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| --- | --- | --- | --- | --- | --- | --- | --- |
| [x]  | New Course  | [ ]  | Existing Course Revision | From Rev : | - | To Rev: | A |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Course Number  | QUALITY072\_OLT | Rev | : A | Training Hours: | N/A |

*Numbers for new courses will be assigned by HRMS Team If applicable. Training length to be used for*

 *(30 character space limit) Credit hours, Contact Hours, CPE Hours*

|  |  |
| --- | --- |
| Name of course: | How to Create a Corrective Action Record |

*100 character space limit*

|  |  |
| --- | --- |
| Course Description: | This course defines the process for how to submit a corrective action record in the corrective action database. |
| *What does the course provide to the employee?*  |  |
| *10,000 character space limit* |  |

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| --- | --- | --- |
| Frequency /Retraining Setting | [ ]  Initial/Upon Revision | Training Type |
| [x]  12 months | [x]  OLT | [ ]  ILT |
| *How often the training is needed* | [ ]  24 months | *On Line Training* | *Instructor Led Training* |
| [ ]  36 months |

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| Set up: | [x]  Read & Acknowledge | [ ]  Instructor Led |
| [ ]  Read & Test | Skills Evidence: | [ ]  Yes | [ ]  No |
|  | [ ]  Watch & Acknowledge |  |  |  |

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| --- | --- | --- | --- |
| Material Location: | Liz will provide link to doc on QMS when ready |  |  |
|  | *HTTP address for course materials, procedures, work instructions, etc. Cannot be a network drive.* |  |
| Instructor /Contact person: | Justin Pawlicki |
|  | *Internal contact for arranging training.* |  |  |

Select the appropriate Catalog/ Subject areas:

|  |  |  |  |
| --- | --- | --- | --- |
|[x]  EHS |  |[x]  Product Development |  |
|[x]  Engineering |  |[x]  Quality |  |
|[x]  Human Resources |  |[x]  Sales |  |
|[x]  Management |  |[x]  Service |  |
|[x]  Manufacturing |  |  |  |  |
|[x]  Marketing |  |[ ]  First Responder |  |
|[x]  Materials |  |[x]  Facilities |  |

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| QMS System | Core Quality: Corrective Action | Scope: |  Eden Prairie, Field |
|  | Where training applies, e.g. location, sites, manual coverage |

|  |  |  |
| --- | --- | --- |
| Legal/ internal requirement: |  |  |

 *If applicable*

|  |  |  |
| --- | --- | --- |
| Aspect/Hazard: |  |  |

 *For EHS courses*

|  |  |
| --- | --- |
| Job Title/ Role /Target Audience:  | Will provide list when ready. |
|  | *Who will be assigned this training* |

**Approval:**

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Manager Signature | Function | Date |