

GINTELL (M) SDN BHD

ARTWORK DESIGN REVIEW FORM

DATE:

NAME:

DEPARTMENT:

DESIGN ITEM	YES/NO	DATE / INITIAL	Design review comments and necessary actions (if any)
Complies with the internal and external resource needs for the design and development of products (if any)			
Complies with the need to control interfaces between persons involved in the design and development process (if any)			
Complies with the need for involvement of customers and users in the design and development process (if any)			
Complies with the requirements for subsequent provision of artwork design (if any)			
Complies with the level of control expected for the design and development process by Customer/Artwork Requester (if any)			

Prepared by and date:

Reviewed by and date:

Approved by and date: