

	Document #: QPA-FM-005	Page 1 of 1
	<b>SUPPLIER QUALITY SYSTEMS SELF-AUDIT</b>	
Subject: Form		Date: 2/19/18
		Revision: 002
Owner: Purchasing	Authorized by: C. McWilliams	Authorized by: R. Gonser

***Please return to Welker within five business days, email to [quality@ewelker.com](mailto:quality@ewelker.com)***

Please provide the following information to Welker Engineered Products so we may assess the status of your quality management system and approve your organization as a supplier.

Supplier name \_\_\_\_\_

Street address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contact \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

General: Is your quality management system certified to a recognized standard (if a sales representative for an organization, is your supplier)? (i.e. ISO9001/TS, etc.)

Yes \_\_\_\_\_ No \_\_\_\_\_

**If yes, please submit a copy of your certification with the above information.  
If no, answer the questions below**

QUALITY SYSTEMS:	<p><b>Have you established a quality system that ensures your products meet customer requirements?</b></p> <p style="text-align: center;">Yes _____ No _____</p>
CUSTOMER ORDER REVIEW:	<p><b>Does your company review customer orders prior to acceptance to ensure you have the capability to meet their requirements?</b></p> <p style="text-align: center;">Yes _____ No _____</p>
INSPECTION & TEST:	<p><b>Are inspection and testing activities in place and effective for verifying that specified product requirements have been met?</b></p> <p style="text-align: center;">Yes _____ No _____</p>
NONCONFORMING PRODUCT:	<p><b>Is there a process in place to ensure that products that do not meet requirements are prevented from shipment?</b></p> <p style="text-align: center;">Yes _____ No _____</p>
CUSTOMER COMPLAINTS:	<p><b>Do you have a process for responding to customer complaints that includes root cause analysis, corrective and preventative actions?</b></p> <p style="text-align: center;">Yes _____ No _____</p>

<b>Welker Internal Use Only</b>			
Approval Method:	Previous Experience	ISO/TS Certified	Survey Response
	Customer Specified		
Approved By:			Date:
Additional Notes:			
Name:			Date:

***Email to [quality@ewelker.com](mailto:quality@ewelker.com)***