

<b>MATERIAL WEAKNESS OR STATUS OF CORRECTIVE ACTIONS</b> ----- COMPLETE ONLY APPLICABLE AREAS	
<b>1. General Information</b>	
a. Command/Activity:	UIC:
b. Department:	
c. Functional Category:	
d. Work Process/Assessable Unit:	
e. Point of Contact:	
<b>2. Material Weakness or Status of Corrective Actions</b>	
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.) <input type="checkbox"/> Completed (Date: _____) <input type="checkbox"/> Pending (Est. Completion Date: _____) <input type="checkbox"/> 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:	