



MASSACHUSETTS INSTITUTE OF TECHNOLOGY  
 Kavli Institute for Astrophysics and Space Research  
**SUPPLIER CORRECTIVE ACTION REQUEST**

MIT QA:	Date:	Project:	SCAR#:
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**MIT PROCUREMENT DETAIL**

Supplier:	Contact:	MIT PO#:		
Description:	P/N:	Rev.:		
SUPPLIER LOT#	PRODUCT SERIAL#	QTY RECD:	QTY ACC:	QTY REJ:

**FAILURE/DISPOSITION DETAIL**

LINE#	QTY	PRODUCT DESCRIPTION	NONCONFORMANCE / ISSUE <i>Please review and respond with cause/correction within two weeks.</i>
1			
2			
3			

**CAUSE/CORRECTION DETAIL**

LINE#	ROOT CAUSE	CORRECTIVE ACTION
1		
2		
3		

**SUPPLIER QA APPROVAL**

Name:	Title:	Date:
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**MIT QA APPROVAL/CLOSURE**

Name:	Title:	Date:
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