

Innovation Suggestion Form				Idea # _____	
Date		Team member		Team leader	
Check One	Product _____	Process _____	People _____	Cost _____	New Idea _____
Target process(es)			Target product(s)		
Picture/drawing of current condition			Picture/drawing of target condition		
Description of current condition			Description of target condition		
<i>Team leader / manager to complete</i>					
Estimated impact			What we learned as by implementing this idea		
Impact verified by			Re-application opportunities		