

Supplier Change Request Form

SCRF# _____

Once completed, email this form to the appropriate Stryker Materials representative (Supplier Quality Engineer or Buyer) that works with your organization.

Note: Requests should be submitted to Stryker Instruments at least 90 days prior to the proposed implementation date.

Supplier to complete:	
Supplier Number: _____	Part Number: _____
Supplier Name: _____	Part Name: _____
Address: _____	Rev _____
	Level: _____
Requestor Name: _____	Print Note Number: _____
Email: _____	Telephone Number: _____
	Fax Number: _____

1. Type of Proposed Change:

Design	Equipment	Process	Material	Other	Secondary Op
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2. Detailed description of proposed change: _____

3. Reason for proposed change and anticipated effect:

4a. Will change affect shipping schedule?	No		Yes	attach explanation
4b. Will tooling or facility changes be required?	No		Yes	attach explanation
4c. Will pricing be affected? If yes, indicate cost.	No		Yes	Estimated cost\$ _____

5. Proposed timing details (time required to incorporate change after Stryker approval):

6. How will quality, quantity and capacity requirements be assured?

7. Does the proposed change introduce any of the following into the manufacturing process?:

Product of animal origin	No	Yes
Latex	No	Yes
Phthalates	No	Yes

If yes, please detail: _____

Signed: _____ Title: _____ Date: _____

Stryker Instruments:

Is this an OEM Supplier?

No	Yes
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If yes, MATL-fm-50035 must also be completed & additional approvals obtained.

Change **NOT** Approved, reason: _____

Approval given, requirements listed below are required prior to approval. Timing of the change to be coordinated by the buyer working with the unit and receiving.

Other Requirements and tentative timing (attach additional sheet(s) if necessary):

Proposed change requires an ECO. Refer to ECO#: _____ Date Initiated: _____

Stryker Approvals:

Commodity Buyer	_____	Date:	_____
Manufacturing Engineer	_____	Date:	_____
Quality Engineer	_____	Date:	_____
Prod. Eng. Manager	_____	Date:	_____
QA Manager	_____	Date:	_____
Other:	_____	Date:	_____

Approval does not change the Supplier's original contracted responsibility for ensuring that all Stryker Instruments originally designated engineering specifications and requirements are met. The supplier accepts full responsibility for the proposed change. Should such changes result in less than satisfactory performance than experienced prior to implementation, the Supplier will fully reimburse Stryker Instruments for all expenses incurred to correct the deficiency.