

<b>Master Data of Organisation</b>			
Name of Organisation	<b>KONGUADU EDUCATIONAL INSTITUTIONS KONGUNADU COLLEGE OF ENGINEERING AND TECHNOLOGY (KNCET) KONGUNADU POLYTECHNIC COLLEGE (KPC) KONGUNADU COLLEGE OF EDUCATION (KCE)</b>		
Name of corporate group (in case of multi site organization only)	NA		
Street	Namakkal-Trichy Main Road, Tholurpatti Post, Thottiam Taluk,		
Postcode / Town / Country	Trichy (Dt) - 621215, Tamilnadu, India		
Contact	Dr.PSK. R.Periaswamy, Chairman ; Dr.V.Gopinath, HOD Agri. Engg		
E-Mail	chairman@kongunadu.org ; hodag@kongunadu.ac.in		
Phone	9790092837		
System documentation: (Revision / Issue)	QMSM Issue No: 1 Rev 02 Dt. 10.03.2021		
Shift operation	no shift operation		
Language	English / Tamil		
Peculiarities	None		
<b>Multi Site Organisation</b>			
Selection of sites to be audited by sampling procedure	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> n.a.
An adequate listing of all sites in the scope(s) including all valid and relevant information in each case is part of the audit file	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> n.a.	

<b>Audit profile</b>		
Contract ID (ZE):	---	
Standards under contract / Audit type	ISO 9001 : 2015 1. Surveillance audit <input type="checkbox"/> Transition audit	--- : --- --- <input type="checkbox"/> Transition audit
	--- : --- --- <input type="checkbox"/> Transition audit	--- : --- --- <input type="checkbox"/> Transition audit
Audit cycle	12 months	
Audit team leader	Suresh Ramalingam – 4407336 -- RS	
E-Mail Audit team leader	r.suresh@tuvindia.co.in	
Audit team		
Technical expert		
Trainee		
Observer		

<b>Audited Standards</b>				
<b>ISO 9001 : 2015</b>	<b>1<sup>st</sup> Surveillance Audit</b>			
Certificate ID (TP): 44 100 21393282, 44 100 21393282/01, & 44 100 21393282/02	Valid until: 08.08.2027			
Scope:				
<b>KNCET</b> : Imparting Education Leading to Graduate, Post Graduate and Ph.D. Degree in Engineering and Technology Courses.				
<b>KPC</b> : Imparting Education Leading to Diploma in Engineering Courses				
<b>KCE</b> : Imparting Education Leading to Degree in Bachelor of Education				
Industry / Sector (EA, TB, ...)	Teaching / Education – EAC 37			
Non-applicability of chapters:	NIL			
No. of considered persons:	115	No. of sites (incl. HQ): 3		
Lead auditor:	Suresh Ramalingam	Audit ID (ZA): CHE/AUD/25-26/3227		
--- : ---	---			
Certificate ID (TP):	Valid until:			
Scope:				
Industry / Sector (EA, TB, ...)				
Non-applicability of chapters:				
No. of considered persons:	No. of sites (incl. HQ):			
Lead auditor:	Audit ID (ZA):			

--- : ---	---
Certificate ID (TP):	Valid until:
Scope:	
Industry / Sector (EA, TB, ...)	
Non-applicability of chapters	
No. of considered persons:	No. of sites (incl. HQ):
Lead auditor:	Audit ID (ZA):
--- : ---	---
Certificate ID (TP):	Valid until:
Scope:	
Industry / Sector (EA, TB, ...)	
Non-applicability of chapters:	
No. of considered persons:	No. of sites (incl. HQ):
Lead auditor:	Audit ID (ZA):

<b>Definition of unit for duration and time</b>		
Applied unit	Days	One audit day covers 8 audit hours
<b>Audit Details</b>		
Sites	3 Nos – ( KNCET, KPC & KCE) Namakkal-Trichy Main Road, Tholurpatti Post, Thottiam Taluk, Trichy (Dt) - 621215, Tamilnadu, India	
Audit date	28.07.2025 - 29.07.2025	
Audit duration	2,00 person Days on site (incl. remote locations as applicable) inclusive 0,00 person Days on site for audit stage 1 (separate report)	

<b>Application of methods and tools in remote auditing</b>			
Conducted as a remote audit	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Partly	<input type="checkbox"/> Total
If "Partly": The remote parts shall be made clearly identifiable in the plan table.			
	<input type="checkbox"/> MS Teams	<input type="checkbox"/> Cisco WebEx	<input type="checkbox"/> Zoom
Technologies used for remote audit	<input type="checkbox"/> Other on request of client: <b>In this case, client takes over the responsibility for any required activity in information security.</b>		

