

**MATERIAL WEAKNESS
OR STATUS OF CORRECTIVE ACTIONS**

COMPLETE ONLY APPLICABLE AREAS

1. General Information.

(a) Command/Activity:

UIC:

(b) Department:

(c) Functional Category:

(d) Work Process/Assessable Unit:

(e) Point of Contact:

2. Material Weakness or Status of Corrective Actions.

(a) Title of Material Weakness:

(b) Description of Material Weakness and impact on operations:

(c) Source employed to identify material weakness (process analysis, audit finding, inspection, investigation or management studies):

(1) Source:

(2) Date Identified:

(d) Corrective Actions: (Check applicable box, detail actions and milestones below.)
 Completed (Date: _____)
 Pending (Est. Completion Date: _____)
 Not correctable at this level (Note who must correct and why.)

(e) Explain the methodology that will be (has been) employed to certify the effectiveness of the corrective actions:

Estimated Date of Certification: