



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