<b>1. Audit Day (Date) 28.07.2025 &amp; 29.07.2025</b>						
Nr.	Time <sup>1)</sup>	Site / shift / Business unit	Processes (optional entry)	Auditor (Initials )	Contact <sup>2)</sup>	Focus / Standard Requirement / Chapter / Clause ISO 9001:2015
1	28.07.2025 09.00-09.15	Day 1 Thottiam / KNCET	Opening meeting	RS	All concerned (KNCET/KPC/KCE)	

2	09.15-11.00		Top Management, QMS, Quality Policy, Objectives, MR, IA, Customer satisfaction, Document control and Records, Communication, CAPA, Continual Improvement	RS		4.1,4.2,4.3,4.4,5.1,5.2,5.3,6.1,6.2, 6.3,7.1.1,7.1.5,7.1.6,7.4,7.5, 9.1,9.2,10.1,10.3,10.3
3	11.00-12.30		Student Admissions, Review, Communication, Customer Property, AICTE/DOTE Approvals, Students Feedback, Parents	RS		8.1,8.2,8.5.1,8.5.3,8.5.4, 9.1,10.2,10.3.
4	12.30-13.00		Lunch			
5	13.00-14.00	KNCET	Design of Syllabus for KNCET			
6	14.00-15.30		UG - Syllabus Planning & Execution, Course Execution, Performance Monitoring & Control, Competence, Class committee meeting, Data Analysis, NC Control, CAPA, Improvement	RS		8.1,8.5.1,8.5.2,8.5.3,8. 5.4,8.5.5,8.5.6,8.5.6,8. 6,8.7,10.1,0.2,10.3
7	15.30-17.15		PG - Course Execution, Performance Monitoring & Control, Competence, Class committee meeting, Data Analysis, NC Control, CAPA, Improvement	RS		8.1,8.5.1,8.5.2,8.5.3,8. 5.4,8.5.5,8.5.6,8.5.6,8. 6,8.7,10.1,0.2,10.3
8	17.15-17.30		Audit Briefing - Day 1	RS	All concerned	
9	17.30		End of Day 1			
10	29.07.2025	Day 2	Purchase Process and Outsourcing, Incoming Inspection & Stores	RS		7.1.2,7.1.5,7.2,7.3,7.4,
11	09.00-10.00	KPC	Student Admissions, Review, Communication, Customer Property, AICTE/DOTE Approvals, Students Feedback, Parents	RS		8.1,8.2,8.5.1,8.5.3,8.5.4, 9.1,10.2,10.3.
12	10.00-12.00		Education Realization process – Diploma	RS		8.1, 8.5.1, 8.5.2, 8.5.3, 8.5.4, 8.5.6, 7.1.3, 7.1.5,7.5.3, 8.6, 8.7, 9.1.3, 10.1, 10.2,10.3
13	12.00-13.00		HR, Training, Statutory Requirements, Faculty Development Program	RS		7.2
14	13.00-13.30		Lunch			
15	13.30-15.00	KCE	Education Realization process – B.Ed	RS		8.1, 8.5.1, 8.5.2, 8.5.3, 8.5.4, 8.5.6, 7.1.3, 7.1.5,7.5.3, 8.6, 8.7, 9.1.3, 10.1, 10.2,10.3
16	15.00-16.00		Exam Cell	RS		8.1, 8.5.1, 8.6
17	16.00-16.45		Library	RS		8.5.2, 8.5.4
18	16.45-17.00		Top Management	RS		5.1,7.1, 8.1, 9.1, 10.1, 10.2, 10.3

19	17.00-17.15		Auditor time	RS		
20	17.15-17.30		Closing meeting	RS	All concerned	
21	17.30		Close			
<sup>1)</sup> from to; Modifications are possible				<sup>2)</sup> to be defined by client		
<p>Kindly provide justification for beyond normal working hours not covered during the audit :</p> <p>IF Not Applicable, kindly mark it as NA</p> <p>Kindly provide justification if shifts were not covered in your audit. In case there is any extension to the auditing hours beyond 8 hours, kindly record the justification regarding rationale for the same :</p> <p>IF Not Applicable, kindly mark it as NA</p>						

<b>Distribution</b>	
Organisation, audit team, audit documentation,	
<b>Editor</b>	
Date:	16.07.2025
Person in charge:	 R. Suresh

<b>Objective evidences</b>	
Please have the evidences listed below ready for access by the audit team.	
As required (but at least in initial/recertification or extension audits) copies of these objective evidences shall be provided to the audit team in an appropriate form to be included in the audit file.	
If necessary, confidential information in these dedicated copies may be blacked.	
<ul style="list-style-type: none"> <li>▪ Valid entry in professional or commercial register (or comparable evidence) - if applicable</li> <li>▪ Organization chart/evidence of organization</li> <li>▪ Company policy for audited management system(s)</li> <li>▪ Overview of management system documentation (e.g. table of contents or presentation of the structure of the management system documentation, process map)</li> <li>▪ Result of management review (e.g. cover sheet or table of contents with date and signature)</li> <li>▪ Current annual planning of internal audits and evidence of audit report(s) (e.g.: cover sheet with date and signature)</li> <li>▪ Standard-specific evidence, as applicable (e.g. ISO 14001: extract of environmental permit register; ISO 27001: statement of applicability, ISO 45001: accident statistics; ISO 50001: energy report as cover sheet with date and signature or evidence of continual energy performance improvement)</li> </ul>	

**Explanations:**

## Audit objectives:

- determination of the conformity of the management system of the organization with the requirements of the aforementioned standards in order to achieve or maintain certification through an independent and accredited certification body;
- determination of the ability of the management system to ensure the organization meets applicable statutory, regulatory and contractual requirements;
- determination of the effectiveness of the management system to ensure the organization can reasonably expect to achieve its specified objectives;
- identification of areas for potential improvement of the management system.

The audit report is drawn up in German or English language and should describe if and how far the requirements of the aforementioned standards are fulfilled.

If some requirements of the aforementioned standards are assessed as "not fulfilled" in the audit, it is possible to demonstrate subsequent fulfilment in the form of a review of documents submitted later and/or in the form of a follow up audit at the company premises, depending on the type of nonconformity.

Any objections to the planned form of the audit should be discussed and solved between the organisation and the audit team leader before the audit. Any objections to members of the audit team shall be communicated to the certification body.

All members of the audit team have declared to the certification body in writing that they will keep confidential all information which becomes known to them during the course of the audit and that no inappropriate conflict of interest exists (see Annex).

**Annexes (for certification body only):**

- List of participants
- Declarations of impartiality/confidentiality

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E-Mail	chairman@kongunadu.org ; hodag@kongunadu.ac.in
Phone	9790092837
System documentation: (Revision / Issue)	QMSM Issue No: 1 Rev 03 Dt. 10.03.2025
Shift operation	no shift operation
Language	English / Tamil
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Audit Profile		
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Audit team leader	Suresh Ramalingam - 4407336	
E-Mail audit team leader	r.suresh@tuvindia.co.in	
Audit team		
Technical expert		
Trainee		
Observer		

Audited Standards	
<b>ISO 9001 : 2015</b>	<b>1<sup>st</sup> Surveillance Audit</b>
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Industry / Sector (EA, TB, ...) Teaching / Education – EAC 37	
Non-applicability of chapters: NIL	
No. of considered persons: 115	No. of sites (incl. HQ): 3
Lead auditor: Suresh Ramalingam	Audit ID (ZA): CHE/AUD/25-26/3227
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Industry / Sector (EA, TB, ...)	
Non-applicability of chapters:	
No. of considered persons:	No. of sites (incl. HQ):
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No. of considered persons:	No. of sites (incl. HQ):
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Audit Details	
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Audit date	28.07.2025 - 29.07.2025
Audit duration	2,00 person Days on site (incl. remote locations as applicable) inclusive 0,00 person Days on site for audit stage 1 (separate report)

Application of Methods and Tools in remote Auditing			
Conducted as a remote audit	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Partly	<input type="checkbox"/> Total
Technologies used for the remote audit	<input type="checkbox"/> MS Teams	<input type="checkbox"/> Cisco WebEx	<input type="checkbox"/> Zoom
<input type="checkbox"/> Other on request of client: <b>In this case, client takes over the responsibility for any required activity in information security.</b>			

Details about the remote Audit (if applicable)
The audit was performed applying technology for information and communication ("remote") at 0%.
Effectiveness and efficiency of the remote-part was ensured by
<input type="checkbox"/> experienced application of engaged technology; <input type="checkbox"/> the consecutive processing of the single sessions with the individual units; <input type="checkbox"/> the online interviews with different people from diverse units and various hierarchical levels; <input type="checkbox"/> the separation of the audit team in individual online sessions; <input type="checkbox"/> reviewing an adequate sample of documented processes and/or information; <input type="checkbox"/> the discussion of appropriate charts, diagrams, slides or any other relevant information; <input type="checkbox"/> the presentation and discussion of photos, videos and audios of issues, being prepared on detailed guidance and governance of the audit team.
Details about reviewed information or documents, interviewed persons, content of videos & photos etc. are recorded in the report or (handwritten) notes.
If the audit was performed partly remote, the corresponding sessions are identified unambiguously in the audit plan.

