

QIR Audit Form	
Author: Cody Coogan	Issue Date: 9/19/2023 Effective Date: 9/19/2023

Supplier Name:	Supplier Code:
QIR Name:	Auditor Name:
QIR Signature:	QIR Initials:
QIR Role: <input type="checkbox"/> Primary <input type="checkbox"/> Secondary	

Requirements	Results					
a. Documentation for investigations of rejected deliveries.	Compliant:		Finding:		N/A:	
b. Root cause identified and corrective actions taken for rejected deliveries.	Compliant:		Finding:		N/A:	
c. Documentation for investigations of defective pieces caught prior to shipment.	Compliant:		Finding:		N/A:	
d. Root cause identified and corrective actions taken for defective pieces caught prior to shipment.	Compliant:		Finding:		N/A:	
e. Evidence of DAISE process used during investigations.	Compliant:		Finding:		N/A:	
f. Evidence of ensuring the effectiveness of corrective actions for each investigation.	Compliant:		Finding:		N/A:	

Auditor Comments: _____

Audit Results (check one): Compliant: Finding:

CA(s) Generated Yes: No: Auditor Signature _____

Recommend Secondary QIR for Production Status?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Recommend the QIR/Supplier for DQR Program?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A

Revision Record

Revision	Date	Section(s) Affected	Description of Change/Change Request Reference/Remarks
00	9/19/2023	All	New Document

Document Control

Prepared By & Date:
Safety Review and Date: <div style="text-align: center; margin-left: 150px;">NA</div>
Mfg. Engineering Review and Date:
Production Review and Date:
Quality Review and Date: