Form#	Company Name and Logo			Revision
XXX	Corrective Action Form			XXX
CAR No.	Initiated b	У	Position	•
Date Process owner				
Description (to be completed by QA representative)				Implementation Date:
				Signature (or name)
Containment Action (To be completed by process owner or their designate)				Implementation Date:
Describe actions taken to prevent impact to internal and external customers.				
				Signature (or name)
Root Cause (To be completed by process owner or their designate)				Implementation Date:
Describe what the root cause is, how it was determined and what evidence exists to support that all root causes are found				found
				Signature (or name)
Corrective Action (To be completed by process owner or their designate)				Implementation Date:
Describe the actions taken to address root cause(s). Attach objective evidence of such actions if available				
				Signature (or name)
Verification (To be completed by Quality Mgr. or their designate)				Implementation Date:
				Signature (or name)
Effectiveness (To be completed by Quality Mgr. or their designate)				Implementation Date:
				Signature (or name)
CAR Closure (To b	e completed by Qualit	y Mgr. or their designa	te)	
Name	Signature		Date	
Remarks:				