**Distribution/Confidentiality/Rights of Ownership/Limitations/Responsibilities**

This report is sent to the certification body or bodies, the members of the audit team and the audit representative of the organisation. All documents (such as this report) regarding the certification procedure are treated confidentially by the audit team and the certification body. This audit report remains the property of the certification body.

An audit is a procedure based on the principle of random sampling and cannot cover each detail of the management system. Therefore nonconformities of weaknesses may still exist which were not expressly mentioned by the auditors in the final meeting or in the audit report.

The responsibility for continuous effective operation of the management system always rests solely with the audited and certified organisation.

Salvo clause:

The audit report will be left to the organisation at the end of the audit - subject to approval by the certification body. The independent veto process may cause modifications or additions. In these cases a modified revision will be sent to the audited organisation.

**Annex/Enclosures**

Annex/  
corresponding audit documentation

<input type="checkbox"/>	Questionnaire(s) / Checklist(s)
<input type="checkbox"/>	Additional annexes, number

Table of Results

Audit Results							
ISO 9001:2015		--- : ---		--- : ---		--- : ---	
Clause	RsIt.*	Clause	RsIt.*	Clause	RsIt.*	Clause	RsIt.*
4.1	1						
4.2	1						
4.3	1						
4.4	1						
5.1	1						
5.2	1						
5.3	1						
6.1	1						
6.2	1						
6.3	1						
7.1	1						
7.2	2						
7.3	1						
7.4	1						
7.5	1						
8.1	1						
8.2	1						
8.3	1						
8.4	1						
8.5	2						
8.6	1						
8.7	1						
9.1	1						
9.2	1						
9.3	1						
10.1	1						
10.2	1						
10.3	1						
Addition of climate change consideration to management system standards							RsIt.*
▪ consideration of climate change issues (clauses 4.1 and 4.2) – mandatory, if applicable							
Additional requirements in accordance to ISO 17021:2015							RsIt.*
▪ internal audits and management review Last IQA was conducted from 05.07.2025 to 25.07.2025 & MRM was conducted on 26.07.2025.							1
▪ review of actions taken on nonconformities identified in previous audit CM/NC not raised in previous audit							1
▪ responsiveness to complaints							1
▪ effectiveness of the management system with regard to fulfilment of objectives							1
▪ progress of planned activities aimed at continual improvement							1
▪ the client's management system ability and its performance regarding meeting of applicable requirements							2
▪ operational control of the client's processes							2
▪ review of any changes including the management system documentation							1
▪ use of marks and/or any other reference to certification Verified usage of TUV India Logo in company letter head & found satisfactory.							1

RsIt.\* (Result):

0 = not audited; 1 = fulfilled; 2 = basically fulfilled/ potential for improvement; 3 = not fulfilled/ nonconformity; - = not applicable/ excluded.

Details: see section „Audit findings“

Mandatory Elements from A00VA02		
<b>Temporary sites</b>		
a) Are temporary sites (i.e. installation sites, project locations etc.) available?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b) If yes: which one are visited?	----	
<b>Objective evidences</b>		
In any regular audit the audit team shall see and review the following objective evidences. To confirm, the corresponding revision information is registered in column „Edition“ That can become applicable as well for some or all the listed objectives in special audits, e.g. for extensions or after transferring sites. At least in <b>initial/recertification or extension audits</b> (or when necessary) these objective evidences/documents are attached adequately to the audit file and uploaded into the release workflow. In any other audit it is accepted to record the revision information only.		
Title/content	Edition	Attached
Entry in professional or commercial register (or comparable evidence) - if applicable		<input type="checkbox"/>
Organization chart/evidence of organization		<input type="checkbox"/>
Company policy for audited management systems		<input type="checkbox"/>
Overview of management system documentation (e.g. table of contents or presentation of the structure of the management system documentation, process map)		<input type="checkbox"/>
Result of management review (e.g. cover sheet or table of contents with date and signature)		<input type="checkbox"/>
Current annual planning of internal audits		<input type="checkbox"/>
Evidence of internal audit report(s) (e.g.: cover sheet with date and signature)		<input type="checkbox"/>
Standard-specific evidence, as applicable ISO 14001: extract of environmental permit register; ISO 27001: statement of applicability; ISO 45001: accident statistics; ISO 50001: energy report as cover sheet with date and signature Others:		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Confidential information in the attached evidences may be blacked.		

Standard specific Results	
<input type="checkbox"/>	Additional standard specific audit results and/or information are recorded in corresponding „Supplemental audit reports“ (e.g. for ISO 27001 or ISO 50001).

**ORGANISATION PROFILE****COMPANIES PROFILE CONTAINING FOLLOWING INFORMATION**

**KONGUADU EDUCATIONAL INSTITUTIONS** was established in the year 2007 under Kongunadu Educational Chairitable Trust headed by Chairman Dr. Dr.PSK. R.Periaswamy. They are engaged in providing Educational Services in Engineering, Technology & B.Ed courses. The Institution is equipped with Lecture Halls, Teaching Aids, Practical Labs, Accommodation facility, Canteen & Good Ambience to support their Educational Services.

**Audit Location(s):**

Namakkal-Trichy Main Road, Tholurpatti Post, Thottiam Taluk, Trichy (Dt) - 621215, Tamilnadu, India

- INFORMATION IF MULTI-SITE SCHEME IS APPLIED : No

- IF YES, LIST OF AUDITED SITES (E.G. IN AUDIT PROGRAM) :  
AND LIST OF CERTIFIED SITES BY THIS AUDIT AS ENCLOSURES

- 1) KONGUNADU COLLEGE OF ENGINEERING AND TECHNOLOGY (KNCET)
- 2) KONGUNADU POLYTECHNIC COLLEGE (KPC)
- 3) KONGUNADU COLLEGE OF EDUCATION (KCE)

- NUMBER OF EMPLOYEES (NUMBER OF EFFECTIVE EMPLOYEES) INCLUDING LOANED EMPLOYEES AND SUBCONTRACTORS (FULL TIME EQUIVALENTS) AS PER EACH LOCATION :

KNCET -- 70 employees with No shift Operation.

KPC – 35 employees with No shift operation

KPC – 10 employees with No shift operation

- RANGE OF PRODUCTS :

Admission, Framing of Syllabus, Planning – Time table, Teaching, Exam, Results, Issue of Certificates, FDP, Library, Purchase, Maintenance

- CLIENTS / TOP CLIENTS / MAJOR CLIENTS :

10<sup>th</sup>/12<sup>th</sup> students, Graduates, Post Graduates

- IMPORTANT PROCESSES :

Enquiry/order Review – Planning – Purchase / Receipt of RM – Inspection – Production – Final Inspection– Packing – Dispatch

- ~~IMPORTANT ENVIRONMENTAL ASPECTS (ISO 14001) :~~

- ~~IMPORTANT OCCUPATIONAL HEALTH & SAFETY RISKS:~~

- CERTIFIED SINCE ? : 2021

**SUMMARY OF RESULTS**

This audit was performed for the Certification audit in accordance to ISO 9001:2015. 1st Surveillance Audit was conducted on 28.07.2025 & 29.07.2025 for 2.00 man days. The additional requirements (e.g.: context of an organization, interested parties, risks and opportunities, planning of chances, organizational knowledge, outsourced processes, post-delivery activities) were assessed in this audit.

- No Non Conformances were found in the Audit. Based on the findings, it is ascertained that the Documented System, Processes & the Practices were meeting the requirements of ISO 9001: 2015 Standards.

Hence, Maintenance of Certificate is recommended.

- **ASPECTS OF THE COMPANY AND/OR THE AUDIT TO BE HIGHLIGHTED :**
- **ISO 9001 / ISO 14001 – STATEMENT ON THE IMPLEMENTATION OF THE STANDARD REQUIREMENTS**

- STRATEGICAL DIRECTION OF THE ORGANISATION (CONTEXT, STAKEHOLDER ANALYSIS) :
- **DOCUMENTED IN CLAUSE 4.1 OF QMSM.**

**INTERNAL ISSUES: EMPLOYEE RETENTION**

**EXTERNAL ISSUES : COMPETITION, REMOTE LOCATION ( RURAL AREA)**

**CLIMATE CHANGE CONSIDERED.**

- RISK-BASED APPROACH (ANALYSIS OF RISKS AND OPPORTUNITIES) :

