01)	**Name of the Client**	St. Joseph's College of Engineering and Technology, Palai
02)	**Address of Head Office (HO)**	Choondacherry PO Palai Kottayam Dist Kerala 686579 India
	Address of Site(s) (For ***additional sites; add the rows)***	NA
	Temporary Site(s): Location and Address (For ***additional temporary site(s); add the rows)*** (Temporary site(s) may be related to field services e.g. Installation, Commissioning, service, on board- services, Surveys etc. Location can be City /Village / Port / Unit name etc.)	NA
03)	**File Number**	S02459/01/QMS
04)	**Name of "Head of Organization" / Unit**	Dr. V. P. Devassia, Principal
05)	**Audit Criteria** **(strike out the standard not under audit)**	**QMS (ISO 9001:2015)** / ~~**EMS (ISO 14001:2015)**~~ / ~~**OHS (ISO 45001:2018)**~~ ▪ Applicable legal & other requirements. ▪ Organization's procedures & documented information in line with the respective standards. ▪ IAF/ISO joint communique on addition of climate change considerations to management system standards (MSS).
06)	**Date of Audit**	13-Feb-25 - 14-Feb-25
07)	**Type of Audit** **(strike out the standard not under audit)**	~~Stage II / Renewal /~~ Surveillance 2 ~~/ Scope extension / Scope reduction / Follow-up / Transfer / Special Audit for a/b/c as referred under Audit Objectives "8d"~~ ~~Joint / Combined / Integrated~~ / Onsite ~~/ Remote / Hybrid~~
08)	**Audit Objective**	
	a)	**Stage 2 Audit**: Is to evaluate the implementation including the effectiveness of the organization's implemented management system for the above criteria covering the following: ▪ Information and evidence about conformity to all requirements of the applicable management system standard or other normative documents ▪ Performance monitoring, measuring, reporting, and reviewing against key performance objectives and targets (consistent with the expectations in the applicable management system standard or other normative document) ▪ Organization's management system ability and its performance regarding meeting of applicable statutory, regulatory and contractual requirements ▪ operational control of the organization's processes ▪ Internal auditing and management review ▪ Leadership and commitment including process(es) for consultation and participation of workers
	b)	**Renewal Audit/Transfer:** Is to evaluate the effectiveness of the organization's implemented management system for the above criteria covering the following: ▪ The effectiveness of the management system in its entirety in the light of internal and external changes and its continued relevance and applicability to the scope of certification ▪ Demonstrated commitment to maintain effectiveness and improvement of the management system in order to enhance overall performance.

		▪ The effectiveness of the management system regarding achieving the certified client's objectives and the intended results of the respective management system (s) ▪ Continuing effectiveness of processes for ensuring compliance with applicable statutory, regulatory and contractual requirements **Transfer: -**To verify in addition to above:- ▪ Validity of accredited certification ▪ If any, complaints received, and action taken are effective. ▪ Any legal notices issued by Regulatory / Statutory bodies ▪ Previous non-conformities, if any, effective of corrective actions taken. ▪ Updated and implemented the revised to the new requirements into their management system.
	c)	**Surveillance Audit/ Transfer:** Is to evaluate the effectiveness for maintenance of the organization's implemented management system for the above criteria covering the following: ▪ Internal audits and management review. ▪ A review of actions taken on nonconformities identified during the previous audit. ▪ complaints handling. ▪ Effectiveness of the management system with regard to achieving the certified client's objectives and the intended results of the respective management system (s); ▪ Progress of planned activities aimed at continual improvement. ▪ Continuing operational control. ▪ Review of any changes ▪ Use of marks and/or any other reference to certification **Transfer: -**To verify in addition to above: - ▪ Validity of accredited certification ▪ If any, complaints received, and action taken are effective. ▪ Any legal notices issued by Regulatory / Statutory bodies ▪ Previous non-conformities, if any effective of corrective actions taken. ▪ Updated and implemented the revised to the new requirements into their management system
	d)	**Special Audit:** • For expanding the scope of a certification already granted, undertake a review of the application, and determine any audit activities necessary to decide whether or not the extension may be granted. • To investigate complaints, or in response to changes, or as a follow-up on suspended clients. • For upgradation to revised standards. **Upgradation: -**To verify in addition to above: - ▪ Validity of accredited certification ▪ If any, complaints received, and action taken are effective. ▪ Any legal notices issued by Regulatory / Statutory bodies ▪ Previous non-conformities, if any effective of corrective actions taken. ▪ Updated and implemented the revised to the new requirements into their management system
	NOTE: To verify the above audit objectives, in case of Remote audit carried out using ICT facility for gathering the audit evidence by utilizing the computer-assisted techniques such as MS Team, Skype, Video conferencing, webinar, information available in soft etc. as applicable. (If Remote audit /Hybrid audit is conducted section F (c) to be ensured)	
9)	**Comment on the confirmation of the information provided (by the organization, including "Pre-audit Information"/Auditor Allocation Form); mismatch if any; please attach "Notice of Change"**	
➡	**Administrative Changes**	Nil
	Scope of Certification	Providing Graduate Engineering Programs in Civil, Mechanical, Computer Science, Electronics & Communication, Electrical & Electronics, Artificial Intelligence & Data Science, Electronics & Computer and Computer Science & Engineering (Cyber Security). Post Graduate Engineering Programs in Civil, Mechanical, Computer Science and Electronics & Communication. Post Graduate Programs in Computer Application and Business Administration & Management.
	Number of site(s)	Nil

	Scope of Site(s) (For ***additional site(s); add the rows)***	NA			
	Scope of Support Office(s) / Location(s), if any	NA			
	Location and Scope of the Temporary Site(s) (For ***additional temporary site(s); add the rows)***	**Location**	**Scope**		
		Nil	NA		
	Travel Time between the sites	NA			
	Current certification & its validity, if issued by IRQS or Earlier CB	IRQS/220100786 & 26-Jul-25			
	Design & development (Applicable /Not applicable)	Not Applicable			
	Clauses "Not applicable" **relevant only for QMS*	8.3 – Design and Development of products and services :- Institution is not involved in Design and development of courses and the syllabi which are decided by Kerala Technical University to which College is affiliated, hence this clause is considered as not applicable. 7.1.5.2 Measurement traceability, Calibration against measurement standards traceable to international or national measurement standards. : Instruments used for handing the practical sessions are demonstrative in nature hence only verification and controlling the monitoring and measuring devices prior to usage of the same for practical sessions are done., hence this clause is considered as not applicable			
	Outsourced Processes	Guest Lectures			
	Shift Pattern	**1st Shift (Timings)**	**2nd Shift (Timings)**	**3rd Shift (Timings)**	**General Shift (Timings)**
					0830-1700
	Number of employees associated with scope of certification.				240

10)	**Audit Team Details** **(Team Leader, Team Member, Provisional Auditor, Provisional Team Leader, Evaluator, Industry Expert, Witness Assessor Any accompanying persons, e.g. Guides, Observers, Translator, Facilitator etc.)**	**Name**	**Role**
		Tomcee Thomas	Team Leader
		Dr. A Rajeshkumar	Provisional Auditor

11)	**Audit conducted at [Physical location(s) as applicable]**	**Address**	**Date of Audit**	**Functions/ Process(es) /Activities audited at the Location/Site**
	Head office	Choondacherry PO Palai Kottayam Dist 686579 Kerala India	13-Feb-25 - 14-Feb-25	MR & Top Management, Civil Theory & Lab, UG PG, Computer Science and Engineering (Cyber Security) Theory & Lab, UG, Mechanical Theory & Lab, UG PG, MCA, Science and Humanities, Library, Office and Training
	Permanent site(s)			
	Temporary site(s)			

12)	**To comment:**	
	a)	**Any deviation from audit plan and their reasons (if yes, please justify)**
	➡	**Nil**

	b)	**Upon any adverse conditions faced during the audit (e.g.; power outage, Fire, Flood, specifically related to the condition of the sites affecting the auditing activities).**
	➡	**Nil**

Audit Findings

SEC A : Comments on the Effectiveness for the Closure of Previous Audit Findings:

No. of Previous audit NCs:	Nil	No. of Areas of Concerns raised during Stage 1:	NA

Scheme & Clause No.	Findings	Comments on the effectiveness for the closure
ISO 9001	Nil	NA

SEC B: Management System(s)

a) ➡

Justification for the scope of certification [Brief description for scope verification highlighting on the process flow / activities within the organization's control or influence for the "certification scope"]
Provide an example of products or services under realization for "each element of the Scope" intended for certification.
(If multi-site audit, then scope as applicable at each site should be verified {for Stage 2 from Stage 1 Audit Report and for Subsequent audit against the issued Certificate & reported).

In the event that a product or service listed in the differentiated scope statement has not been realized for the past 12 months, the scope shall be lowered by eliminating the product/service. The certificate shall be is reissued with reduced scope. (Process shall be initiated through "(NOC) Notice Of Change" and " SOC (Scope OF certification)"

Scope of certification is verified for the conformity with the activities of organization, the given scope is appropriate
There has been delay in conducting the audit due to university examination and holidays, suspension of certification may be revoked.

Number of stundents MCA S2 batch 2023-25, 60, 2024-26, 59, 2024-29, 58 integrated batch), syllabus course file 24SJINMCA106, introduction to digital systems and language designs, faculty, Jeena Maria Sebastian, Asst Professor, Work load Syllabus L-3, T-1, P-0, Credit 4, Theory 5, Project 6, Seminar 4. Academic calendar, Commencement of S2 Jan 20, internal assessment 1, March 25
Course coverage, Theory 4 +1 Tutorial, Module 2, Universal gates 11/2, coverage 62%, reviewed by HOD
S1 result analysis No of students 59, All pass 37
% 62.7
8-9 13, 7-8 17, 6-7 8, <6 21
English 89.7, Maths 67.8, Programming 74.6, PC, Hardware 89.8, Fundamentals of accountancy 88.1, Office automation lab 100, Introduction PC Hardware lab 100
Slow learners identified – 20 students
Mentors assigned, Prof. Binila Binoy – 9 students, Fr. Jeethu Mathew 8 students, Prof Athira Venugopal 3
Assignment Announced 10-2-25, submission 14-2-25
Question paper setting QNSmart provided by IPSR Solutions
New faculties Ms. Binila Binoy
Faculty evaluation, Faculty Venugopal
Subject Knowledge 89.05%, Teaching effectiveness 86.79, Behavioural Inded 78.37, Overal performance 85.33,

b) **Summary of Site Visit:**

➡ St.Joseph's College of Engineering and Technology, Pala was established in 2002 by Diocese of Pala, is approved by AICTE and affiliated to KTU and MG university. College is offering Undergraduate and Post graduate Courses in Engineering and Post Graduate Course in Management Studies

SJCET campus has canteen facilities, hotel and college bus facilities that are not included in scope of management system certification. Adequate class rooms, laboratory complex and library facilities made available

c) Documented information: (Review comments for surveillances with regards to major revisions/Changes made in documented information since previous audits).

For Stage-1, Renewal & transfer please fill in the form IV IRQS : FORM:101-Review of Documented Information-QEO / IV IRQS :FORM:57 - Review of Documented Information-OHS.

➡ Quality manual QSM
Issue number 3
Date of issue 01.06.2018
Revision 4
Effective date 01.11.2024

d) Context of organization: Determination of external and internal issues. (Business context and operational, and Climate Change)

➡ Context of the organisation and internal and external issues documented as part of quality manual, example of external issue considered are students opting for other colleges, parents expections not meeting, industry demand not as expected, changes in statutory and regulatory requirements etc.. , internal issues considered are coverage of subjects, conduction of examinations, condition of lab equipments etc.

e) Process of understanding & review of the needs and expectations of interested parties, and of the worker.

➡ Interested Parties and their Requirements are documented in as part of quality manual, changes in requirements are reviewed during management review meetings. Example of identified Interested parties Interested parties are, students, Parents, Society, industry, staffs and Society and expectations are good results, availability of required number of staffs for the smooth operation, knowledge enhancement, communication skills etc

f) Process of identification, access of compliance obligations [for applicable Legal (Statutory / Regulatory & Other requirements]

➡ AICTE Approval F.No. South-West/1-43664912017/2024/EOA Corrregandum-1 datd 22-5-24
KTU Affiliation No.No: KTU/A/456/2015 Dated, Thiruvananthapuram17/07/2024
FSSAI No. 11321005000488 valid up to 12/09/2026 (Canteen)
FSSAI No. 11320005000464 valid up to 04/10/2025 (Hostel)

g) **For ISO 45001 : To verify and comment: For MD 22: G 9.4.5.3: as per IRQS-procedures detailing the actions to be taken in the event of a non-compliance with relevant regulatory requirements (received by IRQS though newspapers, social media or websites or any other sources of information). Was it communicated to the organization?**

➡

Communicated	Not-communicated	No such incident	Comment on organization's response, if communicated:
		No such incident	

h) **Process of for determination of risk & opportunities; provide examples of determined risk & opportunities**

➡ Process wise Risks and Opportunities documented as part of quality manual, examples of some of the factors considered and identified risks and opportunities based on context of the organizaiton are are not completing the syllabus requirements (theory courses), students, not performing well in the series tests and assignments (not getting the minimum internal marks), not completing the specific laboratory experiments etc.

i) Process of establishment and monitoring objectives of management system (with few examples of objectives/targets for the respective management systems audited (such as setting of Quality, Environmental, Health & safety objectives, target, programs & Health Performance)

➡ Quality objectives are formed and monitored for continual improvement, monitoring and measurements done during management review meetings, some of the quality objectives monitored by the organization are:

Subject Code	Pass %	Failed	Total Number Failure %
EE S2	94.74	3	5.26
EE S1	85.96	8	14.04
CS S2	85.96	8	14.04
ME S2	98.25	1	1.75
CE S2	100	0	0
AI S1	100	0	0

j) The availability of roles, responsibilities, and authorities, additionally how are Workers assigned & communicated at all levels of the organization to assume responsibility for those aspects of the OH&S management system over which they have control.

a) Resources, b) Management process- their monitoring, process control and ownership, c) Environment provided to support

➡ The roles, responsibility, authority and interrelation of the personnel who manage and verify processes and other functions are documented as part of quality manual.

Organization has planned and implemented adequate resources required for the smooth functioning of activities and continual improvement. Resources include building infrastructure, class rooms, library, computer systems, well equiped laboratories etc…

k) **Emergency preparedness and response:** comment on effectiveness of identifying potential emergencies, response procedures, testing of response procedures by mock drills

➡ No mock drill conducted as part of quality management system

l)

Personnel Interviewed, including workers / contract workers.

[The Personnel who will be Interviewed during Audit. (Based on the Scope of certification and scheme).

- *Shop floor personnel / Operational Personnel involved in critical process / functions / Company workers / Contract workers / Personnel involved in or with Outsourced activity Interested party representatives /*
- ***Personnel responsible for monitoring employees' health, for example, doctors, nurses and or any nominated / authorized representative of the organization (*guidance note – In case outsourced, then to interview personnel involved in Monitoring employee's health i.e. Doctor, Nurses)***

*As felt appropriate, include any other personnel based on the organization being audited}***Personnel Interviewed, including workers / contract workers.**

As felt appropriate, include any other personnel based on the organization being audited}

Name	Designation ***(Must in both cases Inhouse or Outsourced***	Interviewed For	Conclusion Based on Interview
Dr. VP Devasia	Principal	Context of organization, Top management,	Considered
Mr. Sabarinath G Pillai	MR	Context of organization, Top management, MA, Legal, EIA, Emergency, Objectives	Considered
Mr. Justine Thomas	Librarian	Participation and awareness	Aware of processes
Mr. KM Thomas	SAO	Participation and awareness	Aware of processes
Mr. Anish Augustine K	HOD Incharge	Participation and awareness	Aware of processes
	Doctor/Nurses (Must in both cases Inhouse or Outsourced)		
	Permanent worker 1		
	Permanent worker 2		
	Temporary Worker-1		
	Temporary Worker-2		
	Contract Worker-1		
	Contract worker 2		
	Female Employee-1		
	Female Employee-2		
	Worker Representative		

m) **Process of determination & maintenance of organization knowledge necessary for the operations of its processes to achieve conformity of product /service**

➡ Organization has made available all necessary information for the operation of its processes in form of quality manual, procedure manual and various records. Faculty attend faculty development programs, and HOD maintain data on FDP by the faculties.

n) **Demonstration of Leadership and commitment towards respective management systems.**

