? *(Select all that apply)*

- Compliance with laws and regulations

- Financial accuracy

- Process efficiency

- Safeguarding of assets

- Operational effectiveness

- Fraud prevention or detection

- Other, please specify

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DOO WKDW DSSO\

3ROLFLHV DQG SURFHGXUHV PDQXDOV

)LQDQFLDO UHFRUGV

(PSOR\HH UHFRUGV

2WKHU SOHDVH VSHFLI\

$GGLWLRQDO ,QIRUPDWLRQ

,V WKHUH DQ\ RWKHU LQIRUPDWLRQ \RX FXOG HRXOG EWLR Q SURK\DLY HV
SUHSDUDWLRQ IRU D VDPSOH DXGLW GRW LFLUHHVSURF HGX DQ FLDO V
V\VWHP DFFHVV ORJV

'R \RX KDYH DQ\ SUHIHUURJ HWKHV DXGHLQ LGQ'VSOHEDVHFRQSGHXFFLWV\HL
WKHUH DUH DQH XURJHQRWQGHGSODWLRQV

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