|  |  |
| --- | --- |
| **Source:** | **Scope:** |
| [ ]  Audit Finding | [ ]  Risk Assessment | [ ]  ISO MS 9001:2015 |
| [ ]  Others: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | [ ]  Product or Service |
|  | [ ]  Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Details of Non-conformity:** |
| Requestor : |  |
| Designation : |  |
| Description/Finding : |  |
|  |
|  |
| Request Date: |  | Acknowleged by (Admin of Department / School): |  |
| **Correction (Immediate Action):** |
| Target Completion Date: |  |
| **Corrective Action Plan (Action to Prevent Recurring Issue):** |
|  |
| Target Completion Date: |  |
| **Identification & Investigation of Root Cause:** |
|  |
| Completion Date: |  | Action to be taken by: |  |
| **Action Taken:** |
|  |
| Agreed by: |  | Date of Verification: |  | Verified by: |  |
| **Follow-up the Effectiveness of Action Taken:** |
| Feedback/Comment: |  |
|  |
|  |
| Verified by: |  | Date of Verification: |  | Approved by: |  |