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

Name of the	Sripat Singh College			
Organization				
Address	P.OJiaganj, DistMurshidabad.Pin742123			
Site Address (If any)				
No. of Employees	Teaching = 87, Non-teaching = Electrician=1, Total = 124	=31, House-keeping =3, Security =2,		
No. Of Shift	1			
E mail id	sscollege2009@gmail.com			
Contact Person	Dr. Kamal Krishna Sarkar			
Telephone/Fax	03483-255351			
Scope	"Teaching, Learning and Evaluation processes relating to awarding of Under Graduate in Arts and Science and Post Graduate in Bengali 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	Audit duration Man day(s): Technical Expert		
	Auditor: Technical Expert			
Starting date of Audit 21.06.2023				
End Date of Audit	21.06.2023			

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Brief about the organization

The vision was born of magnificent wealth, the munificence of a noble dreamer, and of no mean Mammon, of course. In some lonely hours the great Sripat Singh Dugar, the last perhaps of the clan of the jain Sitambar blue blood at Jiaganj, Murshidabad, felt he must do that. His I worthy partner of life, the co-sharer of his dream, his wife Rani Dhanya Kumari Dugar inspired his vision. So in 1949, in the month of April, the deed of gift was signed. Sripat Singh Dugar gifted his palatial outhouse (the magnificent 'Cutchery Bari'), with a further donation of seventy-five thousand rupees, for a college in this town of Jiaganj. It was Sripat Singh College, the first ever in this Sub-Division and in this vast region of rural West Bengal. On May 1, 1949, the Governing Body was formed with Sripat Singh Dugar of Founder President. On 11 June, the College was affiliated with the University of Calcutta. And on the auspicious morning of August 1, 1949, it took its first step as a co-educational Intermediate college with the Principal Sri Jogesh Chandra Bhattacharya, three full-time Lecturers, one clerk, one Librarian, one helper, 42 students in the I.A. class and 29 in the I.Sc. To encourage sincere students Sripat Singhji donated Rs. 10,000.00 for funding scholarships. The college was raised to Degree standard when in 1951, in terms of Govt. rules; he made a further donation of Rs. 30,000.00 for working fund. So, in 1951, B.A. Pass course started here with 9 students.

For the permanent economic security and upkeeping of the college the College, headed by Sripat Singh Dugar, moved the Government of West Bengal and particularly the then Chief Minister Dr. Bidhan Chandra Ray in 1953. In terms of Government Rules of the time Sripat Singhji donated One lakh rupees (Rs. 100000.00) along with the gift of the regular annuity of Rs 6000.00 every year from his Malda Properties. And so in July, 1954, W.B. Government initiated the Govt. Sponsored Scheme with Sripat Singh College as the first Govt. Sponsored Co-educational Degree College in the state. In 1960, B.Sc. (Pass) course was introduced here. Progress was in pace. Learners thronged. Accommodation became a problem.

Sripat Singhji donated land adjacent to the building and with his cooperation much more land was purchased in 1958. In 1959, a large sum of financial assistance for building construction was available from U.G.C. and the W.B. Government. This joint fund of Rs. 1,94,000.00 was utilized for the construction of a spacious 3-storeyed building with more than thirty rooms and halls. In 1961, the building was ceremonially opened by Dr. K. L. Srimali, the Union Minister for Education. W.B. Chief Minister Sri Prafulla Chandra Sen was present in the function. Academic activities were transferred here in August, 1961, and the ancestral out-house of Sripat Singhii, i.e. the old building of the college has since then been named as the 'Administrative Building'.

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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	21		
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
Amalish Kr. mandal.	Lead Auditor
Dr. Prasenjit Nanda	Associate Professor
Dr. Sagar Simlandy	Assistant Professor
Dr. Amritendu Haldar	Assistant Professor
Enamul Kabir Pasa	Assistant Professor
,	

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SUMMARY OF AUDIT

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

Non-Conformities Raised

0 Minor/Major Non Conformance 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

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	The state of the s
Tear	m Leader Declaration (Tick or cross Each Column as per applicability)
V	Auditing is based on a sampling process of the available information
V	Audit is combined, joint or integrated;
V	The effectiveness of corrective actions taken regarding previously identified
V	nonconformities have verified
1	Outcomes are effective and complying.
V	The internal audit and management review process are effective and complying with the
	requirements.
V	The scope of certification is appropriate.
V	The capability of the management system to meet applicable requirements and expected
V	The audit objectives have been fulfilled and achieved.
1	COMMENDATION
V	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
1	showing that the concerns raised by the auditor (s) have been rectified. A date for stage 2
	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 21.06.2023	
AQC Report Submission	Client Acceptance for Report
Name of Auditor: Amalesh Kumar Mandal Signature: Amalesh Kumar Mandal	Name: Sign Designation: DR. KAMAL KRISHNA SARKAR

R. KAMAL KRISHNA SARKA Principal Sripat Singh College Jiaganj, Murshidabad

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AUDIT CHECKLIST

REQUIREMENTS	COMMENTS	Status C/NC/O
Is the Information documented as required as per the ISO 9001:2015? Any other functional Specific Requirements?	Manual and other documented information available.	С
Has the discussion been held with personnel of the Client company for readiness for stage-2?	Yes, discussed and finalized as per discussion with the Principal and IQAC coordinator.	С
Has the Client site specific conditions been evaluated?	Admission process to course delivery functions evaluated against standard operating process, found compiled.	С
Has the company identified key performance, Process, Objectives and operation of Management System?	Established and implemented through Quality risk assessment and Quality objectives also been established.	С
Has the client had understanding with the ISO 9001:2015 Standard requirement and other site specific requirements.	Yes, done through training and awareness. 1. Training on Standard given by External body "Management System Consultancy"	С
Is the scope having boundaries and specific to client organization?	Scope defined in Manual and found as per course delivery.	С
If a client has Multisite then level of control is established.	Not applicable	С
Is the process and Equipment used adequate?	Yes, as per standard requirements and accreditation norms.	С

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Has the client identified Legal and Statutory Requirements applicable to Product and Organization?	ACCREDITED BY NAAC (2nd cycle), Affiliated to KALYANI UNIVERSITY, UNIVERSITY OF CALCUTTA. The Department of Education in Sripat Singh College was affiliated with the University of Calcutta. And on the auspicious morning of August 1, 1949, it took its first step as a co-educational Intermediate college with the Principal Sri Jogesh Chandra Bhattacharya, three full- time Lecturers	C
Is the resource being adequate for stage 2 audit?	Yes, documented information found established as per standard requirement and organization requirements. So proposed for stage-2 audit. The implementation and monitoring system will be checked in stage-2 audit.	С
Is Internal Audit planned and performed and effective?	Yes	С
Is MRM planned and performed and Effective?	Yes	С
Are Internal audits conducted as planned? Date of Last Internal Audit?	Yes, Internal Audit Report w.r.t Year to year Green monitoring checks found conducted and maintained properly against all possible parameters.	С
Are Management reviews conducted as planned? Date of Last MRM?	Yes, their committee meeting outcome was maintained. Last conducted month of January, 2023	С

END OF REPORT

AQC GLOBAL LLC	
ISO 9001:2015	Rev 01 (15.02.2021)
Stage 2 Quality Audit Report	

Name of the Organization	Sripat Singh College		
Address	P.OJiaganj, DistMurshidabad.Pin742123		
Site Address (If any)			
No. of Employees	Teaching = 87, Non-teaching = 31, House-keeping Total = 124	g =3, Security =2, Electrician=1,	
No. of Shift	1		
E mail id	sscollege2009@gmail.com		
Contact Person	Dr. Kamal Krishna Sarkar		
Telephone/Fax	03483-255351		
Scope	"Teaching, Learning and Evaluation processes relating to awarding of Under		
	Graduate in Arts and Science and Post Graduate in Bengali 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 No of Mandays:		
	Auditor:	1	
	Technical Expert		
Starting date of Audit	12.07.2023		
End date of Audit	12.07.2023		

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Brief about the organization

The vision was born of magnificent wealth, the munificence of a noble dreamer, and of no mean Mammon, of course. In some lonely hours the great Sripat Singh Dugar, the last perhaps of the clan of the jain Sitambar blue blood at Jiaganj, Murshidabad, felt he must do that. His I worthy partner of life, the co-sharer of his dream, his wife Rani Dhanya Kumari Dugar inspired his vision. So in 1949, in the month of April, the deed of gift was signed. Sripat Singh Dugar gifted his palatial outhouse (the magnificent 'Cutchery Bari'), with a further donation of seventy-five thousand rupees, for a college in this town of Jiaganj. It was Sripat Singh College, the first ever in this Sub-Division and in this vast region of rural West Bengal. On May 1, 1949, the Governing Body was formed with Sripat Singh Dugar of Founder President. On 11 June, the College was affiliated with the University of Calcutta. And on the auspicious morning of August 1, 1949, it took its first step as a coeducational Intermediate college with the Principal Sri Jogesh Chandra Bhattacharya, three full-time Lecturers, one clerk, one Librarian, one helper, 42 students in the I.A. class and 29 in the I.Sc. To encourage sincere students Sripat Singhji donated Rs. 10,000.00 for funding scholarships. The college was raised to Degree standard when in 1951, in terms of Govt. rules; he made a further donation of Rs. 30,000.00 for working fund. So, in 1951, B.A. Pass course started here with 9 students.

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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:

	ISO 9001:2015	(15.02.2021)
	Stage 2 Quality Audit Report	, , , , , , , , , , , , , , , , , , , ,
Audit Duration for Stage	2	COS de Carrier de California de California de Carrier d
Are quoted man-days adequate?	Yes	
Any change in employee detail?	None	
Any Change in Scope?	None	
Any additional Information:	None	

AQC GLOBAL LLC

ATTENDENCE SHEET:

NAME OF PERSON	DESIGNATION	
-Imalish Us. marked.	Lead Auditor	
Dr. Prasenjit Nanda	Associate Professor	
Dr. Sagar Simlandy	Assistant Professor	
Dr. Amritendu Haldar	Assistant Professor	
Enamul Kabir Pasa	Assistant Professor	
		λ -

SUMMARY OF AUDIT

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AQC GLOBAL LLC ISO 9001:2015 Stage 2 Quality Audit Report F14 Issue 01 Rev 01 (15.02.2021)

Γ	AREA OF IMPROVEMENTS	No. of Street,
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

Tear	Team Leader Declaration (Tick or cross Each Column as per applicability)		
	Auditing is based on a sampling process of the available information		
\vee	Audit is combined, joint or integrated;		
	The effectiveness of corrective actions taken regarding previously identified		
	nonconformities have verified		
	Outcomes are effective and complying.		
V	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		
V	The audit objectives have been fulfilled and achieved.		

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Recommendation:

CCOM			
7	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		
×	the requirements of the reference standard with lations, Team Leader is pleased to put forward a crificate of Organization upon off-site verification of from the date of Stage 2 audit. Responses to the non-QC and must include supporting evidence of closure to ading to the non-conformances, the organization should rmance and the potential for related issues in other parts		
	If all non-conformances are not closed w	vithin 60 days, a full reassessment may be required.	
×	Evidence of major non-conformities Certificate and at this time. Follow-up a and closure of all issues within 60 days i	: Organization is not recommended for Issuance of audit will be scheduled to allow for on-site verification from the date of Stage 2.	
	Once all non-conformances are closed, t recommended.	he recommendation for Issuance of certification may be	
	If all non-conformances are not closed v	vithin 60 days, a full reassessment may be required.	
×	Not Recommended: Organization is not recommended for Issuance of certificate at this Full Stage 2 audit is required as the organisation has not implemented the system and procedure.		
	Proposed Audit Date for 1st	Surveillance Audit 11.07.2024 (mm/dd/yy)	
Sion	Off: (Date) 12.07.2023		
	Report Submission	Client Acceptance for Report	
	e of Team Leader: Amalesh Kr. Mandal	Name: A -20	
	Amaleh war manday.	Sign Designation:	
Signa	ature:	DR. KAMAL KRISHNA SARKAR Principal	

Sripat Singh College Jiaganj, 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)	С	Identified and included in Manual. (SSC/QMS/XXX/QMM/001) *To capture those issues Staff and student feedback process was initiated and documented for review.
4.2 Understanding the needs and expectations of interested parties (Determination, Monitor & Review of the Interested Parties)		Identified and included in Manual. (SSC/QMS/XXX/QMM/001) *To capture those issues Staff and student feedback process was initiated and documented for review.
4.3 Determining the scope of the quality management system (Boundaries and Type of Product and		Scope established and included in Manual. (Under 4.3, Page. No.13). Scope defined in Manual and found as per course
Services and any requirement not applicable)		delivery. Verified against their affiliation.
4.4 Quality management system and its processes (Established, Implement and maintained, process and Interaction of Process)		Process Flow/Process description found established as guided by accreditation norms.
5.1.1 Leadership & Commitment (Statement of ensures)	t C	Interviewed with Top Management (Here with Principal). Respective project files found available to achieve quality delivery in Green, Energy and Environment issues.
5.1.2 Customer focus (statement o conformity)	f C	Interviewed with Top Management. Their course delivery as per plan and guideline.
5.2 Quality policy (Establish Implement, Maintain, communicate and understood)	- 1	Quality Policy established (Under clause no. 5.2.1 in Quality manual, page no. 15) and found displayed on the college campus signed by the Principal.
5.3 Organizational roles responsibilities and authorities	s, C	Defined in Manual and available in the College office.
6.0 Planning	С	To Established Eco friendly and Green college campus.
6.1 Actions to address risks an opportunities (Risk Assessment had one with prevention of undesirable effects)	as	Risk Register found maintained. (SSC/QMS/FRM/03). Initially they have identified 3 nos Quality related risk and probable action plan has taken. Review status will be checked in the next Surveillance Audit.

