Supplier Corrective Action Request

CAR Number		**Inventory Number**	
Date Defined		**Part Number**	
Status		**Operation No**	
Defined by		**Customer**	Valcor Engineering Corporation
Nonconformance		**Supplier**	
Serial No		**P.O No**	
Department		**Workcenter**	
Standard			

1. Problem Description

What, Where, and When? Include evidence observed.

2. Team Members

Establish a team of people with product/process knowledge.

Responsible: **Date Completed:** / / **Status:**

3. Containment Actions / Reinspection Findings

Define and execute actions to isolate discrepant and/or potentially discrepant materials/parts until corrections have been implemented and verified.

Define the action(s) taken to eliminate the existing situation at each manufacturing phase (ex. Shipped, Raw Material, Finished Goods, WIP, etc.).

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4. Root Cause(s)

Determine and verify what caused the defect to be produced. Support with evidence by using root cause analysis (Recommended Tools: 8D, 5 Whys, Fishbone, Flowchart, etc.)

Responsible: **Date Completed:** / / **Status:**

5. Select / Verify Corrective Actions

Describe all planned and completed actions which address the root cause and prevent recurrence of the non-conformance.

Approvals - Supplier

Signature confirms accuracy of, and commitment to the corrective action.

Management Signature: _____ **Date: _____**

Printed Name:

Title:

Note: If Supplier, then forward to Valcor.

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6. Implement Corrective Actions

Provide objective evidence (photos, training records, work instructions, ECOs, and etc.) to verify that all findings have been addressed.

Responsible: **Date Completed:** / / **Status:**

7. Verification

Determine and provide objective evidence that a change has occurred and that the product and process achieved desired results.

Responsible: **Date Completed:** / / **Status:**

8. Congratulate Team

Preventative Actions: Determine and implement actions to prevent the recurrence of this root cause and all similar problems.

Responsible: **Date Completed:** / / **Status:**

Approvals - For Valcor QA use only

Acceptance of Corrective Action:

☐ **Acceptable** ☐ **Not Acceptable for reasons noted below, resubmit a corrective action by: _____**

Notes:

Follow up Audit is required? ☐ **Yes** ☐ **No**

Attach audit results of Corrective Action and Closeout, if required.

Nuclear Items only: Is evaluation for 10CFR21 per S2110 required? ☐ **Yes** ☐ **No**

Management Signature: _____ **Date: _____**