MATERIAL WEAKNESS
OR STATUS OF CORRECTIVE ACTIONS

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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:

NETC 5200/4 (04-04)

RESET

EMAIL TO: