

Evaluation      **QUALITY SYSTEM QUESTIONNAIRE**       Re-Evaluation

**Section 1 – General Information**

<b>Company Name</b>		<b>Contact Name</b>	
<b>Address</b>		<b>City, State, Zip</b>	
<b>Phone Number</b>		<b>Fax Number</b>	
<b>Supplier Type Details</b>	<input type="checkbox"/> Manufacturer / OEM <input type="checkbox"/> Distribution Center <input type="checkbox"/> Service Provider (IE: Calibration, Maintenance, etc.) <input type="checkbox"/> Other _____		

Please complete the following questionnaire as accurately as possible. The International Standard Quality Group mandates all procurement for parts and services must be from approved External Providers and records shall be maintained. As such, we document the following information to facilitate our decision making process prior to issuing purchase orders. An expedited reply is requested.

**Quality Management System:**

***Do you maintain an accredited Quality Management System (QMS)?***     **Yes**     **No**

Certified To: (Check One)     ISO 9001     SAE AS9100     SAE AS9120    If No, Questionnaire must be completed.  
 Other (Please specify):

**If “YES”, kindly attach a current copy of the registration certificate provided by your registrar and respond to question #7 in the questionnaire below, then sign, date and return to: Joe Emmel [joe@spectechusa.net](mailto:joe@spectechusa.net). Thank you.**

**Section 2 – Supplier Questionnaire**

		Yes	No	N/A
1	Do you allow customers to audit your facilities / processes?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Do you have a nonconforming material control process that prevents processing and shipment of potential nonconformance's?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Do you respond to customer complaints in a timely manner?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Do you perform inspection on products or services and are records maintained?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	If providing calibration services: 1. Are your certificates traceable to NIST? 2. Are you accredited to a recognized standard (ISO 17025, NADCAP, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	Do you retain records of processing and verification activities for a minimum of 7 years?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	Have you read and agree with the terms and conditions listed on our website ( <a href="http://www.spectechusa.net/downloads.html">http://www.spectechusa.net/downloads.html</a> )?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	Do you maintain a counterfeit prevention program to ensure only qualified and approved items are provided?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9	Are employees competent to perform work affecting product/service quality and are records maintained of training and competency?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Supplier Representative Signature</b>				<b>Date</b>

**Section 3 – Supplier Risk Assessment & Approval**

*(Completed by Spec Tech Management Personnel)*

<b>Determined Risk</b> <i>(Check One)</i>	<input type="checkbox"/> <b>Low</b> (1)	<input type="checkbox"/> <b>Medium</b> (2)	<input type="checkbox"/> <b>HIGH</b> (3)
<b>Action Plan</b> <i>(if any)</i>			
<b>Evaluation Results</b>	<input type="checkbox"/> <b>Accept Supplier</b> <input type="checkbox"/> <b>Reject Supplier</b>		
<b>Completed By</b>			<b>Date</b>
<b>Comments</b>			