



Australian Alpine Training Institute

CORRECTIVE ACTION RECORD

Date Raised: ___/___/___

CAR No: _____

REASON (S)	TICK
AQTF Standard Non-Compliance- People / Staff	
AQTF Standard Non-Compliance- Documents / Paperwork	
AQTF Standard Non-Compliance- Process / Procedure	
AQTF Standard Non-Compliance- Facilities	
Customer Appeal	
Student Complaint / Appeal	
Continuous Improvement and Actions from program and employer feedback	
Conditions of Registration review	
Student concern	
Quality Indicators review	
Legislation review	
Assessment Tools and Materials Validation	
Staff Professional Development and Gaps Analysis	
Currency of Training Packages review	
Learning and Assessment Strategies review	
Other (please specify)	

Section 1

Problem / Complaint / Concern / Appeal: (circle appropriate)

e.g. Employer Feedback:

Outcome of summary of employer survey (form IY)

Discuss progress

Adjust training plan and assessments

Identify further support

List the cause:

Section 2

Action to be taken:

Who:

When: ____/____/____

Action required by:

Signed: _____
Training & Quality Manager

Section 3

Other Improvements recommended

Action required by:

Signed: _____
Training & Quality Manager

Section 4

Agreed action completed and effective

Action required by:

Signed: _____
Training & Quality Manager

Feedback provided to staff / student / stakeholder that recommended action

Agreed action completed and effective

Chief Executive Officer: _____ Date: ____/____/____

Comments: _____