|  |
| --- |
| Design review number: DRClick or tap here to enter text.  Stage I: Design and Development Planning  Stage II: Design Inputs  Stage III: Design Outputs  Stage IV: Design Verification.  Stage V: Design Validation  Stage VI: Design Transfer  Other: |
| Objective:  Click or tap here to enter text. |

**Attendees**

**Core Team Members:**

| **Function** | **Name, title** | **Signature** | **Date** |
| --- | --- | --- | --- |
| CEO | Name | Sig | **D**ate. |
| QA Manager |  |  | **D**ate. |
| [Other: Specify] |  |  |  |
| [Other: Specify] |  |  |  |
| [Other: Specify] |  |  |  |
| Independent Reviewer | Name | Sig | **D**ate. |

[Add or remove rows as needed.]

**Follow up of action items from previous Design Review Meeting.**  N/A

| **Action**  **Item #** | **Description** | **Person Responsible** | **Due Date** | **Status** |
| --- | --- | --- | --- | --- |
| 1 | Click or tap here to enter text. | Name text. | **D**ate. | Status |
| 2 |  |  | **D**ate. |  |

[Add or remove rows as needed.]

[Attached all meetings records to this record]