CLIENT AGREEMENT

This agreement is made between AQC Global LLC (AQC) having its Registered office at Office No.2, Ground Floor, Sharjah Media City, Sharjah, UAE, Providing the management system assessment and Certification Services (hereinafter called as First Party or AQC)

ANI

Name of Client Company KANCHRAPARA COLLEGE, Kanchrapara, North 24 Parganas, PIN- 743145. (hereinafter called as Second Party)

This agreement shall bind both of the parties for the scheme/standard client applied for certification and no other statements, representations or arguments, verbal or written, which contradicts to the terms and condition of this agreement is void made by either representative of the parties. This agreement is entered into the following Terms and Conditions:

1. General Conditions

- 1.1 Certification Audit of Client's management system shall be performed on the basis of the requirements of applicable standards.
- 1.2 The Certification audit shall include a two-stage initial audit, surveillance audits in the first and second years, and a recertification audit in the third year prior to expiration of certificate.
- 1.3 Client shall make provisions to accommodate the presence of observers (e.g. accreditation assessor or trainee auditors or witnesor).
- 1.4 Client shall comply with certification requirements and make all necessary arrangements for the conduct of the audits, including provision for examining documentation and the access to all processes and areas, records and personnel for the purposes of initial certification, surveillance, recertification and resolution of complaints;
- 1.5 Client Organization shall provide to the AQC all documents, information and facilities at sites as required, to enable AQC to provide its services under this Agreement and sites will be audited as per the sample plan prepared by AQC. The AQC can select any accredited client for witness audit.
- 1.6 The client shall permit and cooperate for the witness audit and allow the accreditation body or FSSC Foundation assessor's to assess the competency of the AQC auditor. There shall be no additional charges for witness audit and all the expenses shall be borne by AQC.
- 1.7 AQC shall not be liable for any loss or damage due to any failure or delay in performance of this agreement resulting from any cause beyond our reasonable control, compliance with applicable regulations or directive of national, state or local governments is the responsibility of the client.
- After the signing of agreement, if the applicant wishes to cancel it, the advance or any other charges paid shall not be refundable.

 Liability of AQC is limited to a maximum of amount equivalent to the fees paid by the client. The offer given in agreement is valid for 30 days from the date of issuance.
- 1.9 The client shall agree allow and give access to Auditors and /or Certification personnel or observer to carry out any auditing activity, Inspection or investigation against any complaint.
- 1.10 The Organization hereby warrants the completeness and accuracy of all documents and accuracy of all information supplied to AQC for the purposes of this Agreement. not to make or permit any misleading statement regarding its certification.
- 1.11 clients are agreed to release ISO 13485 audit report information to regulators that recognize ISO 13485.

2. Terms of Payment:

AQC shall inform about the fees for application, initial certification and continuing certification in its Quotation/work. On acceptance of quotation/work order second party is entitled to pay the amount as agreed. In case of failure of the payment timely the Granting of Certification may refused.

3. Rights and Duties of Client Organization

- 3.1 Client Organisation shall comply with the requirements of AQC when making reference to its certification status in communication media such as the Internet, brochures or advertising or other documents
- 3.2 The Organization agrees to comply with relevant provisions of the provision of the standard requirement for which the certificate is applied, with the requirements for certification-granting, maintaining, reducing, extending, suspending, withdrawing certification and recertification If the organization has multiple sites the agreement shall cover all the sites covered by the scope of the certification.
- 3.3 Client will agree to ensure that the auditors/ assessors are properly briefed about health, safety and other necessary safety hazards that they may encounter during the audits. Client will be responsible for providing them with the personnel protective / safety equipment during the audits
- 3.4 Client Organization shall not use or present the use of certification document in a misleading manner or make such statements.
- 3.5 Upon withdrawal of its certification, discontinues its use of all advertising matter that contains a reference to certification as directed by the certification body.
- 3.6 Client Organization shall amend all advertising matter when the sector and scope of certification has been reduced
- 3.7 Client organization shall not allow reference to its management system certification to be used in such a way as to imply that the certification body certifies a product (including service) or process; and not imply that the certification applies to activities and sites that are outside the scope of certification
- 3.8 not use its certification in such a manner that would bring the certification body and/or certification system into disrepute and lose public trust.
- 3.9 The client shall agree to inform AQC any changes with respect to Management System, Organizational change including Legal, Commercial, Organisational status, ownership, Changes in personnel like managerial, decision making and Technical staff, change of location or address or site, changes in the certified scope and any major changes in management system and processes including additional or deletion of processes / activities, fatal incidents, serious injuries, occupational disease or legal action by a regulatory authority. Any such issues related OHS finding by any third party shall be brought into notice of AQC during Surveillance or Re-Certification Audit.

FSSC clients shall inform the AQC with in 3 days the following situations

- any significant changes that affect the compliance with the Scheme requirements and obtain advice of the CB in cases where there is doubt over the significance of a change;
- ii. serious events that impact the FSMS or FSQMS, legality and/or the integrity of the certification which include legal proceedings, prosecutions, situations which pose major threats to food safety, quality or certification integrity as a result of natural or man-made disasters (e.g. war, strike, terrorism, crime, flood, earthquake, malicious computer backing etc.):
- iii. public food safety events (such as e.g. public recalls, calamities, food safety outbreaks, etc.);
- iv. changes to organization name, contact address and site details;
- changes to organization (e.g. legal, commercial, organizational status or ownership) and management (e.g. key managerial, decision-making or technical staff);
- vi. changes to the management system, scope of operations and product categories covered by the certified management system;
- vii. any other change that renders the information on the certificate inaccurate.
- 3.10 The Client organization shall ensure that the information provided to AQC by the organization, relevant to its management system is kept updated and it shall promptly notify AQC of any intended change in its Management system which would significantly affect the effective implementation of its management system. Changes such as contact address and sites, legal status, scope of Certification, organizational structural changes needs to be communicated to the AQC

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- 3.11 Certified Client Organisation informs to AQC without delay, of matters that may affect the capability of the management system to continue to fulfill the requirements of the standard used for certification. These include, for example, changes relating to the legal, commercial, organizational status or ownership, organization and management (e.g. key managerial, decision-making or technical staff), contact address and sites, scope of operations under the certified management system, and major changes to the management system and processes. AQC shall review the changes and may conduct the audit to verify the changes.
- 3.12 Allow the Accreditation Board Assessors with or without AQC Audit Team to verify the relevant documents and records maintained for particular Management System Certification, the information about the audit will be provided well in advance.
- 3.13 AQC may at any time, refuse to issue a certificate or suspend or withdrawn such certificate in circumstances where, in AQC's opinion, compliance with the specified standard/ specification (including not meeting the regulatory requirements) is not maintained on continuous basis or conditions of this contract are not met. In case of withdrawn, the customer's name shall be removed from the register of certified companies and such information may be available to public. In case of the FSSC 22000, AQC shall suspend the certificate with the immediate effects if any critical non conformity is identified or client is having unwillingness to comply with the scheme requirements.
- 3.14 The Client organization shall declare in advance that any of its employee does not have any conflict of Interest with the AQC.
- 3.15 This the client responsibility to accept and facilitate accreditation Board IAS/DAC from which seeking accreditation for its Management System without any or with limited time notice
- 3.16 In case of OHSMS, the certified client informs the AQC, without delay, of the occurrence of a serious incident or breach of regulation necessitating the involvement of the competent regulatory authority.
- 3.17 Information on incidents such as a serious accident, or a serious breach of regulation necessitating the involvement of the competent regulatory authority, provided by the certified client or directly gathered by the audit team during the special audit, shall provide grounds for the AQC to decide on the actions to be taken, including a suspension or withdrawal of the certification, in cases where it can be demonstrated that the system seriously failed to meet the OH&S certification requirements.

