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| Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Details of Incident ( *Detalye sa panghitabo*) :  WHAT:  WHEN:  WHO:  WHERE:  Prepared by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Printed Name over Signature) |
| ***Root Cause Analysis*** |
| Immediate Action:  Conducted by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Corrective Action :    Signed by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Implemented: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Status of Closure:  (Major)-For CPAR  Others, pls. specify  Endorsed to HRD for further investigation  \_\_\_\_\_\_\_\_\_\_  Settled Within Dept.  ***Other Department:***  ***Closed by & Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Need to Verify: Yes No***  ***Verified by & Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*** |