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| ***Requesters Use*** |  | ***Requestor is required to fill out information below and submit to the applicable TEAM Quality Representative*** | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | **Requesting Plant/Supplier:** | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  |  | **Submitted by:** | | | |  | | | | | | | | | | | | | | | | | | | | | | |
|  |  | **Part Number:** | | | |  | | | | | | | | | | | | | | | **Revision Level:** | | |  | | | | |
|  |  | **Part Description:** | | | | |  | | | | | | | | | | | | | | | | | | | | | |
|  |  | **Purchase Order Number:** | | | | |  | | | | | | | | | | | | | | | | | | | | | |
|  |  | **Describe Change Requested:** | | | | | | | | | | | |  | | | | | | | | | | | | | | |
|  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | **Reason for Change:** | | | | | |  | | | | | | | | | | | | | | | | | | | | |
|  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | **Will this Change Result in a Price Change?** | | | | | | | | | | | | | | | **Yes  No** | | | | | | | | | | | |
|  |  | **If Yes Describe Details:** | | | | | | |  | | | | | | | | | | | | | | | | | | | |
|  |  | **Effective Date Requested:** | | | | | | | | |  | | | | | | | | | | | | | | | | | |
|  |  | Attach print, photo, etc. for additional clarity | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | TEAM will assign a number and date once received from requestor | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ***TEAM/Customer Use*** |  | **ECR #:** |  | | | | | | | **(TEAM plant specific tracking number)** | | | | | | | | | | | | | | | **Date:** | |  | |
|  |  | **Deviation #:** | |  | | | | | | | | | | | | **Only used when Deviation requests an ECR for traceability.** | | | | | | | | | | | | |
|  |  | Project and Design Engineers are responsible for completing the info below and approving/rejecting TEAM prints. | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | **Part Qualification Information Required:** | | | | | | | | | | | | |  | | | | | | | | | | | | | |
|  |  | **Will Testing be needed before Engineering Change can be approved?** | | | | | | | | | | | | | | | | | | | | | | |  | | | |
|  |  | **If Yes to above? Projected Date of Decision:** | | | | | | | | | | | | | | | |  | | | | **Est. Cost of Testing:** | | | | | |  |
|  |  | **Will final approval be required from customer:** | | | | | | | | | | | | | | | | | |  | | | | | | | | |
|  |  | **Is this an Interchangeable or Non-Interchangeable Change:** | | | | | | | | | | | | | | | | | | | | |  | | | | | |
|  |  | **Fast Track Change Process:** | | | | | | | | | | |  | | | | | | **Full Track Change Process:** | | | | | | |  | | |
|  |  | **End OEM:** | | |  | | | | | | | | | | | | | | | | | | | | | | | |

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| **Signature** | **Title** | **Approve / Reject** | **Date** |
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| ***Project or Design Engineer is required to summarize the reason for the rejections of TEAM prints. The rejected ECR will be returned to the requester to close out the original request.*** |
| **Comments for rejection:** |