➡		Top managemnet for the organization is Chairman and one of the faculty is Management Representative assigned to the responsibility of institures quality management system. Top management have provided visible ongoing commitment and leadership towards the quality management system at by way of establising, reviewing and supporting the management system
o)		**Consultation and participation of workers (For ISO45001)** **Process for consultation and participation of workers, and, where they exist, workers' representatives.** Competence: Determined competence, Workers are competent (including the ability to identify hazards) on the basis of appropriate education, training or experience). ▪ Awareness: ▪ Workers awareness on: OHSMS Policy, Objectives, ▪ There are contributions for effectiveness and improvement of OHSMS. ▪ the implications and potential consequences of not conforming to the OH&S management system requirements. a) incidents and the outcomes of investigations that are relevant to them. b) hazards, OH&S risks and actions determined that are relevant to them. c) the ability to remove themselves from work situations that they consider present an imminent and serious danger to their life or health, as well as the arrangements for protecting them from undue consequences for doing so
➡		Participation and awareness among auditees found good
p)	**1)**	Brief description of organization processes determined taking into account planning, Monitoring and control of the management processes, needs to achieve the expected outcome **(Clause 8 of respective standard);** (Input → Processing → Output) e.g. EMS Life Cycle Perspective: An example of Environmental aspect / impact arising out of "Life Cycle Perspective" and any Operational Control measures Directly or Influencing e.g. For OHSMS – ISO 45001:2018 - 8.1: Briefly on Operational control: processes needed to meet and implement the actions determined for the Hazards and Risks, establishing criteria for the processes; - adapting work to workers. e.g. For QMS – Customer requirements, operational controls; monitoring of customer Satisfaction etc.
	➡	Syllabus is received from university/KTU-syllabus plan for conduction of theory and practical are prepared by subject allotted lecturers-Conduction classes as per plan are reviewed by HOD-Series tests as per syllabus are conducted-semester examination is conducted based on question papers received from university-answer sheets are forwarded to university for valuation. Key processes involved are planning of lesson-teaching-conduction of lab experiments-supported by admin functions. Adequate number of teaching and supporting staff are provided for the smooth functioning of the organization. Labs are well equiped and adequate planning is done for the smooth conduction of experiments described in the syllabus. The organisation has documented procedures for the core functions like planning of teaching and practicals, monitoring of achieving the planned arrangements, conduction of internal assessments, monitoring of weak students and remedial or corrective measures taken for the weak students. Students feed backs are collected and reviewed by the top management and adequate training are provided for the staff.
	2)	**Comments on the process of Organization's Management of Change (Mainly for OHSMS ISO 45001:2018 Clause number 8.1.3; ISO 9001:2015 clause number 8.5.6)**
	➡	As informed by the organization there has not been any change from previous audit, in business processes, organizational structure goals, processes or technologies.
	3)	**For OHSMS: As per MD 22 clause** Planning Activities: G 9.2.1.3: OH&SMS shall include activities, products and services within the organization's control or influence that can impact the organization's OH&SMS performance. Temporary sites, for example, construction sites, shall be covered by the OH&SMS of the organization that has control of these sites, irrespective of where they are located. **(To be reported as applicable)**
	➡	No temperory sites
	4)	**Details of key outsourced activities and type of Control over identified externally provided processes, products, and services. (For ISO 45001:2018: Clause 8.1.4 , 8.1.4.2, 8.1.4.3. and ISO9001:2015 (Clause 8.4)**
	➡	Outsourced processes is classes taken by visiting professors based on specific requirement as and when required. Such classes are managed by respective department.
q)		**Effectiveness of Internal Audit & Management Review**
		INTERNAL AUDIT:

	Briefly describe the process of conduct of IA, Comment on the competency of IA auditors, Number of internal auditors, Trained for Internal auditors, Verification of audit Program, Audit Plan. The results of the audits are reported to relevant managers, workers, workers' representatives, and other relevant interested parties. ***Findings of IA:*** *Briefly Corrective actions and effectiveness of corrective taken for the NCs on the outcome of IA.* *Briefly on the Conduct of IA in an Impartial manner, Conclusion on the effectiveness of IA conducted:* **MANAGEMENT REVIEW:** *Briefly describe the process of Management Review, coverage of all inputs, outputs in terms of decisions and actions by the top management for ensuring continuing suitability, adequacy and effectiveness of the respective management system* Top management shall communicate the relevant outputs of management reviews to workers and where they exist, workers' representatives.
➡	Internal audit procedure documented, decided frequency is to conduct internal audits once in a year. Previous internal audit conducted during 24th to 26th October, 24, all departments as in internal audit schedule covered, independence maintained in selecting internal auditors, 11 nos trained internal auditors available, no non conformances observed during previous internal audit, Internal audit found effective. Management review meeting procedure are documented to be conducted once in six months last MRM conducted on 27-11-24, discussions of all agenda points are recorded for the MRM report Management review meeting found reliable Based on the above to be concluded; Internal audit and MRM is effective – **Yes**
r)	**ISO 45001:2018 (Clause 10.2**) - Incident, nonconformity, and corrective action:
➡	No incident, no nonconformance or customer complain for corrective action registered
s)	**As Per MD 22 "**G 8.5.3: **Comment on "Organization** to without delay to inform IRQS, of the occurrence of a serious incident or breach of regulation necessitating the involvement of the competent regulatory authority", any such situation: -.
➡	No such incident observed
t)	**Examples of improvement/s, arising from correction, corrective actions, break through changes, innovation**
➡	No reportable improvement arising out of correction, corrective action or breakthrough changes, innovation observed during audit.

SEC C : Current Audit Non-conformity

a)	**Scheme**	**NC No.**	**Clause No.**	**Statement(s)**	**Grading of NC (Major/Minor)**
	QMS	Nil	NA	NA	NA

b)	No. of Major NCs:	Nil
c)	No. of Minor NCs:	Nil

SEC D (a) : Maturity Of The Management System

(i)	**Level of Integration in case of Integrated Management System:**		**YES/NO**
	a)	Integrated Documentation (Manual, policy and objectives, procedures, work instruction etc.)	NO
	b)	An Integrated approach to Roles & Responsibilities	NO
	c)	Conduct of Integrated / approach to Internal Audit	NO
	d)	Conduct of Integrated Management Reviews considering the overall business strategy and plan	NO
	e)	An integrated approach to operational controls	NO
	f)	An integrated approach to continual Improvement mechanisms	NO
	g)	Organization's personnel to respond to questions more than one management system standards.	NO

ii)	Comment on the maturity of the management system i.e. about the management system is fully established in the organization and the level of support that it has from senior and top management.	Management system implemented is maintained by the organization with the support from top management

SEC D (b) : Brief comments on Annexure to Questionnaire for Result of the review of the system (over period of certification), (applicable during renewal audits)

➡ Nil

SEC E: Comments on Usage of Marks / Logos (Accreditation / IRQS)

NABCB:

- The logo shall not be displayed on buildings and flags.
- The logo shall not be displayed on vehicles except in publicity material like part of a large advertisement.
- The logo shall not be used on the visiting cards.
- Use of logo not permitted on laboratory tests, calibration, or inspection reports, as such reports are deemed to be products in this context.

Neither the IRQS's Logo nor the NABCB's Logo shall be used on the packaging of a product, labels, publicity material, written announcements etc. that in any way suggests that the IRQS or NABCB have certified or approved any product, process, or services of the registered client

➡ No deviation observed

RvA

- Reports and certificates of certified calibration-, testing and medical laboratories and inspection bodies.
- On business cards of the certified client's personnel.

➡ No deviation observed

Use of Marks / Logos (Common for both) : Comments on verification of website for Use of Marks / Logos, display of certificate for its appropriateness and validity on the Client's website, any social media, wherever is applicable look at the maximum.

https://sjcetpalai.ac.in/ referred no logo usage evidenced.

SEC F (a) : Any Unresolved Issues	Nil
SEC F (b) : Any Other comments / observations **Examples such as reorganization including any recognition / awards received by the organization**	Nil

SEC F (c): REMOTE AUDIT (USING ICT)

The Below Ticked ICT has been used in carrying out audit/assessment and the effectiveness of ICT in achieving the audit/assessment objectives are as noted below:

Based on the Input received in IV IRQS:REC:52A the following ICT were used: (Tick ✓ which were used), any other means if used please include the same for comments on its effectiveness for achieving the objectives).