**DOCUMENTED IN AC-27 REV 01**

**POOR INTAKE IN POLYTECHNIC COLLEGE – APPROACHED MANY SCHOOLS & PANCHAYAT PRESIDENTS IN NEARBY PLACES TO IMPROVE ADMISSION.**

**RURAL AREA – COMMUNICATION IN ENGLISH LANGUAGE IS POOR**

- CONTROL OF EXTERNALLY PROVIDED PROCESSES :

**DOCUMENTED IN QSP/02/11. VERIFICATION BY INCOMING INSPECTION UPON RECEIPT OF MATERIAL. SUPPLIER PERFORMANCE RATING DONE FOR ALL RECEIPTS. SUPPLIER EVALUATION DONE BY PAST SUPPLIES, ISO 9001 CERTIFICATE, CUSTOMER APPROVED VENDOR, SITE AUDIT.**

**INCOMING MATERIAL INSPECTION LIKE RAW MATERIALS, MAINTENANCE SPARES, CONSUMABLE IS CARRIED OUT BY CORRELATION OF MATERIALS WITH PO & MTCs, REVIEW OF MTCs, DIMENSION MEASUREMENT, VISUAL INSPECTION.**

- **SYSTEMATICAL KNOWLEDGE MANAGEMENT : DOCUMENTED IN CLAUSE 7.1.6 OF QMSM.**

**INTERNAL SOURCES: INTELLECTUAL PROPERTY, KNOWLEDGE GAINED FROM EXPERIENCE, LESSONS LEARNT FROM FAILURES AND SUCCESSFUL PROJECTS**

**EXTERNAL SOURCES: STANDARDS , GATHERING KNOWLEDGE FROM CUSTOMERS & EXTERNAL PROVIDERS.**

- FULFILMENT OF COMPLIANCE OBLIGATIONS :

**VERIFIED. GST : 33AABTK2646K2ZL**

- LEGAL AND OTHER OBLIGATIONS : **SATISFACTORY**

- **CONSIDERING THE LIFE CYCLE PERSPECTIVE WHEN DETERMINING THE SIGNIFICANT ENVIRONMENTAL ASPECTS :**

- **MEASUREMENT AND CONTINUAL IMPROVEMENT OF THE ENVIRONMENTAL PERFORMANCE :**

## • ISO 45001 STATEMENT INDICATING THE IMPLEMENTATION OF THE STANDARD REQUIREMENTS :

(PLEASE STRIKE OFF IF NOT APPLICABLE).

- STRATEGICAL DIRECTION OF THE ORGANISATION (CONTEXT, UNDERSTANDING THE NEEDS AND EXPECTATIONS OF WORKERS AND OTHER INTERESTED PARTIES) :
- CONSULTATION AND PARTICIPATION OF WORKERS :
- HAZARD IDENTIFICATION AND ASSESSMENT OF RISKS AND OPPORTUNITIES :
- PLANNING, ACTIONS TO ADDRESS RISKS AND OPPORTUNITIES :
- MANAGEMENT OF CHANGE :
- CONTRACTORS, OUTSOURCING :
- CONTINUAL IMPROVEMENT OF OH&S PERFORMANCE :
- CAPABILITY OF THE OH&SMS TO MEET ITS COMPLIANCE OBLIGATIONS :

## STATEMENT ON THE REQUIREMENTS OF IAF MD 22 CLAUSE G 9.4.4.2 (MANDATORY DETAILS TO BE FILLED AS BELOW) -

PERSON RESPONSIBLE FOR MONITORING EMPLOYEES' HEALTH	NAME :	
	FUNCTION :	
	<input checked="" type="checkbox"/>	HAS BEEN INTERVIEWED IN THE AUDIT, JUSTIFICATION IN CASE INTERVIEWED REMOTELY _____
	<input type="checkbox"/>	HAS ATTENDED THE CLOSING MEETING
<input type="checkbox"/>	HAS NOT ATTENDED THE CLOSING MEETING; JUSTIFICATION, IN CASE NOT ATTENDED THE CLOSING MEETING : _____	

PERSON RESPONSIBLE WITH LEGAL RESPONSIBILITY FOR OCCUPATIONAL HEALTH AND SAFETY	NAME :	
	FUNCTION :	
	<input type="checkbox"/>	HAS BEEN INTERVIEWED IN THE AUDIT, JUSTIFICATION IN CASE INTERVIEWED REMOTELY _____
	<input type="checkbox"/>	HAS ATTENDED THE CLOSING MEETING
<input type="checkbox"/>	HAS NOT ATTENDED THE CLOSING MEETING; JUSTIFICATION, IN CASE NOT ATTENDED THE CLOSING MEETING : _____	

EMPLOYEES REPRESENTATIVE WITH RESPONSIBILITY FOR OCCUPATIONAL HEALTH AND SAFETY	NAME :	
	FUNCTION :	
	<input type="checkbox"/>	HAS BEEN INTERVIEWED IN THE AUDIT, JUSTIFICATION IN CASE INTERVIEWED REMOTELY : _____
	<input type="checkbox"/>	HAS ATTENDED THE CLOSING MEETING
	<input type="checkbox"/>	HAS NOT ATTENDED THE CLOSING MEETING; JUSTIFICATION, IN CASE NOT ATTENDED THE CLOSING MEETING : _____

A) SUMMARY OF INTERVIEW HAD WITH THE MANAGEMENT LEGALLY RESPONSIBLE FOR OCCUPATIONAL  
HEALTH AND SAFETY : **(KINDLY INDICATE THE OUTCOME OF THE DISCUSSION)**

B) SUMMARY OF INTERVIEW HAD WITH THE PERSONNEL RESPONSIBLE FOR MONITORING EMPLOYEES'  
HEALTH : **KINDLY INDICATE THE OUTCOME OF THE DISCUSSION**

C) SUMMARY OF INTERVIEW HAD WITH THE EMPLOYEES' REPRESENTATIVE(S) WITH RESPONSIBILITY FOR OCCUPATIONAL  
HEALTH AND SAFETY; IF NECESSARY: DOCUMENTATION OF JUSTIFICATION IN CASE OF ABSENCE OF SINGLE AUDIT  
PARTICIPANTS DURING CLOSING MEETING : **KINDLY INDICATE THE OUTCOME OF THE DISCUSSION**

## Conclusion

Taking into account the audit findings documented below, the organisation's size and structure, objectives, scope of the management system, processes and results achieved, the organisation has demonstrated that it operates its management system to ensure conformity with its own requirements, the requirements of interested parties, applicable legal requirements and appropriate requirements from the management system standards.

This includes in particular: the objective evidences,

- the policies and objectives and their implementation in the organisation, Verified Quality policy documented in Clause 5.2 of QM & Quality objectives documented in Annexure III of QM. Verified its implementation in the organization.
- the processes existing in the management system and their interactions, Processes and their interactions are documented in Annexure II of QM.
- the resource management, Documented in clause 7.1 of QM. Resources found adequate.
- the measuring and analysis (incl. sample of indicators), Departmental objectives are set. Measured and analyzed. Documented in Annexure III of QM.
- the continual improvement process as well as Continual improvement evidenced in MRM & IQA findings & implementation.
- the recording system (p.r.n. including standard specific objective evidences).
- 4 Level documented structure being followed. Level 1 – QM, Level 2 – QSP, Level 3 – WI/SOP/QAP, Level 4 - Format.

The implementation and the effectiveness of the management system and the processes for providing services/product realisation or to realize the objectives were assessed by the audit team by means of on-site inspection and examination of documented information on a random sample basis.

