



## SUPPLY CHAIN ASSESSMENT

### SUPPLIER INFORMATION

Company Name:		
Address:		
City:	State:	Country (if outside USA):
Name & Title of person completing this assessment:		
Phone:	Email:	

### BUSINESS INFORMATION

Primary Product(s)/Services(s):		
Are there multiple business locations? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, please indicate the following: <input type="checkbox"/> same as above		
Headquarters (HQ) and/or Parent Company Name:		
HQ and/or Parent Company City:	State:	Country:

### QUALITY MANAGEMENT SYSTEM REGISTRATIONS/INFORMATION

<ul style="list-style-type: none"> <li>Attach a current copy of the certificate for each registered standard</li> <li>For policies not registered/certified, attach documentation supporting compliance (e.g., policy, quality manual, etc.)</li> </ul>		
<input type="checkbox"/> <b>AS9100D</b>	<input type="checkbox"/> Registered	<input type="checkbox"/> Compliant
<input type="checkbox"/> <b>ISO9001-2015</b>	<input type="checkbox"/> Registered	<input type="checkbox"/> Compliant
<input type="checkbox"/> <b>NQA-1-2017</b>	<input type="checkbox"/> Registered	<input type="checkbox"/> Compliant
<input type="checkbox"/> <b>NQA-1-2018 with NQA-1a-2009 with addendum</b>	<input type="checkbox"/> Registered	<input type="checkbox"/> Compliant
<input type="checkbox"/> <b>Other Standard (please list):</b>	<input type="checkbox"/> Registered	<input type="checkbox"/> Compliant
<input type="checkbox"/> We have Quality Assurance policies that are not affiliated with specific recognized standards.		
<input type="checkbox"/> We currently do not have any Quality Assurance policies, but will establish quality policies to meet this requirement if awarded a subcontract. (Suggested assistance and templates are available at <a href="https://www.nmptac.org/">https://www.nmptac.org/</a> or <a href="https://www.nmptac.org/resources/">https://www.nmptac.org/resources/</a> .)		

Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	1. Is your organization committed to delivering defect-free product?  If No or N/A please explain:
Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	2. Does your organization have a contract review process for evaluating customer purchase order requirements?  If No, please explain:
Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	3. Does your organization have a procedure for selection and approval of suppliers and vendors to ensure they satisfy obligations and provide quality products and services?  If No or N/A please explain:
Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	4. Does your organization conduct evaluations (e.g., audits, review of test results, etc.) or ongoing monitoring of suppliers/vendors?  If No or N/A please explain:
Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	5. Is there a process for communicating customer requirements with sub-tier suppliers when applicable?  If No or N/A please explain:
Yes <input type="checkbox"/> No <input type="checkbox"/>	6. Does your organization have a documented process for detecting, preventing, and addressing counterfeit items?  If No, please explain:  <input type="checkbox"/> N/A because we do not sell items/products.  <input type="checkbox"/> We currently do not have a counterfeit items process but will establish a documented policy to meet this requirement if awarded a subcontract. (Suggested assistance and templates are available at <a href="https://www.nmptac.org/">https://www.nmptac.org/</a> or <a href="https://www.nmptac.org/resources/">https://www.nmptac.org/resources/</a> .)

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Yes <input type="checkbox"/> No <input type="checkbox"/>	7. Is there a documented policy or procedure for protecting electronic data and systems from unauthorized viewing/use?  If <b>No</b> , please explain:
Yes <input type="checkbox"/> No <input type="checkbox"/>	8. Does your organization subscribe to and maintain antivirus product on all employee workstations? What antivirus software or products are used?  If <b>No</b> , please explain:
Yes <input type="checkbox"/> No <input type="checkbox"/>	9. Have you ever experienced a significant cybersecurity incident or data breach?  If <b>Yes</b> , please define the incident and describe remediation actions:
Yes <input type="checkbox"/> No <input type="checkbox"/>	10. Is there an independent quality organization or job roles for quality management/assurance?
Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	11. Is there a system or process to control and manage drawings, specifications, catalog items and customer orders?  If <b>No or N/A</b> please explain:
Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	12. Is there a system that assures the proper match of product with its certification and/or test data (if required by PO)?  If <b>No or N/A</b> please explain:
Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	13. Are parts and inventory secured and identified at <u>all</u> times while in your facility?  If <b>No or N/A</b> please explain:
Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	14. Is certification and test data based on objective criteria?  If <b>No or N/A</b> please explain:
Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	15. Are products packaged in a manner to prevent damage during shipment?  If <b>No or N/A</b> please explain:
Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	16. In your facility, are incoming and nonconforming products segregated from conforming products?  If <b>No or N/A</b> please explain:
Yes <input type="checkbox"/> No <input type="checkbox"/>	17. When requested, is there a process to investigate and resolve rejected products and/or services found by the customer and implement corrective action to prevent future reoccurrence?  If <b>No</b> , please explain:
Yes <input type="checkbox"/> No <input type="checkbox"/>	18. Is your company International Traffic in Arms Regulations (ITAR) registered?  If <b>No</b> , do you have procedures to handle ITAR requirements? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Check <u>all</u> types of inspection performed in this facility:  <input type="checkbox"/> <b>INCOMING</b> <input type="checkbox"/> <b>IN-PROCESS</b> <input type="checkbox"/> <b>FINAL</b> <input type="checkbox"/> <b>AUDIT</b>

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\_\_\_\_\_  
**Date:**

\_\_\_\_\_  
**Signature (person completing assessment)**

*This report may be shared with the Dept. of Energy (DOE), National Nuclear Security Administration (NNSA), and with other DOE/NNSA operating subcontractors.*

For NTESS/Sandia Internal Use Only		
Reviewed by:	Organization:	Date:
Status		
Approved: <input type="checkbox"/>	Conditional: <input type="checkbox"/>	Not Approved: <input type="checkbox"/>