

CERTIFICATE OF QUALIFICATION			EFFECTIVITY:	DATE:	COQ NUMBER:
COMPONENT:		PART NUMBER:		ELEMENT/SUBSYSTEM:	CRITICALITY:
VENDOR:		VENDOR P/N:		CERTIFICATION METHOD: <input type="checkbox"/> Analysis <input type="checkbox"/> Similarity <input type="checkbox"/> Test	
PART I - APPLICABLE DOCUMENTS					
A. COMPONENT SPEC.:			E. QUAL. TEST REPORT:		
B. CERTIFICATION REQUIREMENTS:			F. ANALYSIS REPORT:		
C. CERTIFICATION PLAN:			G. SIMILARITY REPORT:		
D. QUALIFICATION TEST PROCEDURE:			H. OTHER DOCUMENTATION:		
PART II - CONFIGURATION IDENTIFICATION					
A. QUAL. UNIT P/N:			B. SIMILAR ITEM P/N:		
IS IDENTICAL TO FLIGHT CONFIGURATION <input type="checkbox"/> Yes <input type="checkbox"/> No					
PART III - QUALIFICATION TEST FAILURES					
A. FAILURES HAVE BEEN ANALYZED AND CORRECTIVE ACTION COMPLETED: <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No				REPORTED IN:	
B. RETEST PERFORMED: <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No				REPORTED IN:	
C. NONCONFORMANCE APPROVED: <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No				REPORTED IN:	
THIS ITEM IS CERTIFIED FOR THE ABOVE NOTED EFFECTIVENESS					
PRIME CONTRACTOR			MARSHALL SPACE FLIGHT CENTER		
APPROVAL SIGNATURE	ORGN.	DATE	APPROVAL SIGNATURE	ORGN.	DATE
REMARKS (if any):					