



INSPECTION/TEST RECORD

SHEET ___ OF ___

DEPARTMENT/DIVISION/PROJECT _____

QA CLASSIFICATION: A1 (CRITICAL/HIGH) A2 (MAJOR/MODERATE) A3 (MINOR/LOW) A4 (NEGLIGIBLE)

PART NAME:	
PART NO.:	REV.:
PREPARED BY:	DATE:
VENDOR:	P.O. NO.:
QTY. RECD.:	DATE RECD.:

COMMENTS: _____

Inspection/Test Data Attached (Data Sheet To Include: Part Name, Part No., Date, & Sheet ___ of ___)

ITEM	CHARACTERISTIC/REQUIREMENT	INSP. / REJ.		INSPECTOR'S SIGNATURE/LIFE #	DATE
1					
2					
3					
4					
5					
6					
7					
8					
9					

Record all nonconformances for each item on page 2 of ITR.

Qty. Accepted _____ Serial (LOT) No. Accepted _____

MEASUREMENT AND TEST EQUIPMENT RECORD

DESCRIPTION	MODEL NO.	SERIAL NO. /BNL NO.	MFG. NAME	CALIBRATION DUE DATE	*RESP. IND. SIG. (IF REQD.)

*Responsible Individual concurrence is required if M&TE is not calibrated, out of calibration, or not in calibration system.

NONCONFORMING REPORT

ITEM/SER No.	DESCRIPTION	**DISPOSITION CODE	RESP. IND. SIG. & DATE

**Codes: UAI (Use as is); RTV (Return to Vendor); RWK (Rework); Repair; Scrap

<p>If nonconforming item is A1 or A2 and disposition is Repair, RTV, RWK, Scrap or UAI, provide additional concurrence below:</p>			
QA (if reqd.)	_____	DATE _____	OTHER (if reqd.) _____
COMMENTS:	_____		