



U.S. COAST GUARD



Homeland Security

**NATIONAL MARITIME CENTER
COURSE OVERSIGHT AUDIT PROGRAM
PRE-AUDIT CHECKLIST**

Date: _____

Audit # _____

Auditing Office:	
Name of Organization:	

PLEASE FILL-IN OR UNDERLINE THE APPROPRIATE RESPONSE

Questions	Yes	No	NA	Comments
1. Verify Training Site address and phone #:				
a. Primary or Alternate Site Approval Address:				
b. Phone number:				
c. Email address:				
d. Did your address change? (If yes provide changes)				
e. Have you changed or added training locations? (If yes name the new locations).				
2. Website:				
a. Do you have a website?				
b. If yes provide the name and address of your website?				
c. Do you have an On-line Course?				
3. Course Approval				
a. Provide a list of CG approved expired courses?				
b. What is the date of last Course Renewal?				
c. What modifications/changes have you made since your last approval? List the changes?				
d. Provide your equipment list from your course of your framework? Compare school list with Approved Framework				
e. Provide your exam policy and procedure page from your course approval framework. Verify policy and procedure is being followed.				
f. Have you purchased new training aides or equipment since your last NMC approval/renewal?				
g. Will there be courses in session during your scheduled audit? – (if yes what courses)?				

Note: This is a voluntary Pre-Audit Checklist. To expedite the audit process and avoid longer interruptions in your operations, please return this Pre-Audit Checklist within 5-days of the date above.