

Kearfott/ACA

SUPPLIER QUALITY SYSTEM SURVEY

SUPPLIER NAME		SUPPLIER CODE		DATE
ADDRESS & ZIP CODE			AREA CODE & PHONE	
QUALITY MANAGEMENT (NAME & TITLE)			PRODUCT LINE (DESCRIBE)	
NUMBER OF EMPLOYEES				
TOTAL	ENGINEERING	MANUFACTURING	QUALITY	
SUPPLIER IN-HOUSE "SPECIAL PROCESS" CAPABILITIES				
<input type="checkbox"/> MAGNETIC PARTICLE <input type="checkbox"/> PENETRANT <input type="checkbox"/> PAINTING <input type="checkbox"/> WELDING	<input type="checkbox"/> RADIOGRAPHY <input type="checkbox"/> HARDNESS TESTING <input type="checkbox"/> ANODIC COATING <input type="checkbox"/> CONFORMAL COAT	<input type="checkbox"/> PLATING <input type="checkbox"/> PASSIVATE <input type="checkbox"/> HEAT TREAT	<input type="checkbox"/> SOLDER <input type="checkbox"/> ESD <input type="checkbox"/> OTHER _____ _____	
QUALITY SYSTEM				
1 BASED ON ISO 9001 <input type="checkbox"/> ISO 9002 <input type="checkbox"/>	2 CERTIFIED ISO 9001 <input type="checkbox"/> ISO 9002 <input type="checkbox"/> COPY OF CERTIFICATION AND QUALITY MANUAL MUST BE SUBMITTED		3* OTHER: _____ _____ _____	
↓ KEARFOTT/ACA USE ONLY ↓				
TYPE OF SURVEY/AUDIT:				
MAIL-IN: <input type="checkbox"/> INITIAL <input type="checkbox"/> PERIODIC <input type="checkbox"/> FOLLOW-UP		QUALITY MANUAL RECEIVED: <input type="checkbox"/> YES <input type="checkbox"/> NO		
ON-SITE: <input type="checkbox"/> INITIAL <input type="checkbox"/> PERIODIC <input type="checkbox"/> FOLLOW-UP				
REMARKS: _____ _____ _____ _____ _____ _____ _____			SUPPLIER STATUS: <input type="checkbox"/> APPROVED DATE: _____ <input type="checkbox"/> CONDITIONAL DATE: _____ PENDING FURTHER EVALUATION OR CORRECTIVE ACTION (REFERENCE SCAR NO. _____)	
			<input type="checkbox"/> DISAPPROVED DATE: _____	
SURVEYED BY: _____			DATE: _____	

SUPPLIER QUALITY SYSTEM SURVEY

Check Applicable Boxes:

SURVEY TYPE:

- Self Evaluation
 On-Site Evaluation

SURVEY CLASSIFICATION:

- Distributor
 Value Added Distributor
 Manufacturer

INSTRUCTION:

- A. This survey is structured after the ISO 9000 Series. Please answer all questions even if they are N/A to your current Quality System. Explain any "NO" responses.
- B. Suppliers performing a self evaluation of their Quality System must sign the Quality System Self Evaluation Statement at the end of the survey.
- C. Suppliers registered to ISO 9001 or ISO 9002 must submit a copy of certification and may return survey without completing 4.1 through 4.20.

4.1 MANAGEMENT RESPONSIBILITY

YES NO N/A

- A. Does supplier have a documented Quality Policy.
- B. Does Supplier have an organization chart or equivalent reflecting current company operations?
- C. Are the responsibilities and authorities of those who manage, perform and verify work affecting Quality known by all relevant personnel?
- D. Does the Supplier identify resource requirements and provide adequate resources, including the assignment of trained personnel for management, performance of work and verification activities including internal quality audits?
- E. Is a Management Representative designated in the Quality Manual and are relevant personnel aware of the representative's responsibilities and authorities?
- F. Does Senior Management conduct management reviews on a scheduled basis?
- G. Does Supplier have written procedures and records for management review?

4.2 QUALITY SYSTEM

YES NO N/A

- A. Does Supplier have a Quality Manual and procedures/instructions for all applicable requirements?
- B. Does Supplier have Quality records showing effective implementation?
- C. Does Supplier have a system for document control?
- D. Does Supplier have a procedure for Quality Planning and/or Quality Plans?
- E. Does Supplier have Quality Plans or records of Quality Planning activities?

4.3 CONTRACT REVIEW

- A. Does Supplier have established procedures/instructions defining process and responsibilities for contract review?

4.3	CONTRACT REVIEW (Continued)	YES	NO	N/A
B.	Are there procedures in place that define the “how to” for the following implementation procedure for:			
	Understanding requirement?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Resolution of differences?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Supplier capability to meet requirements?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Agreed to order requirement before acceptance?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C.	Does the Supplier identify how an amendment to a contract is made and correctly transferred the amendment to the functions concerned within the Supplier’s organization?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D.	Does Supplier maintain records of P.O. review?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.4	DESIGN CONTROL (IF APPLICABLE)	YES	NO	N/A
A.	Do procedures exist which define design control process and responsibilities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B.	Does the Supplier prepare plans for each design and development activity? The plans shall describe or reference these activities, and define responsibility for their implementation. The design and development activities shall be assigned to qualified personnel equipped with adequate resources.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C.	Does the Supplier define the necessary information, documentation, transmittal, regular review, and establishment of technical interfaces between groups that input into the design process?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D.	Are design inputs reviewed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E.	Are differences in the design resolved with the parties responsible for the design?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F.	Have design outputs been documented?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G.	Do design outputs meet inputs?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H.	Are acceptance criteria specified?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I.	Does Supplier have design review records?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
J.	Do Supplier records show output verification, validation and review approval before design release?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
K.	Do Supplier’s procedures identify design verification, validation and design change control?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
L.	Are there records of verification and validation results?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
M.	Are design changes identified, documented, reviewed and approved prior to implementation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
N.	Are there records of design changes with their approvals?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4.5	DOCUMENT AND DATA CONTROL	YES	NO	N/A
A.	Do Supplier's procedures/instructions identify document control system?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B.	Are correct issues of documents available at the required locations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C.	Are documents properly approved?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D.	Were changes reviewed and approved by the department/position that performed the original review?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E.	Is the nature of changes evident in document or attachments?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.6	PURCHASING	YES	NO	N/A
A.	Do Supplier's procedures/instructions define subcontractor selection purchasing and verification activities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B.	Are there documented instructions detailing the extent of control placed on subcontractors (quality system and any specific product requirements)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C.	Does Supplier maintain an approved supplier list or equivalent?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D.	Do purchase documents contain enough information to clearly identify the product ordered?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E.	Are the purchasing documents reviewed and approved prior to release?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F.	Do Supplier's procedures and purchase documents allow for customer verification as required?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.7	COUNTERFEIT COMPONENT RISK MITIGATION	YES	NO	N/A
A.	Does Supplier have a formal counterfeit mitigation plan in place?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B.	Does Supplier follow the recommendations outlined in AS5553?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C.	Does Supplier have access to the ERAI counterfeit history database?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D.	Has Supplier ever discovered counterfeit components in their supply chain?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E.	Has Supplier ever dispositioned counterfeit material and was this material properly disposed of?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.8	CONTROL OF CUSTOMER SUPPLIED PRODUCT	YES	NO	N/A
A.	Do Supplier's procedures define control of customer-supplied product?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B.	Does Supplier deal with customer supplied product?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C.	Does Supplier have adequate storage facilities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D.	Do records indicate nonconforming and/or damaged customer-owned product and evidence of customer notification?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.9	PRODUCT IDENTIFICATION AND TRACEABILITY	YES	NO	N/A
A.	Does Supplier's procedures/instructions define methods of identification and traceability?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B.	Is the product identified throughout the production process?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C.	Have individual products or batches been uniquely identified?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4.10	PROCESS CONTROLS	YES	NO	N/A
A.	Does supplier have procedures/instructions ensuring that all processes are controlled?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B.	Does Supplier have objective evidence that the production process is planned to ensure that it is run under controlled conditions (i.e., work instructions, approved equipment, trained personnel, workmanship standards, process parameters, and maintenance program)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C.	Does Supplier have procedures/instructions for special processes?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D.	Have the processes, operations, and equipment been qualified?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E.	Are the special processes monitored on a continuous basis?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F.	Are records used and kept demonstrating the qualification of special processes, operations, personnel, and equipment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.11	INSPECTION AND TESTING	YES	NO	N/A
A.	Does Supplier have written procedures/instructions for: (Please check applicable boxes). <input type="checkbox"/> Receiving Inspection <input type="checkbox"/> In-Process Inspection and Test <input type="checkbox"/> Final Inspection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B.	Does the Quality plan/instruction detail required inspections, test and records?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C.	Is incoming material properly identified and controlled until inspection acceptance is indicated?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D.	Does the Supplier determine the amount and nature of receiving inspection, based on considerations due to the amount of control exercised at the subcontractor's premises and the recorded evidence of conformance provided?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E.	Do Supplier's procedures/instructions include records of identification for product released for urgent production use i.e., provisional release?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F.	Is a "positive recall system" in place which is documented?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G.	Are nonconforming materials identified and controlled for failed product?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H.	Has product conformance been established by means of process monitoring and control methods?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I.	Does final inspection assure that all inspections and test have been performed and product meets specified requirements?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
