|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **General information** | | | | | | | | | | | | | | | | | | | | | | | | | |
| Supplier |  | | | | | | | | Phone | | | | |  | | | | | | Fax No | | | |  | |
| Address |  | | | | | | | | | | | | | | | | | | | | | | | | |
| City |  | | | | State | |  | | | Country | | | |  | | | | | Cage Code | | | |  | | |
| Primary Contact | |  | | | | | | | | Phone Number | | | | |  | | | | | | | | | | |
| Designation | |  | | | | | | | | Email | | | | |  | | | | | | | | | | |
| Quality Contact | |  | | | | | | | | Phone Number | | | | |  | | | | | | | | | | |
| Designation | | ' | | | | | | | | Email | | | | |  | | | | | | | | | | |
| Quality Manager | |  | | | | | | | | Phone Number | | | | |  | | | | | | | | | | |
| Designation | |  | | | | | | | | Email | | | | |  | | | | | | | | | | |
| List of Primary customers | | | | | |  | | | | | | | | | | | | | | | | | | | |
| **Products and Services** | | | | | | | | | | | | | | | | | | | | | | | | | |
| Materials | | | | | | | |  | | List down any Sub-supplier / Sub-contractors | | | | | | | |  | | | | | | | |
| Services | | | | | | | |  | |
| **Facility Information** | | | | | | | | | | | | | | | | | | | | | | | | | |
| Company Ownership | | | |  | | | | No. of Buildings | | | |  | | | Year Established | | | | | |  | | | | |
| Total Employees | | | |  | | | | No. in Quality | | | |  | | | No. in Manufacturing | | | | | |  | | | | |
| The person completing this checklist | | | |  | | | | Designation | | | |  | | | Email | | | | | |  | | | | |
| **Supplier Type** | | | | | | | | | | | | | | | | | | | | | | | | | |
| Build to Print Suppliers | | | | | |  | | Design Responsible / Build to specification suppliers | | | | | | | | | | | | | | | | |  |
| Original Component manufacturers | | | | | |  | | Distributor/Commercial off the shelf suppliers | | | | | | | | | | | | | | | | |  |
| Special process suppliers | | | | | |  | | Raw material suppliers | | | | |  | | Calibration/Testing Organization | | | | | | | | | |  |
| **Quality System** | | | | | | | | | | | | | | | | | | | | | | | | | |
| AS 9100 | Expiry Date: | | | | ISO 9001 | | | Expiry Date: | AS 9120 | | | | | Expiry Date: | | | | | Nadcap: | | | | Expiry Date: | | |
|  | Date. | | | |  | | | Date. |  | | | | | Date. | | | | |  | | | | Date. | | |
| Other Approvals [List]: | | | | |  | | | | | | | | | | | | | | | | | | | | |
| **For “Yes” / “No” answers; Please tick the box for the one which applies.** | | | | | | | | | | | | | | | | | | | | | Yes | | | | No |
| **Management Responsibility** | | | | | | | | | | | | | | | | | | | | | | | | | |
| Is an organization chart available? If yes, please enclose a copy. | | | | | | | | | | | | | | | | | | | | |  | | | |  |
| Are there any written job descriptions defining everyone’s responsibilities? | | | | | | | | | | | | | | | | | | | | |  | | | |  |
| Does the supplier have the current Rossell Techsys Supplier Quality Requirements (SQAM)? | | | | | | | | | | | | | | | | | | | | |  | | | |  |
| **Quality Management** | | | | | | | | | | | | | | | | | | | | | | | | | |
| Do you have a Quality Manual? | | | | | | | | | | | | | | | | | | | | |  | | | |  |
| Do you have procedures, which apply, to your process? | | | | | | | | | | | | | | | | | | | | |  | | | |  |
| Do you have a skill matrix and training plan? | | | | | | | | | | | | | | | | | | | | |  | | | |  |
| Do you have a periodic internal audit system? | | | | | | | | | | | | | | | | | | | | |  | | | |  |
| Are results of audits documented and brought to the attention of the personnel responsible for the area being audited? | | | | | | | | | | | | | | | | | | | | |  | | | |  |
| Are purchase orders issued to approved suppliers only? | | | | | | | | | | | | | | | | | | | | |  | | | |  |