- Micro Soft Team Meeting
- ZOOM
- Go-To Meetings
- Video conferencing
- WhatsApp Video call
- Skype.
- Use of Drone

Used to gather objective evidence.	Effectiveness	
	Achieved for	Not achieved or Not fully achieved: for
Virtual site visit – Based on respective scheme requirements.	Not Applicable	
Operational activities (EG; Process parameters, Operational control etc.).	Not Applicable	
Sharing of Documents, Documented information, Records on Screen	Not Applicable	
Interview with personnel	Not Applicable	
Uninterrupted connectivity throughout audit duration.	Not Applicable	
Overall Audio / Video clarity.	Not Applicable	
Sharing of photos	Not Applicable	
Documents through mails in time.	Not Applicable	
Maintain Integrity of the audit / assessment process.	Not Applicable	
Usage of Drone	Not Applicable	
Objectives of Current Type of audit as noted above under Section 8 of this report.	Not Applicable	
Any other additional information from FORM 52 A / observations.	Not Applicable	

Based on the above:

Additional Manday required to cover the processes for which objectives not fully achieved	YES *(Please mention the audit duration that would be required)*	NO ✓
Audit Programme amended.	YES *(Please amend the audit program accordingly with appropriate justification)*	NO ✓

SEC G: Audit Program [To be filled for one cycle, up to Renewal]

Any Significant issues impacting audit program to be recorded

Client's Audit Scope	*Stage 1*		***Stage 2 /*** *Renewal*		***Shift*** *Covered*		*Surveillance # 1*		***Shift*** *Covered*		*Surveillance # 2*		***Shift*** *Covered*		*Renewal*		***Shift*** *Covered*	
	Planned	***Actual***	***Planned***	***Actual***	*(1,2 or 3)*		***Planned***	***Actual***	*(1,2 or 3)*		***Planned***	***Actual***	*(1,2 or 3)*		***Planned***	***Actual***	*(1,2 or 3)*	
Date Of Audit											Jul 24	13, 14 Feb 25			May 25			
No. of Mandays											2	2			4			

Head Office/Site(s)/ Temporary Site *(please add the row for additional sites)*	***Department/ Functions / Processes (Please mark [✓]Tick Mark)*** *(please add the row for additional Departments/Process/Production Line etc.)*	*Stage 1*		***Stage 2 /*** *Renewal*		***Shift*** *Covered*		*Surveillance # 1*		***Shift*** *Covered*		*Surveillance # 2*		***Shift*** *Covered*		*Renewal*		***Shift*** *Covered*	
		Planned	***Actual***	***Planned***	***Actual***	***Planned***	***Actual***	***Planned***	***Actual***	***Planned***	***Actual***	***Planned***	***Actual***	***Planned***	***Actual***	***Planned***	***Actual***	***Planned***	***Actual***
Head Office	MR & Top Management											☒	☒			☒	☐		
	Civil Theory & Lab, UG PG											☒	☒			☒	☐		
	Computer Science Theory & Lab, UG PG											☒	☒			☒	☐		
	Electronics & Communication Theory & Lab, UG PG											☐	☐			☒	☐		
	Computer Science and Engineering (Cyber Security) Theory & Lab, UG											☐	☐			☒	☐		
	Electrical & Electronics Theory & Lab, UG PG											☒	☒			☒	☐		
	Electronics and Computer Theory Lab UG											☐	☐			☒	☐		
	Mechanical Theory & Lab, UG PG											☒	☒			☒	☐		
	Artificial Intellegance and Data Science Theory & Lab UG											☐	☐			☒	☐		
	MBA											☐	☐			☒	☐		
	MCA											☒	☒			☒	☐		

	Science and Humanities											☐	☐			☒	☐		
	Library											☒	☒			☒	☐		
	Placement Cell											☐	☐			☒	☐		
	Physical Education											☐	☐			☒	☐		
	Office and Training											☒	☒			☒	☐		
Main Site																			
Site-1																			
Site-2																			
Temporary Site																			

[*Sub-Division in the Department, Processes, Sub-Processes, Activities involved & audited under One Heading to be specified in the "Site(s) [covering Temporary /Permanent]/ Department/ Functions"]

Note:

a) Stage 1 Audit Programme to be addressed the Number of Shifts & audit is planned for at least one of the shifts inside and one outside of regular office hours.

b) Stage 2 / Renewal / Surveillance Audit : as per the Stage 1 Audit Programme, audit is conducted for at least one of the shifts inside and one outside of regular office hours

For all Scheme(s) : Eg: A] Working in Single shift – No shift audit is applicable.; B] Working in Two shift – To audit beyond regular working hours intended after the end of General shift.

