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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Subject-Description of Feedback/Suggestion** | | | |  | | | | | | | | |
| **Owner of the feedback/suggestion:**  **(Company Name, Title, Name)**  **Address:**  **Phone:**  **email:** | | | |  | | | | | | | | |
| **History** | | | |  | | | | **No** | |  | | |
| **Receiving Feedback/Suggestion** | | | |  | | | | | | | | |
| **ASSESSMENT** | | | | | | | | | | | | |
| **Is the Feedback/Suggestion related to the Lab Activity?** | **YES** | | **NO ☐** | | **No, if Reason** | | | | | **Name Surname/Signature** | | |
| **History:** | | | |
| **Evaluation of Feedback/Suggestion (Explanation, if any)**  **Name and Surname:**  **Evaluation Date:** | | | | | | | | | | | | |
| **Feedback/**  **Evaluator of the Suggestion (Has the feedback/suggestion activity been accepted?)** | | Yes/No | | | | **Should Corrective and Preventive Action Be Taken?** | | | No | | **CAPA No** |  |
| **The plan** | | | | | | | | | | | | |
| **Activity** | | | | | **Responsible** | | **Deadline** | | | | | |
|  | | | | |  | |  | | | | | |
|  | | | | |  | |  | | | | | |
| **Feedback/Suggestor Providing Feedback on Activity Planning**  **Name, Surname and Date of Personnel:**  **Notification Method and Registration Information**: | | | | | | | | | | | | |
| **Feedback/Suggestion Result:** | | | | | | | | | | | | |
|  | | | | | | | | | | | | |