



Supplier Engineering Change Request

Tracking #: _____
(Request # - date submitted)

SUPPLIER TO COMPLETE

Supplier Name: _____ Vendor Code: _____
 Supplier Address: _____ Supplier Contact Name: _____
 _____ Supplier Contact Title: _____
 _____ Supplier Phone / Fax: _____

Stackpole Part Number: _____ Stackpole Drawing Number: _____
 Stackpole Program / Customer Affected: _____
 Proposed / Marked Drawing Attached: <SSC> or <SCC> Affected:
 Stackpole Int'l Facility Affected: _____

Description of Proposed Change:

Supplier Manufacturing Location Change
 Supplier Shipping Location Change
 Supplier Proposed Engineering/Design Change
 Supplier Manufacturing Process Change
 Sub-Supplier Change

Sub-Supplier Location Change
 Temporary Change (Part or Process)
Begin Date: _____
End Date: _____
of Pieces: _____

Alternate Material
 Rework
 New or Additional Tooling
 Other: _____

Reason for Proposed Change:

Fit Function Appearance Best Practices/Improvements
 Cost Other: _____

Detailed Description of Change:

Tool Change Required Bank / Inventory Required
 Piece Cost Affected (Cost effect \$): _____ IMDS Affected
 Timing Required to Incorporate Change After Approval: _____

Attachments:

Timing Plan Validation Plan Other: _____

STACKPOLE INTERNATIONAL TO COMPLETE

Supplier Quality Response To The Change Proposal:

Approve Reject Need More Information Meeting Required With Supplier
 Feedback to Supplier (required if Reject or Need More Information): _____

If approve, PPAP level required of supplier: _____

Engineering Response To The Change Proposal:

Approve Reject Need More Information Meeting Required With Supplier
 Feedback to Supplier (required if Reject or Need More Information): _____

If approve, ECN# (if applicable): _____

Component drawing to be updated Customer drawing to be updated

Plant Quality Response To The Change Proposal:

Approve Reject Need More Information Meeting Required With Supplier
 Feedback to Supplier (required if Reject or Need More Information): _____

PPAP required by customer Customer SREA required

Purchasing Response To The Change Proposal:

Approve Reject Need More Information Meeting Required With Supplier
 Feedback to Supplier (required if Reject or Need More Information): _____

A FULLY signed form indicates approval of the plan ONLY.

SQE: _____ Plant Quality: _____
 Engineering: _____ Purchasing: _____

*This approval is granted upon the understanding that it is advisory in nature and in no manner changes the Sellers original responsibility for ensuring that all characteristics, designated in the applicable engineering specification and/or inherent in the samples as originally tested and approved, are maintained. Seller accepts full responsibility for the changes or types of changes listed above; and should such changes result in less satisfactory performance than experienced with the originally approved item, Seller will fully reimburse Stackpole for all expenses incurred to correct the deficiency.
 Also note that by submitting this form, Supplier conveys ownership of the submitted suggestion to Stackpole International.