

Audit Report (SA1)

Organisation NIRMALA MEMORIAL FOUNDATION COLLEGE OF COMMERCE AND SCIENCE

Audits(ZA) MUM/AUD/24-25/9824

| Master Data of Organisation | | | |
|--|---|--|--|
| Name of organisation | NIRMALA MEMORIAL FOUNDATION COLLEGE OF COMMERCE AND SCIENCE | | |
| Name of corporate group (in case of multi site organization only) | N.A. | | |
| Street | 90 Feet Road, Asha Nagar, Thakur Complex, Kandivali (East) | | |
| Postcode / Town / Country | 400101, Kandivali, Mumbai / India. | | |
| Contact | SWIDDLE D'CUNHA | | |
| E-Mail | principal@nirmala.edu.in, iso@nirmala.edu.in | | |
| Phone | 022-28549303 | | |
| System documentation: (Revision / Issue) | Documented Information (DI:A), Rev No. 08, dated 31/07/2024 | | |
| Shift operation | No Shift Operation (General shift only) | | |
| Language | English | | |
| Peculiarities | None | | |
| Multi Site Organisation | | | |
| Selection of sites to be audited by sampling procedure | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input checked="" type="checkbox"/> n.a. |
| An adequate listing of all sites in the scope(s) including all valid and relevant information in each case is part of the audit file | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> n.a. | |
| Audit Profile | | | |
| Contract ID (ZE): | MUM/AUD/24-25/9824 | | |
| Standards under contract / Audit type | ISO 9001:2015 Surveillance 1 Audit | | |
| Audit cycle | 12 months | | |
| Audit team leader | Dr. Nilesh Gaikar (NG) | | |
| E-Mail audit team leader | gnilesh@tuv-nord.com | | |
| Audit team | Sharada Chopdekar (SC) | | - |
| | - | | - |
| | - | | - |
| Technical expert | N.A. | | - |
| Trainee | N.A. | | - |
| Observer | N.A. | | - |

Audit Report (SA1)

Organisation NIRMALA MEMORIAL FOUNDATION COLLEGE OF
COMMERCE AND SCIENCE
Audits(ZA) MUM/AUD/24-25/9824

| Audited Standards | |
|---|------------------------------------|
| ISO 9001:2015 | SA1 |
| Certificate ID (TP): QM 01 00964 | Valid until: 23-04-2027 |
| Scope: Offering Degree Collage Courses for Commerce, Management, Mass Media, Information Technology, and Computer Science meeting requirements of University of Mumbai. Offering Post Graduate Courses M. Com, M. Sc., IT meeting requirements of University of Mumbai. | |
| Industry / Sector (EA, TB, ...) | 37.0 |
| Non-applicability of chapters: | 8.3 (Justification in HWN) |
| No. of considered persons: 99 | No. of sites (incl. HQ): 1 |
| Lead auditor: Dr. Nilesh Gaikar | Audit ID (ZA): MUM/AUD/24-25/9824 |
| Error! Reference source not found. : Error! Reference source not found. | Error! Reference source not found. |
| Certificate ID (TP): _____ | Valid until: _____ |
| Scope: _____ | |
| Industry / Sector (EA, TB, ...) _____ | |
| Non-applicability of chapters: _____ | |
| No. of considered persons: _____ | No. of sites (incl. HQ): _____ |
| Lead auditor: _____ | Audit ID (ZA): _____ |
| Error! Reference source not found. : Error! Reference source not found. | Error! Reference source not found. |
| Certificate ID (TP): _____ | Valid until: _____ |
| Scope: _____ | |
| Industry / Sector (EA, TB, ...) _____ | |
| Non-applicability of chapters _____ | |
| No. of considered persons: _____ | No. of sites (incl. HQ): _____ |
| Lead auditor: _____ | Audit ID (ZA): _____ |
| Error! Reference source not found. : Error! Reference source not found. | Error! Reference source not found. |
| Certificate ID (TP): _____ | Valid until: _____ |
| Scope: _____ | |
| Industry / Sector (EA, TB, ...) _____ | |
| Non-applicability of chapters: _____ | |
| No. of considered persons: _____ | No. of sites (incl. HQ): _____ |
| Lead auditor: _____ | Audit ID (ZA): _____ |

| Definition of Unit for Duration and Time | | |
|--|---|------------------------------------|
| Applied unit | Days | One audit day covers 8 audit hours |
| Audit Details | | |
| Sites | Kandivali, Mumbai | |
| Audit date | 09/04/2025 | |
| Audit duration | 1.50 person Days on site (incl. remote locations as applicable) inclusive 0.00 person Days on site for audit stage 1 (separate report) | |

