

AQC GLOBAL LLC	F13
ISO 9001:2015	Issue 01
Stage 1 Audit Report	Rev 05

Name of the Organization	SEWNARAYAN RAMESWAR FATEPURIA COLLEGE	
Address	PO-Beldanga, District-Murshidabad PIN-742133, West Bengal	
Site Address (If any)	Sewnarayan Rameswar Fatepuria College PO-Beldanga, District-Murshidabad PIN-742133, West Bengal	
No. of Employees	Teaching = 64, Non-teaching = 8, House-keeping =2, Security =1, Electrician=1, Total = 76	
No. Of Shift	1	
E mail id	principal@srfatepuriacollege.in	
Contact Person	Dr. Suhas Roy	
Telephone/Fax	8918781824	
Scope	Teaching, Learning and Evaluation processes relating to awarding of Bachelor Degrees in Arts, Science & Commerce considering Environment friendly and Energy efficiency manner in College Green Campus.	
Technical Area	Teaching, Learning and Evaluation, Capacity Building, Skill Enhancement, Institutional Social Responsibility	
Exclusions	Design and development	
Audit Team	Lead Auditor: Amalesh Kumar Mandal Auditor: Technical Expert	Audit duration Man day(s): Technical Expert
Starting date of Audit	19.06.2023	
End Date of Audit	19.06.2023	
Brief about the organization	<p>Sewnarayan Rameswar Fatepuria College has been rendering its services for more than five and half decades with best level of satisfaction of students, guardians, alumns and other stakeholders. With time, it has taken the shape of a robust family constituting innumerable students, teachers and non-teaching employees. Each member of this family is special and progress of each member is very important for us. The Governing Body headed by the hon'ble District Magistrate, Murshidabad is lending immense support to our activities. The donor members of the College are always taking care of all development activities. The nominees of the Government and the University of Kalyani are actively co-operating our all sorts of endeavours. Teachers and non- teaching employees of the College are doing their duties incessantly. Students, the most valuable stakeholders, are encouraging us to do better. They are co-operative, timid, gentle, keen for learning and hard working. Success of the College which is currently noticed before all is inevitably obtained by the united and unidirectional efforts of all the stakeholders. It is to be maintained. As the Principal of the College my first and foremost duty is to ensure that this familial relationship stays intact and promote belongingness within the institution amongst them. Talents and competencies within them are to be extracted in such a</p>	

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	<p>manner that many more success stories are composed. Qualitative development is to be focused in every corner of the College. Success has no limit. We have to plan a brighter roadmap for the days to come keeping feet on the ground of reality.</p> <p>The College has introduced the Undergraduate Curriculum Framework recommended by the National Education Policy 2020 since the commencement of the current academic session 2023-24. It has also introduced a number of add-on/certificate courses since last couple of years. The College has been organizing academic seminars /webinars/workshops quite frequently at state, national and international levels. It also signed MOU with many higher educational institution within the state for faculty exchange, student exchange, cultural exchange, collaborative Academic & sports activities this institution. Thus this College earned the status of a Government College. Again in 1970 commemorating the saintly principal's contribution, this institution was renamed as Acharya Brojendra Nath Seal College. Since its nascence, it won a pride of place in the map of learning under the University of Calcutta. of late, it is an eminent seat of learning under the University of North Bengal. One can easily take pride in the fact that the flambeau of learning is still aflame. Hundreds of students from various nooks and corners of North Bengal file in every year seeking admission in to this College. This century-old College is almatmater of hundreds of well-placed academicians, here and aboard. Eminent Professors were delighted to teach here. Needless o say, that, this educational institution is still playing a significant role in expanding higher education to the dark crannies of North Bengal. It is our pleasure and pride that the college is successfully running post graduate courses in Bengali, Sanskrit and Zoology since 2004 and History since 2010. The college has recently obtained another feather of pride to its Glorified Crown-Recognition by UGC as Centre for Potential of Excellence.</p>
Audit Objective	To evaluate the client's documented system, location & site-specific conditions and gather other details through discussions with the client's personnel to determine the organization's readiness for the Stage 2 Audit for Certification

CHANGE DETAIL

Audit Duration for Stage 1	
Are quoted man-days adequate?	Yes

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Any change in employee detail?	None
Any Change in Scope?	None
Any additional Information:	None

ATTENDANCE SHEET:

NAME OF PERSON	DESIGNATION
<i>Animesh Kumar Mondal</i>	Lead Auditor
Dr. Suhas Roy	PRINCIPAL, S.R.FATEPURIA COLLEGE
Dr. Malay Kumar Ghosh	Coordinator, IQAC, S.R.F. College