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6.2 Quality objectives and planning to achieve them (Documented, Measurable, Monitored and communicated)	С	Quality Objectives found established and planned to achieve action (MAP)- Doc. Ref. no. SSC/QMS/FRM/001
6.3 Planning of changes (As per 4.4) and Purpose, resource availability and allocation	С	Found available, as per committee decision and minutes.
7.1 Resources (Need of External resources, People, Infrastructure, Environment, Calibration records, Organizational Knowledge)	С	Green monitoring: Their Own monitoring data report in the form of "Green Audit" is maintained in every assessment year wise. Monitoring done against respective parameters.
7.2 Competence (Employee records & Competence skill matrix)	С	Related training records found available. 1. Training on Standard given by External body "Management System Consultancy"
7.3 Awareness (Quality Policy, Objectives & Effectiveness of QMS)	С	Done through training and display. 1. Training on Standard given by External body "Management System Consultancy"
7.4 Communication (what, who, when, whom, how)	С	Done through display, mail, meeting minutes.
7.5 Documented information (External Origin, Creation, Updation, Distribution, Preservation, version control, Retention and disposition)	С	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)	С	Operational procedures established supported with work instructions and related records. 1. Last month data checked w.r.t course/class delivery details.
8.2.1 Customer communication (Enquiries, Contract, order, feedback, complaints)	С	Feedback and complaint system available w.r.t internal (Staff) and external (Student)

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8.4.2 Type and extent of control (Control Verification)	С	Evaluation records found available. Generally before payment the related function Head consent against the external provider.
8.4.3 Information for external providers (Competence and qualification of external provider)	С	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, equipment's use and availability for monitoring and measurement)	С	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)	С	Traceability maintained through online/offline both. Class delivery, performance management and others maintained.
8.5.3 Property belonging to customers or external providers (Documented Information of Lost or damaged property)	С	Not applicable
8.5.4 Preservation of output (objective evidence for meeting the defined storage conditions for handling, packaging, storage and protection)	С	Maintained in Laboratory materials
8.5.5 Post-delivery activities (Result outcome)	С	Maintained in database against each function wise.
8.5.6 Control of changes (Documented Information change review result, person who is authorized to changes	С	Change control file found available. Means old/dormant documents kept separate.
8.6 Release of final outcome services (Planned Arrangement documented information for acceptance criteria and authorized person traceability)	С	Maintained through online/offline both. Result delivered by Authorised person only.
8.7 Control of nonconforming outputs (Documented Information for Nonconformity, action taken, concession, authority deciding action)	С	Methods/Action plan found available

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9.1.1 Monitoring, Measurement analysis and evaluation	С	Monitoring done against set criteria. Meeting minutes available as outcome of process.
9.1.2 Customer Satisfaction (Analysis of Customer Satisfaction)	С	Customer satisfaction analysis process found available. Feedback taken from Staff as well as from Student both to know the Quality delivery status.
9.1.3 Analysis and Evaluation	С	Done
9.2 Internal Audit (Frequency and Documented Information for Implementation of Audit Program and the audit result)	С	Yes, Internal Audit Report w.r.t Year to year Green monitoring checks found conducted and maintained properly against all possible parameters.
9.3 Management Review (Frequency, Input, Output, Documented Information for MRM Results)	С	Yes, their committee meeting outcome was maintained. Last conducted month of January, 2023
10.1 Improvement – General	С	Done and included in MRM
10.2 Nonconformity and Corrective action (Documented Information for nature of NC and result of action taken)	С	Procedure established.
10.3 Continual improvement	С	Objective and monitoring data found available against respective Projects/KPI.

END OF REPORT