4. Rights and Duties of AQC

- 4.1 The ownership for Logo or mark, Certification documents or Certificate, Audit reports contents etc lies with AQC and in any situation the second party make any incorrect reference to the certification status or misleading the use of certification documents, Mark or logo or audit reports then AQC will take the following steps
 - 4.1.1 Prima Facie AQC will request to the second party for correction and corrective action.
 - 4.1.2 In case second party is not taking the corrective action then AQC shall suspend and Withdrawal of certification.
 - 4.1.3 In case still Second party is not taking action then a notice of Infringement of Intellectual property shall be given and Legal action shall be taken against the second party.
 - 4.2 AQC is responsible for the management and confidentiality of all information obtained, gathered or created during the performance of the certification activities at all levels of its structure including the committees and external bodies or individuals acting on its behalf
 - 4.3 AQC informs the client that client name, address and certification detail shall be in the public domain and publicly accessible from the AQC Website or on demand. All other information, except for information that is made publicly accessible by the client, shall be considered confidential. For FSSC client organization the certification detail shall be shared with FSSC foundation and shall be posted on the FSSC website and Portal which is in public domain and accessible by public.
 - 4.4 AQC shall not disclosed information about a particular certified client or individual to a third party without the written consent of the certified client or individual concerned Except as required in this part of ISO/IEC 17021.
 - 4.5 When the AQC is required by law or authorized by contractual arrangements (such as with the accreditation body/FSSC Foundation) to release confidential information, the client or individual concerned shall, unless prohibited by law, be notified of the information provided. In case of FSSC certificate, the client company shall allow to AQC to share the information regarding to the certification and auditing process with the FSSC foundation, GFSI and Governmental authorities when required.
 - 4.6 The certification body shall have processes and where applicable equipment and facilities that ensure the secure handling of confidential information
 - 4.7 Any information about the client (e.g. complaint, Notice or feedback) received by AQC from the any person other than client like complainant/Regulators/Statutory bodies or any other person shall be treated confidential and cant not be disclosed to client. All other information, except for information that is made publicly accessible by the client, will be considered confidential by AQC
 - 4.8 when there is any change in the requirement of the certification then AQC will send a notice to client company intimating the new requirement or change. The client has to Comply to notice of any changes to its requirements for certification and verification of compliance with the new requirements
 - 4.9 AQC shall provide information of client's, address standard and scope in public domain.
 - 4.10 Information provided by the AQC to any client or to the marketplace, including advertising, shall be accurate and not misleading.
 - 4.11 AQC shall provide a detailed description of the initial and continuing certification activity, including the application, initial audits, surveillance audits, and the process for granting, refusing, maintaining of certification, expanding or reducing the scope of certification, renewing, suspending or restoring, or withdrawing of certification which is available on the website of the company i.e www.aqcworld.com
 - 4.12 the normative requirements for certification; if required form time to time
 - 4.13 information about the fees for application, initial certification and continuing certification in the form of the quotation or work order.
 - 4.14 when there is any change in the requirement of the certification then AQC will send a notice to client company intimating the new requirement or change. The client has to Comply to notice of any changes to its requirements for certification and verification of compliance with the new requirements
 - 4.15 AQC can conduct audits of certified clients at short notice or unannounced audit to investigate complaints after ensuring that it belongs to AQC, or in response to changes (Legal status, Organisation and management, address and sites, scope, major changes to management system and processes, fatal accidents or a legal action by any regulatory authority) OR as follow up on suspended clients. The client Company cant refuse or reject or make any objection for the Auditor or the Audit Team in case of short notice Audit.
 - 4.16 In case of FSSC 22000, during the period of three year cycle one surveillnace audit shall be conducted as unannounced audit and then once in 3 years thereafter. In case certified organisation is not giving access for the unannounced audit then AQC has right to suspend the certificate with immediate effect.

$\textbf{5.} \quad \textbf{Procedure for Non Conformity Management for FSSC: (For more detail kindly visit at www.aqcworld.com)} \\$

- 5.1 Audit finding may be conformity and non conformity, opportunity for Improvement unless prohibited by the requirements of a management system certification scheme. The Nonconformity may be minor or major or critical. Non conformity may Minor, Major or Critical
- 5.2 In case of conformity or detailing nonconformity and its supporting audit evidence shall be recorded and reported to enable an informed certification decision to be made or the certification to be maintained.
- 5.3 A finding of nonconformity shall be recorded against a specific requirement and shall contain a clear statement of the nonconformity, identify in detail the objective evidence on which the nonconformity is based. Nonconformities shall be discussed with the client to ensure that the evidence is accurate and that the nonconformities are understood.
- 5.4 The Auditor shall refrain from suggesting the cause of nonconformities or their solution.
- 5.5 The Team Leader shall get the acceptance of the client representative on the agreed non conformities.
- 5.6 In case of minor non conformity the client organisaton shall submit the correction and corrective action plan and evidence which are subject to acceptance of AQC with 28 days from the last o audit. If there is delay then client organization is liable to Suspencion.

CLIENT AGREEMENT

6. Procedure for Complaints & Appeal

Procedure for Complaint and appeal is given on the website www.aqcworld.com

7. Liability:

- 7.1 Except, in the case of deliberate neglect on the part of AQC, its employees, servants or agents, AQC shall not be liable for any loss or damage sustained by any person due to any act of omission or error whatsoever or howsoever caused during the performance of its assessment, certification or other services.
- 7.2 In the case of neglect, as aforesaid, the limit of any loss, damage or otherwise AQC liability will be limited to an amount not exceeding the maximum fee (if any) charged by AQC for the particular service in respect of which the neglect arose. While the restrictions on liability herein contained are considered by the parties to be reasonable in all the circumstances, if such restrictions taken together or any one of them shall be judged to be unlawful or unenforceable then the said restriction shall apply with such words deleted or amended or added.
- 7.3 The provision of this clause shall not apply to any death or personal injury but the Organization shall maintain at all time adequate insurance sufficient to cover all liability that may arise as a result of any matter arising in pursuant to this Agreement.

8. Termination of the Contract:

Any party can terminate the contract by giving one month notice. The aggrieved party may go in the appeal procedure as displayed on the website www.agcworld.com. AQC can terminate the contract in the following conditions:

- a) Client company is not fulfilling any condition as mentioned in each clause of this contract.
- c) Client company refuse to pay any amount which is due on it.
- c) Client company is not giving access to the requisite information which is required to fulfill the objective of the audit.
- d) Client company is not giving any information which is required to the Authorities.

9. Force Majeure:

AQC shall not be liable in any respect, should it be prevented from discharging such obligations as a result of any matter beyond its control which could not be reasonably foreseen.

10. Disputes:

In case of the dispute arise between the parties then it shall be settled by appointment of the sole arbitrator as The UAE Laws. Aggrieved party can challenge the award of arbitrator with 30 days of the award but the Jurisdiction area shall be UAE only and the case can be filed in the competent court of UAE only.

FOR & ONBEHALF OF	FOR & ONBEHALF OF
TOR & ONDERREE OF	TOR W ONDERFIEL OF
AQC Global LLC	Name of Company KANCHRAPARA COLLEGE
Amalesh Kr. Mandal.	Principal Kanchrapara College Kanchrapara, 24 Pgs (N)
Name of Signatory: Designation:	Name of Signatory : Kanchrapara, 24 Pgs (N)
Date:	Designation:
	Date:

AQC GLOBAL LLC APPLICATION FORM

F08 Issue 01 Rev 08

Date of Application	01.06.2023		
Name of the Company	KANCHRAPARA COI	LLEGE	
Certification Scheme	ISO 9001:2015 √ ☐ ISO 140	001:2015√	:2018
No of Sites	1		
Site Address	No of shift	Total No of employees	
Kanchrapara, North 24 Parganas, PIN- 743145.	1	66	
2. Employage Status			
Employees Status Applicable to only 9001,	No of Employees Full Time I	Different job : 54	
14001 & 50001	No of Employees Pull Third I No of Employees performing No of Part time Employees: 8 No of Temporary Workers: No of Unskilled workers: 4	3	
Applicable to only ISO 27001 & ISO 20000-1	Total Number of Employees v	vorking in all Shift with in	the ISMS/ITSMS Scope :
Name of Concerned Person	Dr. Pranab Kumar Bera		
Position / Designation	Principal		
Mobile Number, Website,	(033) 25858790/5159, http://kanchraparacollege.ac.in/,		
E-mail	info@kpcoll.ac.in		
Legal Status	Company : Private ☐ Public ☐ Proprietorship ☐ Partnership ☐ Govt Undertaken√☐ PSU ☐ NGO ☐		
Statutory and Regulatory Requirement	UGC affiliation copy		
Outsourced Process, If any	SpecializedInternal A Consultance	udit (Ms. Champa Ma	ndal, Management System Rishi Arobindo Road,
Scope of Certification	Teaching, Learning and B.A, B.SC, & B.COM I Environment friendly an Campus.	Evaluation processes Hons as well as Gene d Energy efficiency r	relating to awarding of tral Courses considering manner in College Green
Key Process Involved	Teaching, Learning and E Institutional Social Response		ilding, Skill Enhancement,
Accreditation	EGAC √ ☐ Compliance		
Non Applicability of clause, if any	Cl Justification au se		
		ntal organization. Course mapplicability of Design and	odule and others requirements development)
No of Effective Employees for EnMS	No of personnel shall be who EnMS and includes Top Mana		10
	No of Team member Energy N	Management Team	10
	No of Persons responsible for energy performance	major changes affecting	4

AQC GLOBAL LLC APPLICATION FORM

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	No of Persons responsible for developing, implementing or maintaining energy performance, improvements including objectives, targets and action plans
	No of Persons responsible for significant energy uses 0
	Total Number of Effective Employees for EnMS 10
Certification Program Required	Initial √ □ Surveillance □ Recertification □ Transfer □
Do you have a specific Programme/Timescale for achieving Registration	Yes √ □ NO □
Is Consultants Involved ? If yes Specify the Name of Consultant	Yes √ □ NO □ (Champa Mandal of Management System Consultancy)
Combined Audit	In the case of several certification programmes, would you like the audits to be Combined or carried out separately? ☐ Yes ☐ √ No If the answer is yes, please specify which combination:
Is Already Certified for any Standard	Yes
Additional Information Ro	
EMS	How many Sites the company is Managing at the same time? (One Site)
	Do you have Register of Significant Environment aspect? Yes √□ No
	Do you have An Environmental Management Manual? Yes √ □ No
	Do you have An Internal Environmental Audit Programme? Yes √□ No
	Has the Internal Environmental Audit Programme been implemented? Yes √ □ No
FSMS/FSSC	HACCP Implementation or Study Conducted : Yes No No of HACCP Studies : No of Sites: No of Process Lines : Processing is Seasonal Continuous
OHSMS	Explain the Hazards identified: Detail any OHS Risk Associated with process: Material Used in Hazardous Process: Legal Obligation arising from OHS Legislation:
EnMS	Annual Energy Consumption (TJ): 0.65 TJ No Of Energy Sources: 145 nos. Number of significant energy uses (SEUs): 9 nos.
ISMS/ITSMS	Do you have confidentiality information that would be excluded during onsite audit (Give In detail)
	Additional Information Required (Tick one in each box) Critical business sectors are sector that may affect critical public services that will cause risk to health, security, economy, image and governmental ability to function that may have a very large negative impact to country
Business and organization C	Complexity
Types of Business and regulatory Requirement	1. Organisation work in non critical business sector and non regulated sector √
	2. Organisation has customer in critical business sector.

AQC GLOBAL LLC APPLICATION FORM

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		3.	Organ	isation works in cri	tical business s	ector.	
Process and	l Task	1.	work				e lots of persons doing t the same tasks, few
		2.	Standa	ard but not repetitive	e process with	high number	of products or services
		3.		lex Process, High nued in scope of certif		cts and service	es, many business units
	stablishment of ement System	1.	ISMS place.		tablished and/o	or other man	agement system are in
		2.	Some	elements of other M	Management sy	ystem are imp	elemented, others not $\sqrt{}$
		3.	No ot establi		ystem implem	ented at all,	ISMS is new and not
IT Environn	nent Complexity						
IT Complexity	Infrastructure	1.		r highly standardize	d IT platforms	, servers, ope	rating system, database,
		2.	Severa	al different IT platfo	orms, servers, o	operating syst	em, database, networks
		3.	Many etc	different IT platfo	rms, servers, o	perating syst	em, database, networks
Dependenc		1.	Little	or no dependency or	n outsourcing \		
	and suppliers loud services	2.		dependency on out		appliers, relat	ed to some but not all
		3.		dependencies on or ess activities.	utsourcing or	supplier, larg	e impact on important
Information	•	1.	Non o	r very limited in hou	ise system/app	lication devel	opment √ □
Developme	nt	2.	Some	in house or outso	ourced system	/application	development for some
				tant business purpos	_ `	**	•
		3.	Extens	sion in house or	outsourced s	ystem/applica	tion development for
			impor	tant business purpos	e. 🗌		
ITEMS							iew by the audit team
							on and to provide the
DECLAD/	TION: The abo			ling justification. Ki			elief and I am authorized to
	th information on				est of my know	wiedge allu b	ener and r am aumorized to
Name	Dr. Pranab Kr.			Designation	Principal	Signature	DV BOYA
				g :			P.K. Bera
							Principal Kanchrapara College Kanchrapara, 24 Pgs (N)
AQC Offic	cial Use				•	1	
		ed fo	or Appl	ication Review :	√ Yes	☐ No	ı
Name of C				Name of			D
Amalesh	Kr. mandal.			Application reviewer			at e

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

Name of the Organization	KANCHRAPARA COLLEGE	
Address	Kanchrapara, North 24 Parganas, PIN- 743	145
Site Address (If any)	Kanchraparacollege.ac.in	
No. of Employees	Teaching = 54, Non-teaching = 8, House-ke	eeping =2, Security =1,
	Electrician=1, Total = 66	
No. Of Shift	2	
E mail id	info@kpcoll.ac.in	
Contact Person	Dr. Pranab Kumar Bera	
Telephone/Fax	(033) 25858790/5159	
Scope	"Teaching, Learning and Evaluation proc	esses relating to awarding of
	B.A, B.SC, & B.COM Hons as well as	General Courses considering
	Environment friendly and Energy efficien	ncy manner in College Green
	Campus.''	
Technical Area	Teaching, Learning and Evaluation, Capaci	ty Building, Skill
	Enhancement, Institutional Social Responsi	bility
Exclusions	Design and development	
Audit Team	Lead Auditor: Amalesh Kumar	Audit duration Man day(s):
	Mandal	Technical Expert
	Auditor:	
G	Technical Expert	
Starting date of Audit	21.06.2023	
End Date of Audit	21.06.2023	1.4 1 4 1 . 4 4 . 6
Brief about the	Kanchrapara Colllege a NAAC Accre	*
organization	higher learning at the heart of cosm	•
	dedicated band of highly qualified teach	1 0
	group of non-teaching employee, was f	
	with its affiliation to the University of	Kalyani. Having traversed a
	fairly long path in the course of 39 ye	ars since its inception in an
	ambience very much friendly and conge	enial to the dissemination of
	education and knowledge, the college	has registered an enviable
	standard in terms of	academic excellence.
	Housed in its own three-storied building	g. Kanchrapara College runs
	academic teaching in different tradition	
	B.Com (GEN & Hons.) degree courses	·
	Laboratory and Internet facilities. In	-
	proposed new Science Building com	•
	60,000sq.ft. has been completed and c	- •
	practical, are being held regularly. The	_
	building is going to be completed sho	orthy for holding of classes

AQC GLOBAL LLC	F13 Issue 01
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Stage 1 Audit Report	

	Kanchrapara College, established in 1972, is the general degree college at Kanchrapara, in North 24 Parganas district, West Bengal. It offers undergraduate courses in arts, commerce and sciences. The college has a rich library with huge collection of printed and electronic documents. It is affiliated to University of Kalyani. This
	college was established on 13 November 1972, under the guidance of the then Member of the Legislative Assembly (India) of the area, Mr. Jagadish Chandra Das.[3] Initially it started its journey with only 32 students by affiliation of only Pre-University class.
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 Stag	e 1
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
Amalesh Kr. Mandal.	Lead Auditor

SUMMARY OF AUDIT

AREA OF IMPROVEMET

(Areas of Improvement Which May be Identified as Non Conformities During Stage 2 Audit)

AQC GLOBAL LLC	F13 Issue 01
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Stage 1 Audit Report	

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

Tear	Team Leader Declaration (Tick or cross Each Column as per applicability)		
$\sqrt{}$	Auditing is based on a sampling process of the available information		
$\sqrt{}$	Audit is combined, joint or integrated;		
	The effectiveness of corrective actions taken regarding previously identified		
	nonconformities has verified		
$\sqrt{}$	outcomes are effective and complying.		
$\sqrt{}$	The internal audit and management review process are effective and complying with the		
	requirements.		
$\sqrt{}$	The scope of certification is appropriate.		
$\sqrt{}$	The capability of the management system to meet applicable requirements and expected		
$\sqrt{}$	The audit objectives has been fulfilled and achieved.		
REC	COMMENDATION		
	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		
	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	Name: Dr. Pranab Kumar Bera
Signature: Amalesh Kumas Mandal	Sign: Principal Ranchrapara College
	Kanchrapara College Designation: Kanchrapara, 24 Pgs (N)

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

AUDIT CHECKLIST

REQUIREMENTS	COMMENTS	Status C/NC/O
Is the Information is documented as required as per the ISO 9001:2015?	Manual and other documented information available.	С
Has the discussion held with personnel of the Client company for readiness for stage-2?	Yes	С
Has the Client site specific conditions are evaluated?	Yes	С
Has the company identified key performance, Process, Objectives and operation of Management System?	Established and implemented	С
Has the client having understanding with the ISO 9001:2015 Standard requirement?	Yes	С
Is the scope is having boundaries and specific to client organization?	Yes	С
Is client having Multisite then level of control is established.	Not applicable	С
Is process and Equipment used are adequate?	Yes	С
Has client identified Legal and Statutory Requirements applicable to Product and Organization?	Yes	С

