Consumer Electronics Casing Design ECR Form

ECR Number
Date
Requester
Department
Email
Phone
Product Information
Product Name
Model Number
Project Code
Change Description
Current Design Description
Proposed Change
Reason for Change
Assessment
Impact Analysis (Quality, Cost, Timeline, etc.)
The past Transpose (Quanty, Good, Timesime, etc.)
Affected Parts / Documents
Related Attachments
Sign-off
Design Engineer

Approval		
Date		