*C] Working in Three shift – Shift audit covering 2nd and 3rd (Night shift) to be covered over the initial certification, D] **Surveillance cycle (either 1st or 2nd)** and in the subsequent Recertification and **Surveillance cycle (either 1st or 2nd)** .*

2)In other cases: Recertification and once during the cycle.

SEC H: Recommendation:		
01)	Based on the audit findings verified through Off-site audit / On-site audit/Remote audit, it **is concluded that:** - the audit objectives as identified in the section "8" above achieved. - the effectiveness of the management system has the capability to meet applicable requirements and expected outcomes. - Certification Scope is appropriate - Satisfactory conduct of internal audit and management review process	
	Audit team Leader recommends the "certificate of approval" to ISO 9001:2015 / ISO 14001:2015 / ISO 45001:2018 for…… (Strikeout if not applicable)	**YES/NO**
	a) the issuance	
	b) the issuance subject to closure of non-conformities on or before _____`	
	c) the issuance with continuation	
	d) the issuance with upgradation for_____	
	e) the continuation	
	f) the continuation subject to closure of non-conformities on or before _____.	
	g) the revocation of suspension and continuation	**YES**
	h) follow-up visit for closure of major NC(s)/ minor NC(s) based on the site visit, before _____.	
	i) effectiveness of the management system could not be evidenced for the noted Major nonconformity(ies) (indicating breakdown of management system or major impact on environment or high potential of an incident which may result in injury/illness).	

Instructions for Corrective Action Plans Submission:
Responsibility: It is IRQS's client's responsibility to provide complete and timely responses to finding reports.

Non-Conformance submission:

- For the date of NC, the following to be completed by the client:
  - Correction, Root Cause & Extent Analysis, Evidence of Implemented Correction & Corrective Action, for Verification of effectiveness of implemented Correction / Corrective Action.
- Time Frame of the same:
  - For Major NC – within 30 Days, for Minor NC – within 60 Days

NOTE 1: If not submitted within the above time frame, then the certificate will be intended for Suspension Process.
NOTE 2: The Close-out of the following:

- Major NC to be completed within 60 Days from the date of audit.
- Minor NC to be completed within 90 Days from the date of audit.

NOTE 3 :

- Major nonconformities typically require on-site verification of corrective action unless specified by the Auditor. A follow up audit shall take place within 60 days from the last day of the audit activity to IRQS.
- All findings shall be closed before a recommendation for certification can be made.

NOTE 4: In case of issuance of any Major NC or any other situation during surveillance audit(s) and or re certification audit(s), team leader requires to recommend a fast-track review by IRQS which may lead to suspension or withdrawal of certification.

Disagreement with an audit finding/s:
IRQS Appeals and Control procedure is to be used by the clients for resolving the issue.

Disclaimer:
Audit methodology was sample based. Random Samples were chosen from the areas covered in the scope. This is to assess the suitability and effectiveness of the Management System. Any sampling carries a certain amount of uncertainty in auditing. Whenever the ICT facility is used for gathering audit evidence the risk associated with poor connectivity of audio / video are taken into account for uncertainty in auditing. Audit recommendations are subject to an independent review prior to a decision concerning the awarding, renewal of certification or follow-up / re-audit.

Confidentiality:
We assure you that the information obtained during the audit will be maintained with utmost confidentiality.
Appeal: Our system has a provision of appeal with regards to audit process, difference of opinion and audit report. The client has every opportunity to appeal, dispute or complain against the decision of the auditors.

Should you wish to Contact IRQS in relation to any queries
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Report prepared and forwared to organization vide E-mail dated :	**Subject to clearance of accounts**
By Team Leader Name, Signature & Date:	**Tomcee Thomas** **14-Feb-25**