Suhas Roy

Principal
S.R. Fatepuria College
P.O.-Beldanga, Dt.-Murshidabad

SUMMARY OF AUDIT

AREA OF IMPROVEMET	
(Areas of Improvement Which May be Identified as Non Conformities During Stage 2 Audit)	
1	Communication/Display of policy
2	Communication/Display of Objectives

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Non Conformities Raised

0 Minor/Major Nonconformance identified in the Stage 1 audit, details of Non Conformance in F50.

Please respond by using your own corrective action form and include the root cause analysis with systemic corrective action. Failure to include root cause analysis with systemic corrective action will result in your responses being rejected by Lead Auditor

Team Leader Declaration (Tick or cross Each Column as per applicability)	
√	Auditing is based on a sampling process of the available information
√	Audit is combined, joint or integrated;
√	The effectiveness of corrective actions taken regarding previously identified
√	nonconformities has verified
√	Outcomes are effective and complying.
√	The internal audit and management review process are effective and complying with the requirements.
√	The scope of certification is appropriate.
√	The capability of the management system to meet applicable requirements and expected
√	The audit objectives has been fulfilled and achieved.
RECOMMENDATION	
√	Recommended Proceeding With Stage 2 (within 60 days from this audit date)
×	Recommend not proceeding to stage 2 until audit evidence has been submitted to AQC showing that the concerns raised by the auditor (s) have been rectified. A date for stage 2

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	will then be agreed.
×	Recommend not proceeding without a further stage 1 Audit due to the severity of the concerns raised by the audit team

Sign Off : Date 19.06.2023	
AQC Report Submission	Client Acceptance for Report
Name of Auditor: Amalesh Kumar Mandal Signature: <i>Amalesh Kumar Mandal</i>	Name: DR. SUHAS ROY Sign: <i>Suhas</i> Designation: Principal S.R. Fatepuria College P.O.-Beldanga, Dt.-Murshidabad

AUDIT CHECKLIST

REQUIREMENTS	COMMENTS	Status C/NC/O
Is the Information is documented as required as per the ISO 9001:2015?	Manual (Doc. No. SRFC/QMS/XXX/QMM/001 dtd. 02.04.2023) and other documented information available.	C

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Has the discussion held with personnel of the Client company for readiness for stage-2?	Yes	C
Has the Client site specific conditions are evaluated?	Yes	C
Has the company identified key performance, Process, Objectives and operation of Management System?	Established and implemented	C
Has the client having understanding with the ISO 9001:2015 Standard requirement?	Yes	C
Is the scope is having boundaries and specific to client organization?	Yes	C
Is client having Multisite then level of control is established.	Not applicable	C
Is process and Equipment used are adequate?	Yes	C
Has client identified Legal and Statutory Requirements applicable to Product and Organization?	Yes	C
Is the resource are adequate for stage 2 audit?	Yes	C
Is Internal Audit planned and performed and effective?	Yes	C
Is MRM planned and performed and Effective?	Yes	C
Are Internal audits conducted as planned? Date of Last Internal Audit?	Yes/ 05.01.2023 to 06.01.2023	C
Are Management reviews conducted as planned? Date of Last MRM?	Yes/ 19.01.2023	C

END OF REPORT

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Name of the Organization	SEWNARAYAN RAMESWAR FATEPURIA COLLEGE	
Address	SEWNARAYAN RAMESWAR FATEPURIA COLLEGE ,PO-BELDANGA, DISTRICT-MURSHIDABAD ,PIN-742133, WEST BENGAL	
Site Address (If any)		
No. of Employees	Teaching = 64, Non-teaching = 8, House-keeping =2, Security =1, Electrician=1, Total = 76	
No. of Shift	1	
E mail id	principal@srfatepuriacollege.in / collegesrf@yahoo.com	
Contact Person	Dr. Suhas Roy	
Telephone/Fax	03582-226112	
Scope	Teaching, Learning and Evaluation processes relating to awarding of Bachelor Degrees in Arts, Science & Commerce along with considering Environment friendly and Energy efficiency manner in College Green Campus.	
Technical Area	Teaching, Learning and Evaluation, Capacity Building, Skill Enhancement, Institutional Social Responsibility	
Audit Team	Lead Auditor: Amalesh Kr. Mandal Auditor: Technical Expert	No of Mandays: 1
Starting date of Audit	10.07.2023	
End date of Audit	10.07.2023	
Brief about the organization	<p>Sewnarayan Rameswar Fatepuria College has been rendering its services for more than five and half decades with best level of satisfaction of students, guardians, alumnis and other stakeholders. With time, it has taken the shape of a robust family constituting innumerable students, teachers and non-teaching employees. Each member of this family is special and progress of each member is very important for us. The Governing Body headed by the hon'ble District Magistrate, Murshidabad is lending immense support to our activities. The donor members of the College are always taking care of all development activities. The nominees of the Government and the University of Kalyani are actively co-operating our all sorts of endeavours. Teachers and non- teaching employees of the College are doing their duties incessantly. Students, the most valuable stakeholders, are encouraging us to do better. They are co-operative, timid, gentle, keen for learning and hard working. Success of the College which is currently noticed before all is inevitably obtained by the united and unidirectional efforts of all the stakeholders. It is to be maintained. As the Principal of the College my first and foremost duty is to ensure that this familial relationship stays intact and promote belongingness within the institution amongst them. Talents and competencies within them are to be extracted in such a manner that many more success stories are composed. Qualitative development is to be focused in every corner of the College. Success has no limit. We have to plan a brighter roadmap for the days to come keeping feet on the ground of reality.</p> <p>The College has introduced the Undergraduate Curriculum</p>	

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	Framework recommended by the National Education Policy 2020 since the commencement of the current academic session 2023-24. It has also introduced a number of add-on/certificate courses since last couple of years. The College has been organizing academic seminars /webinars/workshops quite frequently at state, national and international levels. It also signed MOU with many higher educational institution within the state for faculty exchange, student exchange, cultural exchange, collaborative Academic & sports activities.
Purpose of Audit	To verify the implementation of the Quality Management System as per the ISO 9001:2015 Standards Requirement, verification of records for the conformity of the implementation.

CHANGE DETAIL:

Audit Duration for Stage 2	
Are quoted man-days adequate?	Yes
Any change in employee detail?	None
Any Change in Scope?	None
Any additional Information:	None

ATTENDENCE SHEET:

NAME OF PERSON	DESIGNATION
<i>Amalash Kumar Mondal</i>	Lead Auditor
DR. SUHAS ROY	PRINCIPAL, S.R. FATEPURIA COLLEGE BELDANGA, MURSHIDABAD.
<i>Dr. Malay Kumar Ghosh.</i>	<i>Coordinater, IQAC, S.R. Fatepuria College.</i>

Suhas
Principal
S.R. Fatepuria College
P.O.-Beldanga, Dt.-Murshidabad

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SUMMARY OF AUDIT

AREA OF IMPROVEMENTS	
1	No such improvement points identified in current period.
2	Actual data control system observed

Non Conformities Raised

0 Minor/Major Non-conformance identified in the Stage 2 audit, details of Non Conformance in F50

Please respond by using your own corrective action form and include the root cause analysis with systemic corrective action. Failure to include root cause analysis with systemic corrective action will result in your responses being rejected by Lead Auditor

Team Leader Declaration (Tick or cross Each Column as per applicability)

√	Auditing is based on a sampling process of the available information
√	Audit is combined, joint or integrated;
√	The effectiveness of corrective actions taken regarding previously identified
√	nonconformities has verified
√	outcomes are effective and complying.
√	The internal audit and management review process are effective and complying with the requirements.
√	The scope of certification is appropriate.
√	The capability of the management system to meet applicable requirements and expected
√	The audit objectives has been fulfilled and achieved.

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Recommendation:

√	<p>The quality system complies with the requirements of the reference standard: Congratulations, on the basis of the above summary, Lead Auditor is pleased to put forward a recommendation for Issuance of Certificate. The organization can use the AQC Mark</p>
×	<p>The quality system complies with the requirements of the reference standard with exception of minor NC: Congratulations, Team Leader is pleased to put forward a recommendation for Issuance of the certificate of Organization upon off-site verification of closure of all minor NC within 60 days from the date of Stage 2 audit. Responses to the non-conformances should be submitted to AQC and must include supporting evidence of closure to allow for off-site verification. In responding to the non-conformances, the organization should consider the root cause of the non-conformance and the potential for related issues in other parts of system.</p> <p>If all non-conformances are not closed within 60 days, a full reassessment may be required.</p>
×	<p>Evidence of major non conformities: Organization is not recommended for Issuance of Certificate and at this time. Follow-up audit will be scheduled to allow for on-site verification and closure of all issues within 60 days from the date of Stage 2.</p> <p>Once all non-conformances are closed, the recommendation for Issuance of certification may recommended.</p> <p>If all non-conformances are not closed within 60 days, a full reassessment may be required.</p>
×	<p>Not Recommended: Organization is not recommended for Issuance of certificate at this time. Full Stage 2 audit is required as the organisation has not implemented the system and process at pace. .</p>
<i>Proposed Audit Date for 1st Surveillance Audit 09.07.2024 (mm/dd/yy)</i>	
Sign Off : (Date) 10.07.2023	
AQC Report Submission	Client Acceptance for Report
Name of Team Leader: Amalash Kr. Mandal	Name: DR. SUHAS ROY
Signature: <i>Amalash Kr. Mandal</i>	Sign: <i>Suha</i>
	Designation: Principal S.R. Fatepuria College P.O.-Beldanga, Dt.-Murshidabad

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AUDIT CHECKLIST

VERIFICATION OF DOCUMENTED INFORMATION & RECORDS AS PER STD REQUIREMENT
(C- Conformity, NC-Non Conformity, O-Observation)

Clause Number	C/NC/O	Document Verification detail with statement of Conformity
4.1 understanding the organization and its context (Determination of external and Internal Issues)	C	Identified and included in Manual. (SRFC /QMS/XXX/QMM/001)
4.2 Understanding the needs and expectations of interested parties (Determination, Monitor & Review of the Interested Parties)	C	Identified and included in Manual. (SRFC/QMS/XXX/QMM/001)
4.3 Determining the scope of the quality management system (Boundaries and Type of Product and Services and any requirement not applicable)	C	Scope established and included in Manual. (Under 4.3, Page. No.13)
4.4 Quality management system and its processes (Established, Implement and maintained, process and Interaction of Process)	C	Process Flow found established.
5.1.1 Leadership & Commitment (Statement of ensurity)	C	Interviewed with Top Management. Respective project files found available with proper project monitoring methodology.
5.1.2 Customer focus (statement of conformity)	C	Interviewed with Top Management. Their course delivery as per plan and guideline from accredited body.
5.2 Quality policy (Establish, Implement, Maintain, communicated and understood)	C	Quality Policy established (Under clause no. 5.2.1 in Quality manual, page no. 15)
5.3 Organizational roles, responsibilities and authorities	C	Defined in Manual
6.0 Planning	C	
6.1 Actions to address risks and opportunities (Risk Assessment has done with prevention of undesirable effects)	C	Risk Register found maintain. (SRFC/QMS/FRM/03)
6.2 Quality objectives and planning to achieve them (Documented, Measurable, Monitored and communicated)	C	Quality Objectives found established and planned to achieve action(MAP)- Doc. Ref. no. SRFC/QMS/FRM/001
6.3 Planning of changes (As per 4.4) and Purpose, resource availability and allocation	C	Found available, as per committee decision and minutes.
7.1 Resources (Need of External resources, People, Infrastructure, Environment, Calibration records, Organisational Knowledge)	C	Green monitoring: Their Own monitoring data report in the form of "Green Audit" found maintained in every assessment year wise. Monitoring done against respective parameters.

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7.2 Competence (Employee records & Competence skill matrix)	C	Related training records found available
7.3 Awareness (Quality Policy, Objectives & Effectiveness of QMS)	C	Done through training and display.
7.4 Communication (what, who, when, whom, how)	C	Done through display, mail, meeting minutes.
7.5 Documented information (External Origin, Creation, Updation, Distribution, Preservation, version control, Retention and disposition)	C	Control of documented information procedure established.
8.1 Operational planning and control (Plan, Implement and control of process, documented information for process carried out as planned and Conformity of product or services)	C	Operational procedures established supported with work instructions and related records.
8.2.1 Customer communication (Enquiries, Contract, order, feedback, complaints)	C	Feedback and complaint register available
8.2.2 Determining of Requirements for products and services (Objective evidence for record of contract review and approval, Record verification of Statutory & Regulatory shall be referred here, record for communication of changes, legal requirements need to be re-verified if any concerns identified in Stage 1 audit or any new product added)	C	Maintain as per UGC guidelines.
8.2.3 Review of the requirements for products and services (Documented Information for Result of review and any new requirements for product or services)	C	Review methodology available.
8.2.4 Changes to requirements for products and services (the changed documents is aware and approved by relevant person)	C	Maintain
8.3 Design and Development (D&D)	C	Not Applicable
8.3.1 General Establish, Maintain and Implement the D&D Process	C	Not Applicable
8.3.2 D&D Planning (Record reference) 7.3.3 D&D Inputs (Record reference for the inputs) 8.3.4 D&D Controls (Record reference & Approval) 8.3.5 D&D Outputs (Record reference for outputs) 8.3.6 D&D Changes (Record reference for changes, approved, validated & verified before implementation & actions as necessary)	C	Not Applicable

