New __ Revision __ Date:___ / ___ / _____

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Dept.	Name

Approved		Standard Work Instruction Sheet	Part No.		Volume Required: _____ / shift
			Name		Operator Number: _____ of _____

No.	Work Description	Quality		Key Points "Make or break" for - Quality - Safety - Ease of work	Time		Takt Time		Standard WIP		SWIP = Safety = Quality =	Cycle Time	
		Check	Gage		Minutes	Seconds							
				Total Time									

Safety Instructions	
	Tools:
	Certifications:
	Abnormality Response:
	Special instructions: