

### Corrective Action Form

Corrective action no. ____		
Description of nonconformity:		
<b>Nonconformity identified on:</b>	Name of the person who identified the nonconformity	Signature
<b>Cause of nonconformity:</b>		
If similar nonconformity already exists, refer here to its Corrective Action No.:		
Is it necessary to take corrective action? YES – NO (circle)		
Corrective action to be implemented:		
<b>Who must be informed about implemented action:</b>		
Approved by	Implementation deadline	Person responsible for implementation
Corrective action implemented on:		Signature
Effectiveness of the implemented action reviewed on:		Signature
If changes to the documentation are necessary, specify them here:		Signature

**Comment [DK1]:** Forms need not be signed if they are used in electronic form