AQC GLOBAL LLC	
ISO 9001:2015	
Stage 1 Audit Report	

Is the resource are adequate for stage 2 audit?	Yes	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/ 28.01.2023 to 29.01.2023	С
Are Management reviews conducted as planned? Date of Last MRM?	Yes/ 15.02.2023	С

END OF REPORT

AQC GLOBAL LLC	F14 Issue 01 Rev 01
ISO 9001:2015	
Stage 2 Audit Report	

Name of the Organization	KANCHRAPARA COLLEGE	
Address	Kanchrapara, North 24 Parganas, PIN- 743145	
radioss	The state of the s	
Site Address (If any)	Kanchraparacollege.ac.in	
No. of Employees	Teaching = 54, Non-teaching = 8, House-keeping = 2, Security = 1,	
	Electrician=1, Total = 66	
No. of Shift	2	
E mail id	info@kpcoll.ac.in	
Contact Person	Dr. Pranab Kumar Bera	
Telephone/Fax	(033) 25858790/5159	
Scope	"Teaching, Learning and Evaluation processes re	-
	B.A, B.SC, & B.COM Hons as well as General	•
	Environment friendly and Energy efficiency mar Campus.''	nner in College Green
Technical Area	Teaching, Learning and Evaluation, Capacity Bui	lding, Skill
	Enhancement, Institutional Social Responsibility	1
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	. 1:
Brief about the	Kanchrapara Colllege a NAAC Accredited re	•
organization	higher learning at the heart of cosmopolita	
	dedicated band of highly qualified teacher	- -
	energetic group of non-teaching employee, v	
	NOV, 1972 with its affiliation to the Uni	versity of Kalyani.
	Having traversed a fairly long path in the cou	rse of 39 years since
	its inception in an ambience very much friend	dly and congenial to
	the dissemination of education and knowled	lge, the college has
	registered an enviable standard in terms of a	cademic excellence.
	Housed in its own three-storied building, K	
	runs academic teaching in different tradition	•
	B.Sc & B.Com (GEN & Hons.) degree cours	•
	Computer Laboratory and Internet facility	
	portion of a proposed new Science Building	
		1 0
	of around 60,000sq.ft. has been completed	
	theoretical and practical, are being held	•
	portion of the new building is going to be co	ompleted shortly for
	holding of classes soon.	
	Kanchrapara College, established in 1972, is	s the general degree
	college at Kanchrapara, in North 24 Parg	•
	Bengal. It offers undergra	
	in arts, commerce and sciences. The college	
	with huge collection of printed and electron	•
	affiliated to University of Kalyani. This coll	ege was established

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	on 13 November 1972, under the guidance of the then Member of the Legislative Assembly (India) of the area, Mr. Jagadish Chandra Das.[3] Initially it started its journey with only 32 students by affiliation of only Pre-University class.	
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
Amalesh Kr. mander.	Lead Auditor

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

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Tear	Team Leader Declaration (Tick or cross Each Column as per applicability)			
$\sqrt{}$	Auditing is based on a sampling process of the available information			
$\sqrt{}$	Audit is combined, joint or integrated;			
	The effectiveness of corrective actions taken regarding previously identified			
$\sqrt{}$	nonconformities has verified			
$\sqrt{}$	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:

$\sqrt{}$	Congratulations, on the basis of the al	th the requirements of the reference standard: bove summary, Lead Auditor is pleased to put forward a icate. The organization can use the AQC Mark		
The quality system complies with the requirements of the reference sexception of minor NC: Congratulations, Team Leader is pleased to precommendation for Issuance of the certificate of Organization upon off-site closure of all minor NC within 60 days from the date of Stage 2 audit. Response conformances should be submitted to AQC and must include supporting evidence allow for off-site verification. In responding to the non-conformances, the organ consider the root cause of the non-conformance and the potential for related issue of system. If all non-conformances are not closed within 60 days, a full reassessment may be				
			Evidence of major non conformities: Organization is not recommended for I Certificate and at this time. Follow-up audit will be scheduled to allow for on-site and closure of all issues within 60 days from the date of Stage 2.	
	Once all non-conformances are closed, the recommendation for Issuance of certification may recommended.			
	If all non-conformances are not closed within 60 days, a full reassessment may be required.			
× Not Recommended: Organization is not recommended for Issuance of Full Stage 2 audit is required as the organisation has not implemented the pace.				
	Proposed Audit Date for 1	st Surveillance Audit 11.07.2024 (mm/dd/yy)		
Sign	Off: (Date) 12.07.2023			
AQC Report Submission		Client Acceptance for Report		
Name of Team Leader: Amalesh Kr. Mandal		Name: Dr. Pranab Kumar Bera		
Amalesh Kr. mandel.		Sign: P.K. Bera		
Signature:		Principal Kanchrapara College Designation: Kanchrapara, 24 Pgs (N)		

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AUDIT CHECKLIST

VERIFICATION OF DOCUMENTED INFORMATION & RCORDS 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. (KPC /QMS/XXX/QMM/001)
4.2 Understanding the needs and expectations of interested parties (Determination, Monitor & Review of the Interested Parties)	С	Identified and included in Manual. (KPC /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)	С	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)	С	Process Flow found established.
5.1.1 Leadership & Commitment (Statement of ensurity)	С	Interviewed with Top Management. Respective project files found available.
5.1.2 Customer focus (statement of conformity)	С	Interviewed with Top Management. Their course delivery as per plan and guideline.
5.2 Quality policy (Establish, Implement, Maintain, communicated and understood)	С	Quality Policy established (Under clause no. 5.2.1 in Quality manual, page no. 15)
5.3 Organizational roles, responsibilities and authorities	С	Defined in Manual
6.0 Planning	С	
6.1 Actions to address risks and opportunities (Risk Assessment has done with prevention of undesirable effects)	С	Risk Register found maintain. (KPC/QMS/FRM/03)

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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. KPC /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, Organisational Knowledge)	С	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.
7.2 Competence (Employee records & Competence skill matrix)	С	Related training records found available
7.3 Awareness (Quality Policy, Objectives & Effectiveness of QMS)	С	Done through training and display.
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 our as planned and Conformity of product or services)	С	Operational procedures established supported with work instructions and related records.
8.2.1 Customer communication (Enquiries, Contract, order, feedback, complaints)	С	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)	С	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)	С	Review methodology available.
8.2.4 Changes to requirements for products and services (the changed documents is aware and approved by relevant person)	С	Maintain
8.3 Design and Development (D&D)	С	Not Applicable

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8.3.1 General	C	N-4 A1'1.1-
Establish, Maintain and Implement	C	Not Applicable
the D&D Process		
8.3.2 D&D Planning (Record	С	Not Applicable
reference)	C	Not Applicable
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)		
8.4.1 Control of externally provided	С	Tendering process, Vendor enrolment and evaluation
processes, products and services		records found available.
(documented Information for criteria		1000103 Tourid available.
for the evaluation, selection,		
monitoring of performance and re-		
evaluation		
	<u> </u>	
8.4.2 Type and extent of control	C	Evaluation records found available.
(Control Verification)	~	
8.4.3 Information for external	C	Available with user departments
providers		
(Competence and qualification of		
external provider)	<u> </u>	W 1 ' (' (C 'C' (' C 1 '111
8.5.1 Control of production and service provision	C	Work instructions/Specifications found available
(Records verified work instructions		followed by relevant records.
for the processing including delivery		
and post-delivery activities,		
characteristic of product, equipments		
use and availability for monitoring		
and measurement)		
8.5.2 Identification and Traceability	С	Traceability maintained through online.
(Records verified for identification		Traceachity maintained unough ominic.
batch no or serial no in process as		
well as final result)		
8.5.3 Property belonging to	С	Not applicable
customers or external providers	_	11
(Documented Information of Lost or		
damaged property)		
8.5.4 Preservation of output	С	Maintained in Laboratory materials
(objective evidence for meeting the		
defined storage conditions for		
handling, packaging, storage and		
protection)		
8.5.5 Post-delivery activities	C	Maintained.
(Result outcome)		
8.5.6 Control of changes	С	Change control format found available.
(Documented Information change		
review result, person who is		
authorized to changes		

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h		
8.6 Release of final outcome services (Planned Arrangement documented information for acceptance criteria	С	Maintained through online
and authorized person traceability)		
8.7 Control of nonconforming	C	Methods/Action plan found available
outputs		
(Documented Information for Non		
conformity, action taken, concession,		
authority deciding action)		
9.1.1 Monitoring, Measurement	C	Monitoring done against set criteria.
analysis and evaluation		
9.1.2 Customer Satisfaction	С	Customer satisfaction analysis process found available
(Analysis of Customer Satisfaction)		
9.1.3 Analysis and Evaluation	С	Done
9.2 Internal Audit	С	Yearly frequency and Internal Audit plan/records found
(Frequency and Documented		available (28.01.2023 to 29.01.2023)
Information for Implementation of		available (26.01.2023 to 29.01.2023)
Audit Program and the audit result)		
9.3 Management Review	С	MRM agenda and minutes found available. (Last done
(Frequency, Input, Output,		on 15.02.2023)
Documented Information for MRM		011 13.02.2023)
Results)		
10.1 Improvement – General	С	Done and included in MRM
		Done and meraded in Wikivi
10.2 Nonconformity and Corrective	С	Procedure established.
action		1 roccure established.
(Documented Information for nature		
of NC and result of action taken)		
10.3 Continual improvement	С	Objective and monitoring data found available.
10.5 Commun improvement		Objective and monitoring data found available.