Audit Report (SA1)

Organisation NIRMALA MEMORIAL FOUNDATION COLLEGE OF
COMMERCE AND SCIENCE

Audits(ZA) MUM/AUD/24-25/9824

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

| Details about the remote Audit (if applicable) |
|--|
| <p>The audit was performed applying technology for information and communication ("remote") at 0%.</p> <p>Effectiveness and efficiency of the remote-part was ensured by</p> <ul style="list-style-type: none"> <input type="checkbox"/> experienced application of engaged technology; <input type="checkbox"/> the consecutive processing of the single sessions with the individual units; <input type="checkbox"/> the online interviews with different people from diverse units and various hierarchical levels; <input type="checkbox"/> the separation of the audit team in individual online sessions; <input type="checkbox"/> reviewing an adequate sample of documented processes and/or information; <input type="checkbox"/> the discussion of appropriate charts, diagrams, slides or any other relevant information; <input type="checkbox"/> the presentation and discussion of photos, videos and audios of issues, being prepared on detailed guidance and governance of the audit team. <p>Details about reviewed information or documents, interviewed persons, content of videos & photos etc. are recorded in the report or (handwritten) notes.</p> <p>If the audit was performed partly remote, the corresponding sessions are identified unambiguously in the audit plan.</p> |

| Distribution/Confidentiality/Rights of Ownership/Limitations/Responsibilities | | |
|---|---|---|
| <p>This report is sent to the certification body or bodies, the members of the audit team and the audit representative of the organisation. All documents (such as this report) regarding the certification procedure are treated confidentially by the audit team and the certification body. This audit report remains the property of the certification body.</p> <p>An audit is a procedure based on the principle of random sampling and cannot cover each detail of the management system. Therefore nonconformities of weaknesses may still exist which were not expressly mentioned by the auditors in the final meeting or in the audit report.</p> <p>The responsibility for continuous effective operation of the management system always rests solely with the audited and certified organisation.</p> <p>Salvo clause: The audit report will be left to the organisation at the end of the audit - subject to approval by the certification body. The independent veto process may cause modifications or additions. In these cases a modified revision will be sent to the audited organisation.</p> | | |
| Annex/Enclosures | | |
| <table border="1"> <tr> <td>Annex/ corresponding audit documentation</td> <td> <input type="checkbox"/> Questionnaire(s) / Checklist(s) <input type="checkbox"/> Additional annexes, number </td> </tr> </table> | Annex/ corresponding audit documentation | <input type="checkbox"/> Questionnaire(s) / Checklist(s) <input type="checkbox"/> Additional annexes, number |
| Annex/ corresponding audit documentation | <input type="checkbox"/> Questionnaire(s) / Checklist(s) <input type="checkbox"/> Additional annexes, number | |