<b>Audit Findings</b>		
<b>Notes for the findings</b>		
The evaluation of the audit findings basically follows the scheme shown below:		
Stage	Classification	Meaning
NC A	<b>Major Nonconformity</b> (Nonconformity A "major")	<p>Nonconformities could be classified as major in the following circumstances:</p> <ul style="list-style-type: none"> <li>if there is a significant doubt that effective process control is in place, or that products or services will meet specified requirements,</li> <li>a number of minor nonconformities associated with the same requirement or issue could demonstrate a systemic failure and thus constitute a major nonconformity.</li> </ul>
NC B	<b>Minor Nonconformity</b> (Nonconformity B "minor")	Nonconformities could be classified as minor, if these do not affect the capability of the management system to achieve the intended results.
OFI	Opportunity for improvement	Items which would allow optimisation of the management system in relation to the requirements of the relevant standard. It is recommended that the company implements these items.
GP	Positive aspects / Good Practice	Positive aspects of the management system worthy of special mention (see also point 4.3 if applicable).
CM	Comments	Special situation and information to be traced in next audit.
<b>If applicable: Guidance for management of nonconformities</b>		
<p>Identified nonconformities are each documented in a nonconformity report ("Management of a nonconformity"), which are part of this audit report as annexes.</p> <p>The audit team uses the nonconformity reports after the audit to track the processing status and also documents in them the final assessment results for the nonconformities concerned.</p> <p>The organization shall perform a root cause analysis for any nonconformity and define adequate corrective actions. Root cause analysis, corrective actions including action plan for implementation and - if applicable - objective evidence for performed corrections or containment actions shall be submitted electronically to nominated lead auditor in charge on time to agreed deadline (latest six weeks after last day of the audit). The lead auditor will review these documents and shall inform organisation about the result.</p> <p>The auditee organisation shall implement the corrective actions as defined in the approved action plan and review the effectiveness of implemented actions.</p> <p>In the case of major nonconformities (NC A) the lead auditor shall verify the complete and effective implementation of action plan until agreed date (latest three months after last day of the audit). On decision of the auditor depending on type and extent of identified nonconformity, this can be done in a follow up audit on site or in a desktop-review of submitted documentation (objective evidence).</p> <p>For minor nonconformities (NC B) it can be agreed to perform the verification of effective implementation of action plan in the next regular audit.</p> <p>If any nonconformity applies to more than one of the audited standards, it may be recorded in a common nonconformity report, but shall be counted in the audit report for each applicable standard. The number of nonconformity reports may therefore be less than the number of nonconformities.</p>		

Summary for nonconformities			
Standard	Raised in this audit		To be verified from previous audit
	Number NC A	Number NC B	Number NC
ISO 9001 : 2015	0	0	0
--- : ---	0	0	0
--- : ---	0	0	0
--- : ---	0	0	0
Total	0	0	0
Total number of nonconformity-reports raised in this audit:			0
<input type="checkbox"/> At least one of the nonconformities is graded as „generic“ and is counted in more than one corresponding audited standard.			
<input type="checkbox"/> During this audit the implementation of corrective actions and effectiveness of nonconformities of previous audit was verified. The records are attached to this audit file.			

No	OFI (Opportunity for Improvement)	Area / Process	Standard: clause
1.	Competency matrix may be updated for Staffs. (Polytechnic)	Training	ISO 9001:2015 7.2
2.	Mechanism for monitoring the availability of Reference books in Library may be improved. ( B Ed)	Library	ISO 9001:2015 8.5.4
3.	Clarity on Question paper pattern in N Scheme may be improved (Polytechnic college).	Exam	ISO 9001:2015 8.5.1
4.	Recording of Corrective actions details for deviation in lesson plan date & actual delivery date may be improved. ( Polytechnic)	Teaching	ISO 9001:2015 8.5.1

No	GP (Good Practice)	Area / Process	Standard: clause
1.	Top Management commitment & Very Good Infrastructure	Top Management	ISO 9001:2015 5.1.1 / 7.1
2.	Customer Focus & Competent Personnel	Team / Human Resource	ISO 9001:2015 5.1.2 / 7.2
3.	AICTE IDEA Lab Fund of Rs.90 Lakhs has been sanctioned.	Resources	ISO 9001:2015 7.1
4.	Additional intake of 160 students in IT, ECE & AIDB has been approved.	Admission	ISO 9001:2015 8.2
5.	KNCET – 98.5% & B.Ed 100% placement realized.	Competence	ISO 9001:2015 7.2

No	CM (Comment)	Area / Process	Standard: clause
1.			
2.			
3.			
4.			
5.			

Closure and Recommendations				
Closure result	ISO 9001:2015	---	---	---
Fulfilled	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Open nonconformities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not fulfilled	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recommendations of audit team	ISO 9001:2015	---	---	---
Grant*/ Extension*/ Renewing*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Maintenance*</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Suspension	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Restoring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Refuse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Withdrawal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**\*) Grant / Extension / Renewing / Maintenance in the case of open nonconformities assumes that the nonconformities will be cleared as agreed**

**Explanation of the terms:**

Renewing: New issue of the certificate for the re-certification.

Restoring: End of the temporary invalidity of certificate after the suspension or after delayed re-certification.

Comments for next Audit
If applicable, the final evidence of effectiveness and implementation of corrections and corrective actions for the nonconformities from this audit will be verified in the next audit.
The comments and opportunities for improvement will be taken up again.
The next audit is preliminarily scheduled for: Date : On or before 11.07.2026

Responsible for Content	
Name: Suresh Ramalingam	Date: 29.07.2025
	
Signature audit team leader	