

# Corrective Action Request

CAR#: _____
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To initiate a CAR, complete section A and return to the Quality Assurance Unit.

## Section A.

Originator: \_\_\_\_\_

Date: \_\_\_\_\_

*State the nature of problem (or nonconformance or potential problem)*

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## Section B.

The QA Officer will assign a unique CAR# (upper right of this form) and record it in the master log. The QA Officer will designate a person responsible to investigate the root cause of the problem and identify an appropriate response date. The QA Officer will sign and date this section.

Person responsible for investigating problem: \_\_\_\_\_

Response required by: \_\_\_\_\_ [1 week from date of issue if easily corrected]  
\_\_\_\_\_ [1 month from date of issue if more involved]

QA Officer/Manager: \_\_\_\_\_

Date: \_\_\_\_\_

## Section C.

The person responsible for investigating the problem will complete section C. This will (1) identify what caused the problem, and (2) detail a plan of action. This person will then sign-off, date, and re-submit this form to the Quality Assurance Unit.

*Root cause?*

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*Plan of Action:*

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Sign-off: \_\_\_\_\_

Date: \_\_\_\_\_

**Section D.**

If Plan of Action pertains to the Quality System, the QA Officer will approve the plan and take action. If Plan of Action pertains to operations, the plan is forwarded to the Technical Manager for approval. The Technical Manager will approve the plan or decide on an alternative arrangement. If necessary, the Technical Manager will identify a person to take action on the above plan.

Comments/Suggestions:

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Person responsible for action: \_\_\_\_\_

Target completion date: \_\_\_\_\_ [1 week from section C date if easily corrected]  
\_\_\_\_\_ [1 month from section C date if more involved]

Technical Manager / QA Officer: \_\_\_\_\_ Date: \_\_\_\_\_

**Section E.**

The person responsible for action will complete section E. This person will then sign-off, date, and re-submit this form to the Quality Assurance Unit.

*Action Taken:*

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Sign-off: \_\_\_\_\_ Date: \_\_\_\_\_

**Section F.**

This section is completed by the originator, the auditor, or Technical Manager.

*Follow-up Action*

1. Did action correct the problem? \_\_\_\_\_
2. Was action taken a temporary or permanent action? \_\_\_\_\_
3. Was action completed on time? \_\_\_\_\_

Comments/Suggestions:

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Originator/Auditor/Unit Manager: \_\_\_\_\_ Date: \_\_\_\_\_