

**Vermont Office of Professional Regulation
Audit Report**

This report is due in the Office by the 15th of every month or beginning of quarter, reporting on the licensee's performance for the previous month or quarter. Please include detail sufficient for review and evaluation of the areas of concern delineated in the Order. Specifically note adherence to standards of practice for the profession.

Licensee Name/Credential:	Case Number:
Auditor/Supervisor Name/Credential:	Auditor/Supervisor Job Title:
Auditor/Supervisor Telephone:	Auditor/Supervisor E-mail:
Auditor/Supervisor Business Name:	Auditor/Supervisor Address:

This report reflects performance during Month: ____ Quarter: ____ Year: ____

Date audit conducted: _____

Indicate dates and amount of time of meetings with the licensee:

Describe the licensee's duties and responsibilities:

In the past month or quarter, did the licensee consistently complete these activities according to policy and standards of practice for the profession? Yes No If no, explain in the section below.

Comments and explanations for all concerns (may attach separate page):

Describe any improvements in the licensee's practice since the last audit:

Additional comments, questions, or problems:

Signature of Supervisor:

Date:

Thank you for your commitment to this licensee and to the protection of the public. The licensee's Order specifies whether these reports are due monthly or quarterly. The report is due on the 15th of the month following the month/quarter being reported.

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Attention: Carla Preston or Kristin Donnelly

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