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8.4.1 Control of externally provided processes, products and services (documented Information for criteria for the evaluation, selection, monitoring of performance and re-evaluation)	C	Tendering process, Vendor enrolment and evaluation records found available.
8.4.2 Type and extent of control (Control Verification)	C	Evaluation records found available.
8.4.3 Information for external providers (Competence and qualification of external provider)	C	Available with user departments
8.5.1 Control of production and service provision (Records verified work instructions for the processing including delivery and post-delivery activities, characteristic of product, equipments use and availability for monitoring and measurement)	C	Work instructions/Specifications found available followed by relevant records.
8.5.2 Identification and Traceability (Records verified for identification batch no or serial no in process as well as final result)	C	Traceability maintained through online.
8.5.3 Property belonging to customers or external providers (Documented Information of Lost or damaged property)	C	Not applicable
8.5.4 Preservation of output (objective evidence for meeting the defined storage conditions for handling, packaging, storage and protection)	C	Maintained in Laboratory materials
8.5.5 Post-delivery activities (Result outcome)	C	Maintained.
8.5.6 Control of changes (Documented Information change review result, person who is authorized to changes)	C	Change control format found available.
8.6 Release of final outcome services (Planned Arrangement documented information for acceptance criteria and authorized person traceability)	C	Maintained through online
8.7 Control of nonconforming outputs (Documented Information for Non conformity, action taken, concession, authority deciding action)	C	Methods/Action plan found available
9.1.1 Monitoring, Measurement analysis and evaluation	C	Monitoring done against set criteria.
9.1.2 Customer Satisfaction (Analysis of Customer Satisfaction)	C	Customer satisfaction analysis process found available
9.1.3 Analysis and Evaluation	C	Done

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9.2 Internal Audit (Frequency and Documented Information for Implementation of Audit Program and the audit result)	C	Yearly frequency and Internal Audit plan/records found available (05.01.2023 to 06.01.2023)
9.3 Management Review (Frequency, Input, Output, Documented Information for MRM Results)	C	MRM agenda and minutes found available. (Last done on 19.01.2023)
10.1 Improvement – General	C	Done and included in MRM
10.2 Nonconformity and Corrective action (Documented Information for nature of NC and result of action taken)	C	Procedure established.
10.3 Continual improvement	C	Objective and monitoring data found available.

END OF REPORT

Certificate of Registration

This is to Certify that
Quality Management System of

SEWNARAYAN RAMESWAR FATEPURIA COLLEGE

SEWNARAYAN RAMESWAR FATEPURIA COLLEGE, PO-BELDANGA,
DISTRICT-MURSHIDABAD-742133, WEST BENGAL, INDIA.

has been assessed and found to conform to the requirements of
ISO 9001:2015
for the following scope :

TEACHING, LEARNING AND EVALUATION PROCESSES RELATING TO
AWARDING OF BACHELOR DEGREES IN ARTS. SCIENCE, COMMERCE
ALONG WITH POST-GRADUATION DEGREE ARTS. SCIENCE
CONSIDERING ENVIRONMENT FRIENDLY AND ENERGY EFFICIENCY
MANNER IN COLLEGE GREEN CAMPUS.

IAF CODE: 37

Certificate No	: 23EQME36	Issuance Date	: 09/01/2024
Initial Registration Date	: 09/01/2024		
Date of Expiry*	: 08/01/2027		
1st Surv. Due	: 09/12/2024	2nd Surv. Due	: 09/12/2025



Director



(Scan to Verify)

Assurance Quality Certification LLC

Head Office: Sharjah Media City, SHAMS, Sharjah, UAE. e-mail: info@aqcworld.com,

Key Location: A-60, Sector - 2, Noida, Uttar Pradesh, 201301, India.

*Validity of the Certificate is subject to successful completion of surveillance audit on or before of due date, (in case surveillance audit is not allowed to be conducted, this certificate shall be suspended/withdrawn).

Certificate Verification: Please Re-check the validity of certificate at <http://www.aqcworld.com/activeclients.aspx> or www.aqcworld.com at Active Clients.

Certificate is the property of Assurance Quality Certification LLC and shall be returned immediately when demanded