

[organization name]

## Appendix 2 – Corrective Action Record

|  |  |                    |                     |
|--|--|--------------------|---------------------|
| Reason for initiation of Corrective Action:                                    |  |                    |                     |
|  |  |                    |                     |
| Process in which non-conformity was discovered:                                |  |                    |                     |
| Process in which non-conformity occurred:                                      |  |                    |                     |
|  |  |                    |                     |
| Enforcing deadline:  |  | Action ordered by: |                     |
|  |  |                    |                     |
| 1. [name], team leader   |  |                    |                     |
| 2. [name], team member   |  |                    |                     |
| 3. [name], team member   |  |                    |                     |
| Corrective actions:  |  |                    |                     |
|  |  |                    |                     |
| Report about implemented actions:  |  | Report date:       | Reported by:        |
|  |  |                    |                     |
| Verification of implemented actions for effectiveness:                         |  | Date:              | Responsible person: |
| <input checked="" type="checkbox"/> Cause of non-conformity completely removed |  |                    |                     |
|  |  |                    |                     |
|  |  |                    |                     |

Commented [14A1]:

Commented [14A2]: E.g. Internal audit, External audit, Customer's complaint, etc.

Commented [14A3]: Name and signature.

Commented [14A4]:

Commented [14A5]: If Yes then also write the name of the process.

Commented [14A6]: Name the person who ordered.

Commented [14A7]: While identifying cause of non-conformity

Commented [14A9]: If Yes then also write in the name of part of system.

Commented [14A11]: Name of person who made the report.

Commented [14A14]: Person responsible for monitoring and evaluating effectiveness of implemented corrective actions.

Commented [14A13]: Delete those that are unnecessary.

Commented [14A15]: Only necessary if document is in paper form.

[job title]

[name]

[signature]