



Supplier-Request

Internal-Request

Part name _____	Deviation Number _____
Part Number _____	Submitted by _____
Print Number _____	Request Date _____
Revision Level _____	Supplier Department _____
Rating (Check 1)	Change request # _____
<input type="checkbox"/> 1 - Documenting Non-PSW Status: Test in progress, process capability, control plan issues, etc.	BOM Affected _____
<input type="checkbox"/> 2 - BOM corrections (Errors, late changes)	Product Affected _____
<input type="checkbox"/> 3 - Minor Nonconformances: Final tolerancing, nonfunctional dimensional or specification errors, etc.	Deviation Type (Check 1)
<input type="checkbox"/> 4 - Nonconformances with potential to impact customer satisfaction, function or durability*	A - Design Release Pending
	B - Manufacturing Feasibility
	C - Nonconforming Parts*
	Does condition affect safety? <input type="checkbox"/> Yes <input type="checkbox"/> No

* NOTE: The supplier must complete and attach an 8D form including Containment & Corrective Action

Description of Deviation Requested:

(Include specified requirement, actual condition and the extent of nonconformance - attach supporting documentation as necessary)

Key Characteristics Affected? Yes No

Terms of Approval:

Comments (Include Qty if applicable)

Term of Deviation: _____ (Date or Parts Quantity)

8D Waved? Yes No SREA Required? Yes No

Approvals:

HA Manufacturing Quality	<input type="checkbox"/> Approve	HA Production Manager	<input type="checkbox"/> Approve
Print Name:	<input type="checkbox"/> Reject	Print Name:	<input type="checkbox"/> Reject
Signature:	Date	Signature:	Date
HA Quality Engineering	<input type="checkbox"/> Approve	HA Purchasing	<input type="checkbox"/> Approve
Print Name:	<input type="checkbox"/> Reject	Print Name:	<input type="checkbox"/> Reject