| Does the supplier have a system for evaluating, approving, and maintaining effective control over procurement sources? | | | | | | | | | | | | | | | | | | | | |  | | | |  |
| Is a supplier quality rating system used? | | | | | | | | | | | | | | | | | | | | |  | | | |  |
| **Inspection and Testing** | | | | | | | | | | | | | | | | | | | | | | | | | |
| Does supplier have a procedure for receiving inspection? And system for visual and dimensional inspection of materials in accordance with procedure? | | | | | | | | | | | | | | | | | | | | |  | | | |  |
| Are records maintained which give evidence that the product has passed inspection and/or test with defined acceptance criteria? | | | | | | | | | | | | | | | | | | | | |  | | | |  |
| Are individuals trained in the handling of hazardous goods? | | | | | | | | | | | | | | | | | | | | |  | | | |  |
| **Calibration** | | | | | | | | | | | | | | | | | | | | | | | | | |
| Is there a documented procedure describing the calibration system? | | | | | | | | | | | | | | | | | | | | |  | | | |  |
| Is calibration status identified by a label indicating date calibrated, calibration due date, and personnel performing calibration? And unique number assigned to each measuring and test equipment? | | | | | | | | | | | | | | | | | | | | |  | | | |  |
| **Control of Non-Confirming products** | | | | | | | | | | | | | | | | | | | | | | | | | |
| Do procedures exist that define the system for handling nonconforming materials? | | | | | | | | | | | | | | | | | | | | |  | | | |  |
| Does the supplier maintain facilities for segregating nonconforming materials to preclude use? | | | | | | | | | | | | | | | | | | | | |  | | | |  |
| Upon disposition of the nonconformance, are the necessary verification in place to ensure disposition is implemented? | | | | | | | | | | | | | | | | | | | | |  | | | |  |
| Are materials to be scrapped positively segregated and mutilated in such a manner as to preclude the possibility of their being used for their intended purpose? | | | | | | | | | | | | | | | | | | | | |  | | | |  |
| **Corrective Action** | | | | | | | | | | | | | | | | | | | | | | | | | |
| Does the supplier maintain a corrective action system? And follow up system to prevent recurrence of nonconformance | | | | | | | | | | | | | | | | | | | | |  | | | |  |
| Do procedures define notification of customers and/or recall of potential nonconforming material that have shipped? | | | | | | | | | | | | | | | | | | | | |  | | | |  |
| **Handling, Storage, Packaging and Delivery** | | | | | | | | | | | | | | | | | | | | | | | | | |
| Are procedures in place to address obsolescence of stock? Is there evidence of stock review and purge? | | | | | | | | | | | | | | | | | | | | |  | | | |  |
| Does Quality ensure Packaging compliance to specification? | | | | | | | | | | | | | | | | | | | | |  | | | |  |
| Are stock and shelf-life items controlled? | | | | | | | | | | | | | | | | | | | | |  | | | |  |
| **Rossell Techsys comments** | | | | | | | | | | | | | | | | | | | | | | | | | |
| Scope of the approval | | |  | | | | | | | | | | | | | | | | | | | | | | |
| Risk level | | | Choose an item. | | | | | | | | Date | | | | | | Click or tap to enter a date. | | | | | | | | |
| Is SQAM gap assessment required to be conducted | | | | | | | | | | | | | | | | | | | | | |  | | |  |
| Is an On-site manufacturing assessment required to be conducted | | | | | | | | | | | | | | | | | | | | | |  | | |  |
| Approval status | | | Choose an item. | | | | | | | | | | | | | | | | | | | | | | |
| SQE Comments | | |  | | | | | | | | | | | | | | | | | | | | | | |
| Reviewer | | |  | | | | | | | | Approver | | | | |  | | | | | | | | | |