| Audit Results | | | | | | | |
|---|--------|--------|--------|--------|--------|--------|--------|
| Table of Results | | | | | | | |
| ISO 9001:2015 | | | | | | | |
| Clause | Rslt.* | Clause | Rslt.* | Clause | Rslt.* | Clause | Rslt.* |
| 4.1 | 2 | | | | | | |
| 4.2 | 2 | | | | | | |
| 4.3 | 2 | | | | | | |
| 4.4 | 1 | | | | | | |
| 5.1 | 1 | | | | | | |
| 5.2 | 1 | | | | | | |
| 5.3 | 2 | | | | | | |
| 6.1 | 2 | | | | | | |
| 6.2 | 2 | | | | | | |
| 6.3 | 2 | | | | | | |
| 7.1 | 1 | | | | | | |
| 7.2 | 1 | | | | | | |
| 7.3 | 1 | | | | | | |
| 7.4 | 1 | | | | | | |
| 7.5 | 2 | | | | | | |
| 8.1 | 2 | | | | | | |
| 8.2 | 1 | | | | | | |
| 8.3 | 1 | | | | | | |
| 8.4 | 1 | | | | | | |
| 8.5 | 2 | | | | | | |
| 8.6 | 1 | | | | | | |
| 8.7 | 1 | | | | | | |
| 9.1 | 1 | | | | | | |
| 9.2 | 1 | | | | | | |
| 9.3 | 1 | | | | | | |
| 10.1 | 1 | | | | | | |
| 10.2 | 1 | | | | | | |
| 10.3 | 1 | | | | | | |
| Addition of climate change consideration to management system standards | | | | | | | Rslt.* |
| ▪ consideration of climate change issues (clauses 4.1 and 4.2) – mandatory, if applicable | | | | | | | 2 |
| Additional requirements in accordance to ISO 17021:2015 | | | | | | | Rslt.* |
| ▪ internal audits and management review | | | | | | | 1 |
| ▪ review of actions taken on nonconformities identified in previous audit NC (B) - 01 During RC audit- OFI -04 Number and CM -02, Actions on OFI and CM verified, status-closed. Correction, RCA, Corrective action and effectiveness for identified non conformity verified and found satisfactory. | | | | | | | 1 |
| ▪ responsiveness to complaints | | | | | | | 1 |
| ▪ effectiveness of the management system with regard to fulfilment of objectives | | | | | | | 2 |
| ▪ progress of planned activities aimed at continual improvement | | | | | | | 1 |
| ▪ the client's management system ability and its performance regarding meeting of applicable requirements | | | | | | | 1 |
| ▪ operational control of the client's processes | | | | | | | 2 |
| ▪ review of any changes including the management system documentation | | | | | | | 1 |

| Audit Results | | | | | | | |
|--|--------|--------|--------|--------|--------|--------|--------|
| Table of Results | | | | | | | |
| ISO 9001:2015 | | | | | | | |
| Clause | Rslt.* | Clause | Rslt.* | Clause | Rslt.* | Clause | Rslt.* |
| ■ use of marks and/or any other reference to certification Use of TUV logo- Not used. It was not evident on Letter Head, Envelope Rslt.* (Result): 0 = not audited; 1 = fulfilled; 2 = basically fulfilled/ potential for improvement; 3 = not fulfilled/ nonconformity; - = not applicable/ excluded. Details: see section „Audit findings“ | | | | | | | 1 |

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

Standard specific Results

- Additional standard specific audit results and/or information are recorded in corresponding „Supplemental audit reports“ (e.g. for ISO 27001 or ISO 50001).

Organisation Profile

COMPANIES PROFILE CONTAINING FOLLOWING INFORMATION

Nirmala Memorial Foundation College of Commerce and Science, affiliated to the University of Mumbai was established in 2003, through the vision and guidance of Mr. Thakurbhai Desai

- INFORMATION IF MULTI-SITE SCHEME IS APPLIED : *N.A*
- IF YES, LIST OF AUDITED SITES (E.G. IN AUDIT PROGRAM) : *N.A*
AND LIST OF CERTIFIED SITES BY THIS AUDIT AS ENCLOSURES
- NUMBER OF EMPLOYEES (NUMBER OF EFFECTIVE EMPLOYEES) INCLUDING LOANED EMPLOYEES AND SUBCONTRACTORS (FULL TIME EQUIVALENTS) AS PER EACH LOCATION : *99 No's*
- RANGE OF PRODUCTS :
Degree and Post Graduate Programs offered in Commerce (B. Com / M. Com), Management, Mass Media, Information Technology [BSc (IT) / MSc (IT)], and Computer Science
- CLIENTS / TOP CLIENTS / MAJOR CLIENTS : *Students enrolled in the college for the various courses.*
- IMPORTANT PROCESSES : *Teaching Learning Process, Student's Admission Process, Examination Process, Placement, Library, HR/training, System documentation*
- IMPORTANT ENVIRONMENTAL ASPECTS (ISO 14001) : *N.A*
- IMPORTANT OCCUPATIONAL HEALTH & SAFETY RISKS : *N.A*
- CERTIFIED SINCE : *2021*