END OF REPORT

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Name of the	KANCHRAPARA COLLEGE	
Organization	RANCHRAPARA COLLEGE	
Address	Kanchrapara, North 24 Parganas, PIN- 743145	
Site Address (If	kanchraparacollege.ac.in	
any)	T 11 54 N 11 0 W	
No. of Employees	Teaching = 54, Non-teaching = 8, Hous Total = 66	e-keeping =2, Security =1, Electrician=1,
E mail id	info@kpcoll.ac.in	
Contact Person	Dr. Pranab Kumar Bera	
Telephone/Fax	(033) 25858790/5159	
Scope	"Teaching, Learning and Evaluation pro	ocesses relating to awarding of B.A, B.SC,
	& B.COM Hons as well as General Con	urses considering Environment friendly and
	Energy efficiency manner in College Gr	reen Campus."
Technical Area	Teaching, Learning and Evaluation, Cap Institutional Social Responsibility	pacity Building, Skill Enhancement,
Exclusions	None	
Audit Team	Lead Auditor: Amalesh Kr. Mandal	Audit duration Man day(s):
	Auditor:	3 (/
	Technical Expert:	
Start date of Audit	21.06.2023	
End Date of Audit	21.06.2023	
Brief about the	Kanchrapara Colllege a NAAC Accredited reputed institution of higher	
organization	learning at the heart of cosmopolitan township with a dedicated band of	
	highly qualified teachers and an eq	qually energetic group of non-teaching
	employee, was founded on 13th I	NOV, 1972 with its affiliation to the
	University of Kalyani. Having trave	ersed a fairly long path in the course of
	1	
	-	
		•
	_	
	comprising an area of around 60,00	0sq.ft. has been completed and classes,
	both theoretical and practical, are being held regularly. The rest portion of	
	the new building is going to be completed shortly for holding of classes	
	soon.	
	Kanchrapara College, established i	n 1972, is the general degree college
	39 years since its inception in an ambience very much friendly congenial to the dissemination of education and knowledge, the college registered an enviable standard in terms of academic excelle Housed in its own three-storied building, Kanchrapara College academic teaching in different traditional subjects in B.A, B.Sc & B.C (GEN & Hons.) degree courses with modernized Computer Laboratory Internet facilities. In addition, a portion of a proposed new Science Build comprising an area of around 60,000sq.ft. has been completed and class both theoretical and practical, are being held regularly. The rest portion the new building is going to be completed shortly for holding of class	

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	undergraduate courses in arts, commerce and sciences. The college has a rich library with huge collection of printed and electronic documents. It is affiliated to University of Kalyani. This college was established on 13 November 1972, under the guidance of the then Member of the Legislative Assembly (India) of the area, Mr. Jagadish Chandra Das.[3] Initially it started its journey with only 32 students by affiliation of only Pre-University class.	
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	
Any change in employee detail?	None	
Any Change in Scope?	None	
Any additional Information:	None	

ATTENDENCE SHEET:

NAME OF PERSON	DESIGNATION
Amalesh Kr. mandaj.	Lead auditor

SUMMARY OF AUDIT

AREA OF IMPROVEMNET

(Areas Of Improvement Which May Be Identified As Non Conformities During Stage 2 Audit)

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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

Tear	n 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;
$\sqrt{}$	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.
$\sqrt{}$	The scope of certification is appropriate.
$\sqrt{}$	The capability of the management system to meet applicable requirements and expected
	The audit objectives has been fulfilled and achieved.
REC	COMMENDATION
	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
	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	Name: Dr. Pranab Kumar Bera
Signature: Amalesh Kumas Mandal	Signature: P.K. Besa
	Principal Kanchrapara College Designation: Kanchrapara, 24 Pgs (N)

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AUDIT CHECKLIST

REQUIREMENTS	COMMENTS	Status C/NC/O
Is the Information is documented as required as per the ISO 14001:2015?	Manual (EMS/001 dtd. 12.09.2022) and other documented information available.	С
Has the discussion held with personnel of the Client company for readiness for stage-2?	Yes. Within this month the Stage-2 need to be completed.	С
Are Process and support processes identified and determined?	Yes	С
Has the Client site specific conditions are evaluated?	Established and implemented	С
Has the company identified key performance, Process, Objectives, Impact and Aspect analysis and operation of Management System?	Yes. Environment related objectives and programs are found set and Environmental aspect/impact analysis found established.	С
Has the client having understanding with the ISO 14001:2015 Standard requirement?	Yes. They have hired external consultant for that too. Awareness done.	С
Is the scope is having boundaries and specific to client organization?	Yes	С
Is client having Multisite then level of control is established.	Not applicable	С
Is process and Equipment used are adequate?	Yes	С
Has client identified Legal and Statutory Requirements applicable to Product and Organization?	Yes as per UGC guidelines.	С

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Is the resource are adequate for stage 2 audit?	Yes	С
Is Internal Audit planned and performed and effective?	Last done on 14.03.2023 covering ISO 14001:2015 standards.	С
Is MRM planned and performed and Effective?	Yes last done on 24.03.2023, minutes are available.	С

END OF REPORT

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Name of the Organization	KANCHRAPARA COLLEGE	
Address	Kanchrapara, North 24 Parganas, PIN- 743145	
Site Address (If any)	Kanchraparacollege.ac.in	
No. of Employees	Teaching = 54, Non-teaching = 8, House-keeping = 2, Security = 1, Electrician=1, Total = 66	
NO. of Shift	2	
E mail id	info@kpcoll.ac.in	
Contact Person	Dr. Pranab Kumar Bera	
Telephone/Fax	(033) 25858790/5159	
Scope	"Teaching, Learning and Evaluation processes re	
	B.A, B.SC, & B.COM Hons as well as General	•
	Environment friendly and Energy efficiency mar Campus.''	nner in College Green
Technical Area	Teaching, Learning and Evaluation, Capacity Bui Enhancement, Institutional Social Responsibility	lding, Skill
Exclusion	None	
Audit Team	Lead Auditor: Amalesh Kumar Mandal	No of Mandays :
	Auditor:	1
Starting Date of Audit	Technical Expert:	
Starting Date of Audit End Date of Audit	12.07.2023 12.07.2023	
Brief about the	Kanchrapara Colllege a NAAC Accredited ro	enuted institution of
organization	higher learning at the heart of cosmopolita	•
organization	dedicated band of highly qualified teacher	=
		= -
	energetic group of non-teaching employee, w	
	NOV, 1972 with its affiliation to the Uni	= = =
	Having traversed a fairly long path in the countries in t	=
	its inception in an ambience very much friend	•
	the dissemination of education and knowled	
	registered an enviable standard in terms of a	
	Housed in its own three-storied building, K	•
	runs academic teaching in different tradition	nal subjects in B.A,
	B.Sc & B.Com (GEN & Hons.) degree cours	ses with modernized
	Computer Laboratory and Internet facilities	es. In addition, a
	portion of a proposed new Science Building	comprising an area
	of around 60,000sq.ft. has been completed	l and classes, both
	theoretical and practical, are being held	regularly. The rest
	portion of the new building is going to be co	•
	holding of classes soon.	The second secon
	Kanchrapara College, established in 1972, is the general degree	
	college at Kanchrapara, in North 24 Parg	
	Bengal. It offers undergra	duate courses
	in arts, commerce and sciences. The college	has a rich library
	with huge collection of printed and electron	nic documents. It is
	1	

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	affiliated to University of Kalyani. This college was established on 13 November 1972, under the guidance of the then Member of the Legislative Assembly (India) of the area, Mr. Jagadish Chandra Das.[3] Initially it started its journey with only 32 students by affiliation of only Pre-University class.
Purpose of Audit	To verify the implementation of the Environmental Management System as per the 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	None	
employee detail?		
Any Change in Scope?	None	
Any additional	None	
Information:		

ATTENDENCE SHEET:

NAME OF PERSON	DESIGNATION
Amalesh Kr. mandaj.	Lead Auditor

SUMMARY OF AUDIT

	AREA OF IMPROVEMENTS
1	No such improvement points identified in current period.

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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.	

Recommendation:

V	The EMS 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 EMS 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.
	If all non-conformances are not closed within 60 days, a full reassessment may be required.
×	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.
	Once all non-conformances are closed, the recommendation for Issuance of certification may recommended.
	If all non-conformances are not closed within 60 days, a full reassessment may be required.
×	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
	Proposed Audit Date for 1st Surveillance Audit 11.07.2024 (mm/dd/yy)

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Sign Off : (Data) 12.07.2022	
Sign Off: (Date) 12.07.2023	
AQC Report Submission	Client Acceptance for Report
Name of Team Leader: Amalesh Kr. Mandal	Name: Dr. Pranab Kumar Bera
Signature: Amalesh Kumar Mandal	Sign: P.K. Bera
	Principal Kanchrapara College Designation: Kanchrapara, 24 Pgs (N)

AUDIT CHECKLIST

VERIFICATION OF DOCUMENTED INFORMATION & RCORDS 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 (Doc. Ref. No. EMS/001, Dtd. 12.09.2022)
4.2 Understanding the needs and expectations of interested parties (Determination, Monitor & Review of the Interested Parties)	С	Identified and included in Manual (Doc. Ref. No. EMS/001, Dtd. 12.09.2022)
4.3 Determine and maintained Documented Information the scope of the Environmental management system (Boundaries and Type of Product and Services and any requirement not applicable)	С	Scope established and included in Manual (Doc. Ref. No. EMS/001, Dtd. 12.09.2022), Section No EMS/11 Page. No. 12
4.4 Environmental management system and its processes (Established, Implement and maintained, process and Interaction of Process)	С	Process Flow found established. College operation predefined as per government norms.
5.1 Leadership & Commitment (Statement of ensurity)	С	Interviewed with Top Management (Principal) regarding Environment management system. Several Project has initiated and monitored as per plan.
5.2 Environmental policy (Documented Information, Establish, Implement, Maintain, communicated and understood)	С	Environmental Policy established (Section No EMS/15, Page no 16)
5.3 Organizational roles, responsibilities and authorities	С	Defined in Manual as per Governmental norms.
6.0 Planning		
6.1.1 Actions to address risks and opportunities (Risk Assessment has done with prevention of undesirable effects)	С	Risk Register found maintain and accordingly project taken.
6.1.2 Determination and maintained documented information of	С	Aspect/Impact Register found maintain. (DOC. NO:KPC/ASPECT/01)

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Environmental Aspect, associated impacts Criteria Used and significant aspects and, of the activity and Environmental Impacts		
6.1.3 Determination of the Compliances Obligation and maintained documented information how to comply.	С	Compliance register found available and complied as per UGC and others norms.
6.1.4 Planning action for Environmental aspect, Compliance Obligation and Risk and Opportunities.	С	Planning records found available (In the form of projects)
6.2 Environmental objectives and planning to achieve them (Documented, Measurable, Monitored and communicated)	С	Environmental Objectives found established and planned to achieve action (MAP)- Doc. No. ENV/OBJ
7.1 Resources (Resource needed for Continual Improvement)	С	Found available
7.2 Competence (Employee records & Competence skill matrix)	С	Related training records found available
7.3 Awareness (Environmental Policy, Objectives & Effectiveness of EMS)	С	Done through training
7.4 Communication (what, who, when, whom, how with retained documented information)	С	Done
7.5 Documented information (External Origin, Creation, Updation, Distribution, Preservation, version control, Retention and disposition)	С	Document control done
8.1 Operational planning and control (Plan, Implement and control of process, documented information for process carried our as planned and Conformity of product or services)	С	Operational procedures established supported with work instructions and related records.
8.2 Emergency Prepared and Responses (Mitigation of Adverse Environmental Impact, Respond to Emergency situation, Periodically review and Training of the Emergency)	С	EPRP document and mock drill training given. There are no such exposure of emergency as per their work nature and campus conditions.
9.1.1 Monitoring, Measurement analysis and evaluation	С	Environment monitoring: Their Own monitoring data report in the form of "Green Audit" found maintained in every assessment year wise. Monitoring done against respective parameters.
9.1.2 Evaluation Of Compliances Documented (Frequency and Action on Evaluation)	С	Compliance register found available
9.2 Internal Audit (Frequency and Documented	С	Yearly frequency and Internal Audit plan/records found available. Last done (14.03.2023)

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Information for Implementation of Audit Program and the audit result)		
9.3 Management Review (Frequency, Input, Output, Documented Information for MRM Results)	С	MRM agenda and minutes found available. Last done 24.03.2023.
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.

END OF REPORT

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KANCHRAPARA COLLEGE		
Kanchrapara, North 24 Parganas, PIN- 743145		
Teaching = 54, Non-teaching = 8, House-keeping = 2, Security = 1, Electrician=1, Total = 66		
1		
info@kpcoll.ac.in		
Dr. Pranab Kumar Bera		
(033) 25858790/5159		
"Teaching, Learning and Evaluation processes relating to awarding of B.A, B.SC, & B.COM Hons as well as General Courses considering Environment friendly and Energy efficiency manner in College Green Campus."		
Teaching, Learning and Evaluation, Capacity Enhancement, Institutional Social Responsib		
Lead Auditor: Amalesh Kr. Mandal Auditor:	Audit duration Man day(s): Technical Expert	
Kanchrapara Colllege a NAAC Accred	•	
dedicated band of highly qualified teachers group of non-teaching employee, was for with its affiliation to the University of It fairly long path in the course of 39 year ambience very much friendly and conge education and knowledge, the college standard in terms of Housed in its own three-storied building academic teaching in different tradition B.Com (GEN & Hons.) degree courses Laboratory and Internet facilities. In proposed new Science Building comp 60,000sq.ft. has been completed and compractical, are being held regularly. The building is going to be completed showsoon.	ers and an equally energetic bunded on 13th NOV, 1972 Kalyani. Having traversed a ars since its inception in an enial to the dissemination of has registered an enviable academic excellence. The excellence excellence is all subjects in B.A, B.Sc & with modernized Computer addition, a portion of a prising an area of around lasses, both theoretical and he rest portion of the new ortly for holding of classes	
	Teaching = 54, Non-teaching = 8, House-kee Electrician=1, Total = 66 1 info@kpcoll.ac.in Dr. Pranab Kumar Bera (033) 25858790/5159 "Teaching, Learning and Evaluation proced B.A, B.SC, & B.COM Hons as well as Environment friendly and Energy efficient Campus." Teaching, Learning and Evaluation, Capacity Enhancement, Institutional Social Responsible Lead Auditor: Amalesh Kr. Mandal Auditor: Technical Expert 21.06.2023 21.06.2023 Kanchrapara Colllege a NAAC Accree higher learning at the heart of cosm dedicated band of highly qualified teach group of non-teaching employee, was fewith its affiliation to the University of I fairly long path in the course of 39 year ambience very much friendly and conge education and knowledge, the college standard in terms of Housed in its own three-storied building academic teaching in different tradition B.Com (GEN & Hons.) degree courses Laboratory and Internet facilities. In proposed new Science Building comp 60,000sq.ft. has been completed and confidence of the practical, are being held regularly. The building is going to be completed shoulding in the course of the practical is going to be completed shoulding is going to be completed shoulding in the course of the practical is going to be completed shoulding is going to be completed shoulding is going to be completed shoulding in the practical is going to be completed shoulding the practical in the proposed is going to be completed shoulding the proposed in the practical is going to be completed shoulding the practical in the proposed is going to be completed shoulding the proposed in the practical is going to be completed should the practical in the proposed is going to be completed should the practical in the proposed is going to be completed should the practical in the proposed is going to be completed should the prac	

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	college at Kanchrapara, in North 24 Parganas district, West Bengal. It offers undergraduate courses in arts, commerce and sciences. The college has a rich library with huge collection of printed and electronic documents. It is affiliated to University of Kalyani. This college was established on 13 November 1972, under the guidance of the then Member of the Legislative Assembly (India) of the area, Mr. Jagadish Chandra Das.[3] Initially it started its journey with only 32 students by affiliation of only Pre-University class.
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	
Any change in employee detail?	None	
Any Change in Scope?	None	
Any additional Information:	None	

ATTENDENCE SHEET:

NAME OF PERSON	DESIGNATION
Amalesh Kr. mandaj.	Lead Auditor

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		

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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

Tear	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.		
REC	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		
	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 Kr. Mandal	Name: Dr. Pranab Kumar Bera
Signature: Amalesh Kumar Mandal	Sign: P.K. Bera
	Principal Kanchrapara College Designation: Kanchrapara, 24 Pgs (N)

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AUDIT CHECKLIST

REQUIREMENTS	COMMENTS	Status C/NC/O
Is the Information is documented as required as per the ISO 50001:2018?	Manual and other documented information available. (Doc. Ref. No. ENMS/L1, dtd. 12.09.2022)	С
Has the discussion held with personnel of the Client company for readiness for stage-2?	Yes	С
Has the Client site specific conditions are evaluated?	Established, implemented and the Scope has set as per Site specific. (Under clause 4.3 of ENMS/L1 Manual)	С
Has the company identified energy performance indicator, Energy baseline, Energy objectives, energy targets and energy management action plans?	Respective Energy project found taken by Authority. Like "Efficient use of Energy Resources"	С
Has the client having understanding with the ISO 50001:2018 Standard requirement?	Yes. Awareness training has conducted by external consultant.	С
Is the scope is having boundaries and specific to client organization?	Yes scope found suitable as per client specific.	С
Is client having Multisite then level of control is established.	Not applicable	С
Is organization analyse energy used and consumption based on measurement and other data: (Identify current energy sources/evaluate past and present energy use and consumption?	Measurement done on Bill monitoring, list of energy sources are available, significant energy sources identified.	С
Based on the analysis of energy used and consumption, Is organization identify the areas of significant energy use.(identify the facilities, equipment, systems, processes and personnel working for, or on behalf of, the organization that significantly affect energy use and consumption?	List of energy sources are available, significant energy sources identified. Energy program found established.	С
Has organisation identified EnPIs (energy performance indicators) appropriate for monitoring and measuring your energy performance?	Energy baseline declared as last year consumption. EnPI set in the form of Energy Projects.	С

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Has organisation identified, implemented and have access to the applicable legal requirements and other requirements to which organisation subscribes related to energy use, consumption and efficiency?	No such mandatory protocol applied on them. They has identified their own improvements parameters.	С
Is the resource are adequate for stage 2 audit?	Yes	С
Is Internal Audit planned and performed and effective?	Last Internal scheduled on 27.02.2023	С
Is MRM planned and performed and Effective?	Last MRM held on 05.03.2023	С

END OF REPORT

AQC GLOBAL LLC	F20EN18 Issue 01
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Stage 2 Audit Report	

Name of the Organization	KANCHRAPARA COLLEGE		
Address	Kanchrapara, North 24 Parganas, PIN- 743145		
Site Address (If any)	ite Address (If any)		
No. of Employees	Teaching = 54, Non-teaching = 8, House-keeping = 2, Security = 1, Electrician=1, Total = 66		
No. of Shift	1		
E mail id	info@kpcoll.ac.in		
Contact Person	Dr. Pranab Kumar Bera		
Telephone/Fax	(033) 25858790/5159		
Scope	"Teaching, Learning and Evaluation processes rela	ating to awarding of	
_	B.A, B.SC, & B.COM Hons as well as General	Courses considering	
	Environment friendly and Energy efficiency mann	er in College Green	
	Campus.''	-	
Technical Area	Teaching, Learning and Evaluation, Capacity Building, Skill Enhancement, Institutional Social Responsibility.		
Audit Team	Lead Auditor: Amalesh Kumar Mandal	No of Mandays:	
	Auditor:	1	
	Technical Expert		
Starting date of Audit	12.07.2023		
End date of Audit	12.07.2023	. 11	
Brief about the	Kanchrapara Colllege a NAAC Accredited rep	•	
organization	higher learning at the heart of cosmopolitan	=	
	dedicated band of highly qualified teachers	s and an equally	
	energetic group of non-teaching employee, wa	s founded on 13th	
	NOV, 1972 with its affiliation to the University	ersity of Kalyani.	
	Having traversed a fairly long path in the cours	e of 39 years since	
	its inception in an ambience very much friendl	y and congenial to	
	the dissemination of education and knowledg	•	
	registered an enviable standard in terms of aca	=	
	Housed in its own three-storied building, Ka		
	runs academic teaching in different traditiona	•	
		•	
	B.Sc & B.Com (GEN & Hons.) degree course		
	Computer Laboratory and Internet facilities. In	-	
	of a proposed new Science Building comprising		
	60,000sq.ft. has been completed and classes, be	oth theoretical and	
	practical, are being held regularly. The rest p	ortion of the new	
	building is going to be completed shortly for	holding of classes	
	soon.		
	Kanchrapara College, established in 1972, is	the general degree	
	college at Kanchrapara, in North 24 Parga	nas district, West	
	Bengal. It offers undergrade		
	in arts, commerce and sciences. The college has		
	in arts, commerce and sciences. The contege has	, a non normy with	

AQC GLOBAL LLC	
ISO 50001:2018	
Stage 2 Audit Report	

	huge collection of printed and electronic documents. It is affiliated		
	to University of Kalyani. This college was established on 13		
	November 1972, under the guidance of the then Member of the		
	Legislative Assembly (India) of the area, Mr. Jagadish Chandra		
	Das.[3] Initially it started its journey with only 32 students by		
	affiliation of only Pre-University class.		
Purpose of Audit	To verify the implementation of the Energy Management System		
	as per the ISO 50001:2018 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
Amalesh Kr. mandaj.	Lead Auditor

SUMMARY OF AUDIT

AREA OF IMPROVEMENTS		
1	No such significant area identified as critical w.r.t energy consumption	

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Stage 2 Audit Report	

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

Recommendation:

٧	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 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. If all non-conformances are not closed within 60 days, a full reassessment may be required.	
×	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. Once all non-conformances are closed, the recommendation for Issuance of certification may recommended. If all non-conformances are not closed within 60 days, a full reassessment may be required.	
×	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.	
	Proposed Audit Date for 1st Surveillance Audit 11.07.2024 (mm/dd/yy)	

Sign Off: (Date) 12.07.2023 AQC Report Submission

Name of Team Leader: Amalesh Kr. Mandal

Client Acceptance for Report Name: Dr. Pranab Kumar Bera

AQC GLOBAL LLC	
ISO 50001:2018	
Stage 2 Audit Report	

Signature: Amalesh Kumar Mandal

Sign:

P.K. Bera

Designation:

Principal Kanchrapara College Kanchrapara, 24 Pgs (N)

AUDIT CHECKLIST

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

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Clause Number	C/NC/O	Document Verification detail with statement of Conformity
4 Context of the organization		,
4.1 Understanding the organization and its context (External and Internal Issues)	С	Identified and included in Manual. (Under clause 4.1 of Doc. Ref. No. ENMS/L1, dtd. 12.09.2022)
4.2 Understanding the needs and expectations of interested parties (Need & Expectation of Interested parties)	С	Identified and included in Manual. (Under clause 4.2 of Doc. Ref. No. ENMS/L1, dtd. 12.09.2022)
4.3 Determining the scope of the energy management system	С	Scope established and included in Manual. (Under clause 4.3 of ENMS/L1 Manual)
4.4 Energy management system	С	Process Flow found established and as per UGC norms.
5 Leadership		
5.1 Leadership and commitment (Ensure Top Management Commitment)	С	Interviewed with Top Management, found committed to communication of respective Energy Policies, Projects and implementation of Energy specific Projects.
5.2 Energy policy (Documented, communicated, availability and Review)	С	Energy Policy established and displayed in notice board. Advise them to display for others stakeholders as well as in Website.
5.3 Organization roles, responsibilities and authorities (Assigned and communicated by Top Management)	С	Defined in Manual and found as per Government protocol.
6 Planning		
6.1 Actions to address risks and opportunities	С	Risk Register found maintain (Doc. Ref. No. EnMS/POT/E-RISK/01), initially found 2 nos Energy risk identified.
6.2 Objectives, energy targets and planning to achieve them (Consistent with Energy Policy, SEU, documented, measurable, communicated and updated)	С	Energy Objectives found established and planned to achieve action (MAP), Projects taken Like "Efficient use of Energy Resources" and monitoring methodology found set to achieve the goal.
6.3 Energy review (Current type of energy use, past and current consumption, documented and updated)	С	Energy review has done based on Meter reading study and kept as documented information. Current list of Energy sources found available including Significant energy sources.
6.4 Energy performance indicators (Documented and updated)	С	Documented in the form of Energy projects.

