

[organization name]

## Appendix 1 – Corrective/Preventive Action Request

Record ID:			
Reason for creation of Corrective/Preventive Action:			
Description of nonconformity:			
Process in which nonconformity was discovered:		Person who spotted a nonconformity:	
		[name]	[signature]
Process in which nonconformity occurred:		Is nonconformity repeated? (Yes/No)	
Team for analyzing nonconformities and enforcing action:	Enforcing deadline:	Responsible for enforcing action:	Approved by:
1. [name], team leader 2. [name], team member 3. [name], team member			[name]
Cause of nonconformity:			
Nonconformity status:			
No influence on: a) Business performance			
b) Safety, environment and/or customer satisfaction			
Corrective actions:			
Corrective actions affect other parts of the system:			
Report about implemented actions:		Report date:	Report made by:
			[name]
Report on evidence of implemented actions:			

**Commented [AES1]:** If the organization uses electronic

**Commented [AES2]:** E.g., internal audit, external audit,

**Commented [AES3]:** Detailed description of nonconformity,

**Commented [AES4]:** Nonconformity doesn't necessarily be

**Commented [AES5]:** If Yes, then also write the name of the process.

**Commented [AES6]:** In this section explain whether the

**Commented [AES7]:** Delete unnecessary parts.

**Commented [AES8]:** If there is more than one corrective

**Commented [AES9]:** If Yes, then also write in the name of the

**Commented [AES10]:** Write in whether the corrective action's

**Commented [AES11]:** Report about intervention, bills, photos, etc.

[organization name]

Verification of implemented actions for effectiveness	Date	Responsible person
<input type="checkbox"/> Cause of nonconformity completely removed <small>☐ Cause of nonconformity completely removed ☐ Cause of nonconformity not removed ☐ Cause of nonconformity not removed</small>		
Corrective/ preventive action does not have an adverse effect (Yes/No)		

**Commented [AES12]:** Person responsible for monitoring and

**Commented [AES13]:** Choose the one that applies.

[job title]

[name]

\_\_\_\_\_

[signature]

**Commented [AES14]:** Only necessary if the Procedure for Document and Record Control prescribes that paper documents must be signed.