



Opportunities For Improvement (OFI) Submission Form

Goal: To improve/change a specific area or problem that you feel would help Fernco reach their lean objectives

Today's Date: _____

Your Name: _____ Department: _____ Shift: _____

DESCRIBE THE PROBLEM/ ISSUE:

YOU'RE SOLUTION IDEAS:

We may talk with you for clarification about the OFI you have submitted.

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FOR ADMINISTRATIVE USE ONLY

Date Received by Lean Initiatives Team: _____ Date Reviewed by Lean Initiative Team: _____

Dept. Mgr. _____ Continue: YES _____ NO _____ OFI #: _____

Inform submitter of next OFI step.