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6.5 Energy baseline (Documented and review periodically and retention)	С	Energy baseline declared as last year Power consumption, accordingly projects taken to review and reduce the Power.
6.6 Planning for collection of energy data (Accuracy and repeatable, documented and retention)	С	Electrical Energy bill statements kept available for further review.
7 Support		
7.1 Resources (Determination of resource required)	С	Found available
7.2 Competence (determine, documented and retain the competence)	С	Training planning and related training records found available. Awareness training conducted by External consultant.
7.3 Awareness (Objective, Policy, Non Conformance of EnMS)	С	Done through training and display
7.4 Communication (What, When, With Whom, How & Who)	С	Done in the form of minutes and display.
7.5 Documented information (Creation, Updating, Control, Retention, External Origin, Storage & Preservation)	С	Control of documented information procedure established.
8 Operation		
8.1 Operational planning and control (Documneted, Plan, Implement, Control the process related to SEU and communication)	С	Operational procedures established supported with work instructions and related records.
8.2 Design (Documented, Specification, design consideration)	С	Design part not included
8.3 Procurement (Establish & Implement criteria for evaluating energy performance)	С	Effectively implemented, tendering system applicable in procurement.
9 Performance evaluation		
9.1.1 General (Monitoring, measurement, analysis and evaluation of energy performance and the EnMS)	С	Criteria set against each Project mapping, to monitor the performance and effectiveness of the Energy performance. Current Status: 1. Project mapping Vs. monitoring
9.1.2 Evaluation of compliance with legal requirements and other requirements	С	Compliance register found available
9.2 Internal audit (Frequency and Effectiveness)	С	Yearly frequency and Internal Audit plan/records found available, Last Internal scheduled on 27.02.2023.

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9.3 Management review (Frequency and input/output)	С	MRM agenda and minutes found available. Last MRM held on 05.03.2023.
10 Improvement		
10.1 Nonconformity and corrective action	С	Procedure established and monitored through project planning.
10.2 Continual improvement	С	Objective and monitoring data found available.

END OF REPORT

KANCHRAPARA COLLEGE ENVIRONMENT MANAGEMENT SYSTEM

ENVIRONMENT MANAGEMENT PROGRAM

DEPARTMENT:

TITLE:

 VER.NO:
 REV.NO : 01
 DATE:
 PAGE 01 OF 01

OBJECTIVE/TARGET REFERENCE: Rainwater harvesting project

TIME FRAME : 2018 to 2023

REVIEW PERIODCITY : Review against plan on Monthly basis.

POTENTIAL SAVING : Natural resources (water)

PROGRAMME/ACTION PLAN

S.No	Steps/Activities	Start Date	End Date	Responsibility	Resources Required
1	Pre-work of project planning (Land selection, Water capturing, Common place selection, capacity utilization)	2018	2019	Principal	None
2	Budget preparation, fund allotment and responsibility setup.				Responsibility allocation.
2	Selection of vendor as per Green procurement policy.	2019	2020	Principal	None
3	Necessary arrangements like selection of place, fulfilment of resource requirements	2020	2021	Principal	Responsibility allocation.
4	Project review/monitoring	2021	2022	Principal	None
5	Fulfilment of the project	2022	2023		
6	Compliance against planning	2023	2024		

	Prepared By: MR	Reviewed By: MR	Approved by: Principal
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KANCHRAPARA COLLEGE ENVIRONMENT MANAGEMENT SYSTEM							
	ENVIRONMENT MANAGEMENT PROGRAM						
	DEPARTMENT:						
TITLE:							
VER.NO:	REV.NO: 01		DATE:	PAGE 01 OF 01			

METHOD OF VERIFYING ENVIRONMENT PERFORMANCE-

- Meeting
- Vendor evaluation
- ➤ Plan Vs. actual
- ➤ Further AMC allocation

METHOD OF VERIFYING RESULTS-

- > Compare against planning
- > Project trend analysis and action plan

Amalesh Kr. mandal.

- > Proper data collection
- > Physical Inspection

Principal
Kanchrapara College
Kanchrapara, 24 Pgs (N)

Prepared By: MR Reviewed By: MR Approved by: Principal

KANCHRAPARA COLLEGE ENVIRONMENT MANAGEMENT SYSTEM

ENVIRONMENT MANAGEMENT PROGRAM

DEPARTMENT:

TITLE:

VER.NO: REV.NO: 01 DATE: PAGE 01 OF 01

OBJECTIVE/TARGET REFERENCE: Waste Management project

TIME FRAME : 2018 to 2023

REVIEW PERIODCITY : Review against plan on Monthly basis.

POTENTIAL SAVING : Natural resources water, land and pollution control

PROGRAMME/ACTION PLAN

S.No	Steps/Activities	Start Date	End Date	Responsibility	Resources Required
1	Pre-work for classification of wastes generated in College campus.	2018	2019	Principal	None
2	Set Policy for Waste collection, segregation, reuse and disposal				Responsibility allocation.
3	Awareness among stakeholders and for outsiders through training, campaign etc.				
4	Budget allocation and fund allotment against planning				
5	Selection of vendor as per Green procurement policy.	2019	2020	Principal	None
6	Necessary arrangements like selection of place, fulfilment of reuse planning, Waste Bin placement, selection of collection agent if applicable	2020	2021	Principal	Responsibility allocation.
7	Setting of targets like reduction of Paper uses, plastic free zone				
8	Project review/monitoring	2021	2022	Principal	None
9	Fulfilment of the project	2022	2023		

Prepared By: MR	Reviewed By: MR	Approved by: Principal
I Tepared By. MIX	Keviewed By. MIK	Approved by, I fillelpai

METHOD OF VERIFYING ENVIRONMENT PERFORMANCE-

- Meeting
- ➤ Vendor evaluation
- ➤ Plan Vs. actual
- > Further AMC allocation

METHOD OF VERIFYING RESULTS-

- > Compare against planning
- > Project trend analysis and action plan
- ➤ Proper data collection like Paper and plastic uses
- > Physical Inspection

Amalesh Kr. mandal.

Principal
Kanchrapara College
Kanchrapara, 24 Pgs (N)

KANCHRAPARA COLLEGE ENVIRONMENT MANAGEMENT SYSTEM

ENVIRONMENT MANAGEMENT PROGRAM

DEPARTMENT:

TITLE:

 VER.NO:
 REV.NO : 01
 DATE:
 PAGE 01 OF 01

OBJECTIVE/TARGET REFERENCE: Greenery Development Project

TIME FRAME : 2018 to 2023

REVIEW PERIODCITY : Review against plan on Monthly basis.

POTENTIAL SAVING : Pollution control and Global warming

PROGRAMME/ACTION PLAN

S.No	Steps/Activities	Start Date	End Date	Responsibility	Resources Required
1	Decide to do it and plan to develop Greenery inside the College campus as well as for others	2018	2019	Principal	None
2	Identify the area of plantation and the types of trees to be planted				Responsibility allocation.
3	Team formation, awareness among stakeholders and for outsiders through training, campaign etc.				
4	Budget allocation and fund allotment against planning				
5	Selection of vendor as per Green procurement policy.	2019	2020	Principal	None
6	Necessary arrangements like selection of place, Arrange the required equipment, Follow correct tree-planting procedures	2020	2021	Principal	Responsibility allocation.
7	Setting of targets like area development, Housekeeping, training and awareness etc.				
8	Project review/monitoring	2021	2022	Principal	None

Prepared By: MR	Reviewed By: MR	Approved by: Principal
I Tepared By. MIX	Keviewed By. MIK	Approved by, I fillelpai

KANCHRAPARA COLLEGE ENVIRONMENT MANAGEMENT SYSTEM ENVIRONMENT MANAGEMENT PROGRAM DEPARTMENT: TITLE: VER.NO: REV.NO: 01 DATE: PAGE 01 OF 01

9	Fulfilment of the project	2022	2023	
10	Compliance against planning	2023	2024	

METHOD OF VERIFYING ENVIRONMENT PERFORMANCE-

- Meeting
- ➤ Vendor evaluation
- Plan Vs. actual
- > Further AMC allocation

METHOD OF VERIFYING RESULTS-

- > Compare against planning
- > Project trend analysis and action plan
- > Proper data collection like achievement
- > Physical Inspection

Amalesh Kr. mandal.

Principal
Kanchrapara College
Kanchrapara, 24 Pgs (N)

Prepared By: MR Reviewed By: MR Approved by: P	Principal
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