***Prior to submitting devices for Failure Analysis, please contact Customer Operations for an RMA Number!***

***For different failure modes, different request forms may be needed. All fields in this form are mandatory.***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **To:**  | **Failure Analysis** | **From:** |       | **To be completed by ADI:** |
| **Customer Complaint Date:** |       | **RMA Request Date:** |       | **RMA #:** |       |

***Contact Information:***

|  |  |  |  |
| --- | --- | --- | --- |
| **Customer:** |       | **Distributor:** |       |
| **Contact:** |       | **Contact:** |       |
| **Phone:** |       | **Phone:** |       |
| **Email:** |       | **Email:** |       |
| **Address:** |       |

***Device Information:***

|  |  |  |  |
| --- | --- | --- | --- |
| **Part Number:** |       | **Customer Part Number:** |       |
| **Sales Order #:** |       | **Customer Reference Number:** |       |
| **Lot Code** (from reel or box label): |       | **Purchase Order #:** |       |
| **Batch ID** (from reel or box label): |       | **Annual Volume Usage:** |       |
| **Top Marking(s):**(For more than one part use page 2) | **Line 1: Line 2: Line 3: Line 4: Bottom/Back Marking:**                             |

***Failure Information:***

|  |
| --- |
| **Number of devices returned for analysis** (no more than 10 units)**:**       |
| **Failure rate:**       Devices failed out of a total of       devices tested |
| **Application Maturity:** [ ]  New Design [ ]  Product in use since       (month and year) |
| **Point of Failure (check all that apply):** [ ]  **Incoming Inspection:** [ ]  Visual or [ ]  Electrical  [ ]  **Production Line Failure** [ ]  **0 km / 0 hour at End Customer:**       [ ]  **Field Failure after**       at End Customer:     [ ]  **Qualification/Reliability:** Stress Test:       Conditions:       Duration:       hours of operation [ ]  **Sample Evaluation** [ ]  **Resubmission of CFAR**       (where previous FA could not verify any failure, but the part is still failing at the customer) |
| **How was the failure verified after device was removed from the application before sending it for analysis?** [ ]  Failure was verified on component level outside the application [ ]  No additional verification was done [ ]  Device was put in a known good application where it also failed [ ]  Other (specify details below) |

***Describe the observed failure as detailed as possible:***

Please provide the expected versus observed behavior, input/output voltages/currents, failing parameter(s), temperature. Attach circuit diagrams, measurement results, waveforms. This will help the Failure Analysis lab to duplicate the failure on the bench on a stand-alone device, especially if this is a resubmission of an FA where the failure could not be found, but the part is still failing in the customer application.

< Enter all failure details here >

***Marking Information for more than one part:***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Quantity** | **Top Marking** | **Bottom/Back Marking** | **Batch ID**(From reel label) | **Purchase Order #** |
|    | Line 1:      Line 2:      Line 3:      Line 4:       |       |       |       |
|    | Line 1:      Line 2:      Line 3:      Line 4:       |       |       |       |
|    | Line 1:      Line 2:      Line 3:      Line 4:       |       |       |       |
|    | Line 1:      Line 2:      Line 3:      Line 4:       |       |       |       |
|    | Line 1:      Line 2:      Line 3:      Line 4:       |       |       |       |
|    | Line 1:      Line 2:      Line 3:      Line 4:       |       |       |       |
|    | Line 1:      Line 2:      Line 3:      Line 4:       |       |       |       |
|    | Line 1:      Line 2:      Line 3:      Line 4:       |       |       |       |
|    | Line 1:      Line 2:      Line 3:      Line 4:       |       |       |       |
|    | Line 1:      Line 2:      Line 3:      Line 4:       |       |       |       |