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| **School name:** | | | **Urgent 1**  **Necessary 2**  **Desirable 3** |
| **Audit completed by:** | | |
| **Date of audit:** | | |
| **Review date:** | | |
| **Area and Aspect** | **Satisfactory?**  **Yes (Y), No (N)**  **Not applicable (N/A)** | **Comments or Recommendations** | **Priority Designation** |
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