* **Requestor Information**

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| --- | --- |
| **Name of Requestor** | e.g. Gildong Hong |
| **Team/Department** | e.g. Biomedical Research Institute / Medical Industry-Academic Cooperation Team |

* **External Customer Information**

|  |  |
| --- | --- |
| **Company Name or Institute Name** |  |
| **External Customer Name, Email,**  **Job Title** | * Name: * Email: * Role: |
| * Name: * Email: * Role: |
| **Disclosure request date/period** | DD-MMM-YYYY to DD-MMM-YYYY |
| **Requested Documents** | **SOP** (List the specific SOP requested)  **RF** (List the specific RF requested)  **Training Log (SOP)** (List the Training Log of the requested employee)  **Training Log (ISO)** (List the Training Log of the requested employee) |
| **Type of Document Access** | **PDF** (ISO Management System)  **Other:** |
| **Purpose of Disclosure** | **Audit**  **Inspection**  **Other**: |

* It is recommended that the requestor submit ‘SOP & Training Log Disclosure Request Form’ to QA team via ISO Management System prior to SOPs/RFs/Training Log disclosure.
* Agreement to Collect and Use Personal Information’ (CAUH-QM002-RF10) and ‘Non-Disclosure Agreement for SOP’ (CAUH-QM002-RF11) should be acquired before the external customer access to the ISO Management System.

**Requested by: (CAUH employee)**

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| Name |  |  | Signature |  | Date (DD-MMM-YYYY) |

**Approved by: (QA)**  **Approved**  **Not Approved**

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|  |  |  |  |  |  |
| Name |  |  | Signature |  | Date (DD-MMM-YYYY) |