

Corrective Action Request

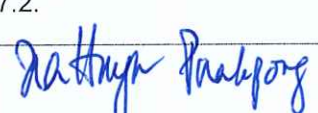
CAR 1 of 1

☐ Major ☒ Minor

Organization:	The Center for Library Resources and Educational Media Suranaree University of Technology		
Site(s) audited:	Nakhon Ratchasima	Date(s) of audit(s):	27/09/2021
Auditor(s):	On-anong S., Kanokrose O., Supalak P.		
Standard(s):	ISO 9001:2015		
Organization Representative:	Natcha Brownpanith / QMR		
Area / Department / Process:	HR and organizational knowledge		
Document Ref.:	-	Standard Ref.:	
Issue/Rev. Status:	-	CAR Close out date:	Next visit

Details of Non-Conformity:

There was not found objective evidence for determine of competence e.g. education and experience of some staffs:ID237178 position: Librarian professional level which did not comply to ISO9001:2015 requirement clause 7.2.

Organization Representative:	 Dr.Nattaya Puakpong	Auditor:	Supalak Panchote
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Cause Analysis and Corrective Action taken to prevent recurrence:

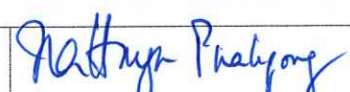
Company shall complete this section with 1) analysis of root cause of CAR, 2) specific correction and 3) planned corrective actions to be taken

If it is incomplete, auditor(s) will contact you shortly. Noted that your proposed actions shall be accepted by auditor(s) before the certification granting.

Root cause (สาเหตุ):
Referring to the details of non-conformity found by the auditor, the Center for Library Resources and Educational Media (CLREM) just started to implement ISO9001:2015 and CLREM uses the job description form provided by the university. Therefore, the mentioned details of one staff member were not included in the form.

Correction (การแก้ไขเบื้องต้นกับปัญหาที่พบ):
CLREM will add the missing information (i.e. educational level and work experience) of that staff in the job description form.

Corrective actions (การป้องกันการเกิดซ้ำ):
CLREM will organize a head division meeting once a year to review the job description forms of all staff members to ensure that they are complete and up-to-date. A checklist to investigate the completeness of the job description forms will also be added in the Internal Audit Process.

Organization Representative:	 Dr.Nattaya Puakpong	Date:	30 September 2021
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**Acceptance of Corrective Action / Comments** (use additional sheets if necessary):

Auditor:

Date:

Response required (in months)

Corrective Action must be addressed within time frame stated. Verification of action will occur at next visit. Additional follow up may be required as indicated.

Major**Minor**

Define

Close Out

Define

Close Out

5
Days**3**
Months**5**
Days**Next**
Visit