



Supplier Deviation Request

Date _____ Supplier Name _____
 Part Number _____ Supplier Address _____
 Part Name _____
 Revision _____ Purchase Order Number _____
 Quantity Requested _____ Requested Expiration Date _____

Description of Deviation _____

Reason for Deviation _____

Corrective Action _____

Anticipated Date for Implementation of Corrective Action _____

Submitted by
 Name _____ Title _____
 Phone _____ E-mail _____

~~~~~ SPT Disposition and Approval (do not write below this line) ~~~~~

Accepted  
 Accepted as Modified Explain \_\_\_\_\_  
 \_\_\_\_\_  
 Rejected Reason \_\_\_\_\_  
 \_\_\_\_\_

Additional Comments \_\_\_\_\_

Effectivity  
 PO Number \_\_\_\_\_ Qty Approved \_\_\_\_\_ Expiration Date \_\_\_\_\_

Design/Product Engineer \_\_\_\_\_ Date \_\_\_\_\_  
 Process Quality Engineer \_\_\_\_\_ Date \_\_\_\_\_  
 Buyer/Planner or Purchasing \_\_\_\_\_ Date \_\_\_\_\_  
 Supplier Quality \_\_\_\_\_ Date \_\_\_\_\_