

Action Taken and Corrective Measures Report

Report Details

Date of Report: _____

Report Number: _____

Prepared By: _____

Department: _____

Incident / Issue Summary

Root Cause Analysis

Action(s) Taken

No.	Description of Action	Responsible Person	Date Implemented
1			
2			

Corrective and Preventive Measures

No.	Measure	Responsible Person	Deadline	Status
1				
2				

Verification / Follow Up

Signatures

Prepared By: _____ Date: _____

Checked By: _____ Date: _____

Approved By: _____

Date: _____

Important Notes

- Provide clear and precise information for each section to ensure transparency.
- Ensure all actions and corrective measures are assigned to responsible persons with deadlines.
- Review and verify the effectiveness of corrective and preventive actions regularly.
- Keep documented evidence to support actions taken and verification steps.
- This document may be subject to periodic audits for compliance and improvement.