**DEVIATION / VARIANCE FORM**

Name of Study: Click here to enter text.

Sample Type: Choose an item. Sample ID: Click here to enter text.

Draw Date: Click here to enter a date. Draw Time: Click here to enter text.

Brief description of deviation/variance:

Click here to enter text.

Coordinator notified: Click here to enter text.

Date: Click here to enter a date. Time: Click here to enter text. By: Click here to enter text.

Brief description of corrective action:

Click here to enter text.