J.	Are records maintained and available for all inspection and test operations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.12	CONTROL OF INSPECTION, MEASURING, AND TEST EQUIPMENT	YES	NO	N/A
A.	Does Supplier maintain procedures/instructions for control, calibration, and maintenance of inspection, measuring, and test equipment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B.	Is test software checked and validated?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C.	Is the calibration status of the equipment uniquely identified by a suitable indicator?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D.	Are calibration records for equipment and/or test software properly maintained	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4.13	INSPECTION AND TEST STATUS	YES	NO	N/A
A.	Does Supplier's procedures/instructions detail what methods are to be used to identify the inspection/test status of the conforming/nonconforming product?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B.	Is the inspection status maintained throughout the production process?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.14	CONTROL OF NONCONFORMING PRODUCT	YES	NO	N/A
A.	Does Supplier maintain procedures/instructions for nonconforming product?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B.	Does the nonconformance system provide for the identification, documentation, evaluation, segregation, disposition of nonconforming product and notification to the affected functions?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C.	Does the nonconformance system prevent product that does not meet specification from being used inadvertently?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D.	Is the review and disposition of nonconforming product being performed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E.	Do records show identification, evaluation, and disposition by authorized personnel with proper identification and re-inspection of rework/repairs product?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.15	CORRECTIVE AND PREVENTIVE ACTIONS	YES	NO	N/A
A.	Does Supplier maintain procedures/instructions for corrective/preventive actions?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B.	Do records show investigation in the (root) cause(s) of nonconformances?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C.	Do records show that changes and/or controls have been introduced to overcome root cause and prevent recurrence of nonconformances?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D.	Do records show evaluation and effectiveness of corrective actions?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E.	Are sources of information and process for use detailed to ensure that preventive action measures are effective?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F.	Do records show evidence of management review of preventive actions?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.16	HANDLING, STORAGE, PACKAGING, PRESERVATION, AND DELIVERY	YES	NO	N/A
A.	Does Supplier maintain procedures/instructions for handling, storage, packaging, preservation, and delivery?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B.	Do means and methods exist to prevent damage and deterioration of the product?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C.	Does Supplier use designated storage areas with controlled access?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D.	Are periodic stock assessments performed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E.	Does the Supplier control packing, packaging, and marking processes (including materials used) to ensure conformance to specified requirements?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F.	Does the Supplier apply the appropriate methods for preservation and segregation of product when the product is under the Supplier's control?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G.	Does the Supplier arrange for the protection of the quality of the product after final inspection and test? Where contractually specified, this protection shall be extended to include delivery to destination.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4.17	CONTROL OF QUALITY RECORDS	YES	NO	N/A
A.	Does Supplier maintain procedures/instructions for control of Quality records including, pertinent subcontractor records?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.18	INTERNAL QUALITY AUDITS	YES	NO	N/A
A.	Does Supplier maintain procedures/instructions for scheduled and documented internal audits?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B.	Does Supplier have a controlled audit schedule?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C.	Does Supplier maintain records of audit reports, corrective actions taken, and effectiveness of those actions?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D.	Do records show that audit was performed by personnel independent of people having direct responsibility for the activity being audited?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.19	TRAINING	YES	NO	N/A
A.	Does Supplier maintain procedures/instructions for training needs for all personnel that may affect quality?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B.	Are personnel qualified on the basis of their education, training, and/or experience?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C.	Are records of training being kept which show personnel in a specific task comply with requirements?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.20	SERVICING	YES	NO	N/A
A.	Does Supplier maintain procedures/instructions for performance, verification, and reporting of servicing activities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B.	Are records of servicing and verification results maintained?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.21	STATISTICAL TECHNIQUES	YES	NO	N/A
A.	Does Supplier maintain procedures/instructions for identification, implementation, and control of statistical techniques?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B.	Are the statistical techniques being monitored to ensure that process capability and product criteria are being met?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C.	Do statistical records show effective implementation and controls per procedure (i.e., sampling, control limits, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SELF-EVALUATION SURVEY PARTICIPANTS

Please forward the completed Quality System Self Evaluation Survey along with any applicable Certificates, Quality System Summaries, and Quality Manuals to the address indicated below:

Kearfott Guidance & Navigation Corporation
1150 Mc Bride Avenue
Little Falls, New Jersey 07424
Attention: Procurement Quality Assurance
Mail Code 1EA85

Kearfott Guidance & Navigation Corporation
Route 70
Black Mountain, North Carolina 28711
Attention:

Astronautics Corporation of America
P.O. Box 523
Milwaukee, Wisconsin 53201
Attention: Supervisor, Quality Engineering

QUALITY SYSTEM SELF-EVALUATION STATEMENT

I hereby certify that the attached Quality System Self Evaluation Survey has been completed in accordance with our established Quality Assurance Manual and with Professional Ethics. Wrongful indications of compliance may jeopardize any future procurement activities with Kearfott Guidance & Navigation Corporation/Astronautics Corporation of America.

Signature: _____

Date: _____

Print Name: _____

Title: _____