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| idirect_logo_plain_cmyk | **Supplier Corrective Action Report**13865 Sunrise Valley Drive, Herndon VA 20171 e-mail: quality@idirect.netweb: [www.idirect.net](http://www.idirect.net) |
|  |
|  | iDirect CAR Number: |  | Creation Date: | *Enter Date* |  |
| Related Problem Report No:/RMA # |  | SCAR Due Date: |  |  |
| Report Created By: |  |  |  |  |
|  |  |
| Supplier Name: |  |  |
| Supplier Address: |  |  |
| Supplier Phone Number: |  |  |
|  |  |
| iDirect Part Number: |  |  |  |
| iDirect Part Revision: |  |  |
| iDirect Part Description: |  |  |
| SCAR analysis reports are considered confidential and proprietary to iDirect. |
| **D1: Supplier Contact Details** |
| *Enter name and contact details for individual who performed the SCAR investigation* |
| **D2: Problem Description** |
| *Detailed problem description* |
| **D3: Containment** |
| *Describe how problem was contained. This may include inspection or additional testing.* |
| **D4: Root Cause** |
| *Define root cause including a detailed analysis of how root cause was determined.* |
| **D5: Permanent Corrective Action** |
| *Define corrective actions taken that will directly address root cause and prevent reoccurrence.* |
| **D6: Permanent Corrective Action Implementation** |
| *Update status of corrective action implementation.* |
| **D7: Preventive Action** |
| *Define preventive actions which will prevent occurrence of the root cause on future or similar products or processes.* |
| **D8: Validation** |
| *Describe in detail how the effectiveness of the corrective actions were validated.* |