



ion beam services

FORM

JOB ORDER FORM

JOF ind. 2 fev. 2012

CUSTOMER

COMPANY*:			
CONTACT*:			
PHONE:			
FAX:			
EMAIL*:			
P.O. #:			
Ship date :		Carrier:	
Tracking nb:			

RESERVED FOR IBS

N° OF:	
Code:	
RUSH service:	<input type="checkbox"/> Yes <input type="checkbox"/> No

SUBSTRATE

Material*:				
Size*:				
Thickness*:				
Mask*:	Side to process:	<input type="checkbox"/> No mask	<input type="checkbox"/> Oxide	
		<input type="checkbox"/> Metal	<input type="checkbox"/> Photoresist	
	Opposite Side:	<input type="checkbox"/> No mask	<input type="checkbox"/> Oxide	
		<input type="checkbox"/> Metal	<input type="checkbox"/> Photoresist	
Remarks:				

LOT IDENTIFICATION

Lot	Wafercount

PROCESS PARAMETERS

Type*:	<input type="checkbox"/> Oxidation	<input type="checkbox"/> Annealing
	<input type="checkbox"/> Deposition	<input type="checkbox"/> Photolithography
	<input type="checkbox"/> Dry Etch	<input type="checkbox"/> Wet Etch
Specification:		
Remarks:		

IDENTIFICATION OF THE SIDE TO BE PROCESSED*

<input type="checkbox"/> Polished Side	<input type="checkbox"/> Non Polished Side
<input type="checkbox"/> With Numbers	<input type="checkbox"/> Without Numbers
<input type="checkbox"/> With Structures	<input type="checkbox"/> Without Structures
<input type="checkbox"/> Other:	

* REQUIRED FIELDS



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INCOMING CONTROL

Integrity of the parcel:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Non-Conformity Note:			
Conformity of documents:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Non-Conformity Note:		Date:	
				Visa:	

CONTROL BEFORE PROCESS

Processed side identifiable:	<input type="checkbox"/> Yes <input type="checkbox"/> No				
Mask in compliance with paperwork:	<input type="checkbox"/> Yes <input type="checkbox"/> No				
Wafercount in compliance with paperwork:	<input type="checkbox"/> OK <input type="checkbox"/> Non conform				
Condition of wafers:	<input type="checkbox"/> Yes <input type="checkbox"/> No				
Non-Conformity note:					
		Date:		Visa:	

EQUIPMENT PARAMETERS

Equipement:					
Recipe:					
Remarks:					
		Date:		Visa:	

CONTROL DURING PROCESS

Vacuum (if applicable):					
Integrity of substrate: (visual aspect after process)	<input type="checkbox"/> OK <input type="checkbox"/> Non conform				
Remarks:					
		Date:		Visa:	

CONTROL AFTER PROCESS

Measurements Results:		<input type="checkbox"/> OK <input type="checkbox"/> Non conform			
Checks/Inspection Results:		<input type="checkbox"/> OK <input type="checkbox"/> Non conform			
Non-Conformity note:					
<input type="checkbox"/> Attached documents					
Remarks:					
		Date:		Visa:	

We certify that these lots have been manufactured according to the above conditions.

Engineer Name:		Date:		Visa:	
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