CORRECTIVE ACTION PLAN CHECKLIST

The following items must be addressed. Without doing so, the Corrective Action Plan (CAP) will be rejected:

TI C II '		1 6	. ~ •••
	must he addre	SCAM TAR AAR I	n tindina:
THE TOHOWING	must be addre	33CG 101 CGC	

- ☐ Date: Anticipated date the Corrective Action will be implemented
- ☐ Responsible Party: provide title (not personal name) of the party responsible for implementing the proposed Corrective Action

The following must be addressed for **each implementation item:**

- ☐ Required Task: include all of the tasks needed to complete the corrective action
- ☐ Responsible Party: provide title (not personal name) responsible for each required task
- Approval Party: provide title (not personal name) for any tasks that require approval to be initiated or completed
- ☐ Training (if applicable): Specify which training/s will be provided, including a description and expected dates.
- □ Policies and Procedures (if applicable): Specify if new policies/procedures will be written, or if updates to existing policies/procedures will be made.

Finding

The CAP must address each finding

Implementation Item

Required for each finding

Task

Required for each Implementation Item