Summary of Results

- **ASPECTS OF THE COMPANY AND/OR THE AUDIT TO BE HIGHLIGHTED**
- **ISO 9001 / ISO 14001 – STATEMENT ON THE IMPLEMENTATION OF THE STANDARD REQUIREMENTS**
 - STRATEGICAL DIRECTION OF THE ORGANISATION (CONTEXT, STAKEHOLDER ANALYSIS) :
 - *Internal & external issues are identified (DI/CONT/E&I/06) (Annex I)*
 - *Internal issues – Implementation of National Education Policy (NEP) 2020, Low Registration of students for placement, Placement of students*
 - *External issues – competition from new colleges, Admissions & Examinations related frequent changes from the University of Mumbai*
 - *Interested parties and their need & expectations are documented (DI/CONT/N&E/06)*
 - *Interested parties – Management, Employees (Teaching & Non- teaching Staff), Students Regulatory/Statutory Bodies (Annex II) Students – N-Timely delivery of academic content, Facilitate overall growth of students, E-Support for placements and internships.*

Audit Report (SA1)

Organisation NIRMALA MEMORIAL FOUNDATION COLLEGE OF
 COMMERCE AND SCIENCE
 Audits(ZA) MUM/AUD/24-25/9824

- RISK-BASED APPROACH (ANALYSIS OF RISKS *and opportunities*) :
Risk & Opportunities are documented (DI/PLNG/RISK/06 & DI/PLNG/OPP/05). Admission Competition from new college – Reductions in number of admissions - Improving brand visibility through social media and other modes. Opportunities identified related to implementation and adoption of changes based on NEP Guidelines
- CONTROL OF EXTERNALLY PROVIDED PROCESSES :
Different types of vendor are identified for outsource process. Vendor selection and evaluation criteria (DI/PUR-SEFF/01) are documented. Details verified for Nadir Eduservice Pvt. Ltd. as a vendor for housekeeping activities.
- SYSTEMATICAL KNOWLEDGE MANAGEMENT :
The knowledge is being maintained and made accessible through Seminars, Workshops, discussion, peer learning.
- FULFILMENT OF COMPLIANCE OBLIGATIONS /LEGAL AND OTHER OBLIGATIONS
Legal/statutory requirements verified and fulfilment is evident. Couse and letter Number for Affiliation to University of Mumbai for sanctioned capacity is evident. Maharashtra Shasan approval letter for start of college dated 1/07/2003 is evident.
- CONSIDERING THE LIFE CYCLE PERSPECTIVE WHEN DETERMINING THE SIGNIFICANT ENVIRONMENTAL ASPECTS : *N.A.*
- MEASUREMENT AND CONTINUAL IMPROVEMENT OF THE ENVIRONMENTAL PERFORMANCE : *N.A.*

● **ISO 45001 STATEMENT INDICATING THE IMPLEMENTATION OF THE STANDARD REQUIREMENTS :**

~~(PLEASE STRIKE OFF IF NOT APPLICABLE).~~

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

STATEMENT ON THE AUDIT PARTICIPATION DURING CLOSING MEETING (~~MANDATORY DETAILS TO BE FILLED AS BELOW~~)-

- ~~○ THE MANAGEMENT LEGALLY RESPONSIBLE FOR OCCUPATIONAL HEALTH AND SAFETY :~~
- ~~○ PERSONNEL RESPONSIBLE FOR MONITORING EMPLOYEES' HEALTH :~~

— THE EMPLOYEES' REPRESENTATIVE(S) WITH RESPONSIBILITY FOR OCCUPATIONAL HEALTH AND SAFETY; IF NECESSARY: DOCUMENTATION OF JUSTIFICATION IN CASE OF ABSENCE OF SINGLE AUDIT PARTICIPANTS DURING CLOSING MEETING:

Conclusion

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

This includes in particular: the objective evidences,

- the policies and objectives and their implementation in the organisation,
- the processes existing in the management system and their interactions,
- the resource management,
- the measuring and analysis (incl. sample of indicators),
- the continual improvement process as well as
- the recording system (p.r.n. including standard specific objective evidences).

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

01 Good point , 07 Comment point, 03 Opportunity for improvement points observed are noted on following pages of this report.

All the findings of the audit have been conveyed to all concerned auditees, MR & Top Management during audit & closing meeting held at the end of audit.

As there is no non-conformity identified, the audit team recommends for maintenance of ISO 9001:2015.certificate

| Audit Findings | | |
|--|---|--|
| Notes for the findings | | |
| The evaluation of the audit findings basically follows the scheme shown below: | | |
| Stage | Classification | Meaning |
| NC A | Major Nonconformity (Nonconformity A "major") | Nonconformities could be classified as major in the following circumstances: <ul style="list-style-type: none"> • if there is a significant doubt that effective process control is in place, or that products or services will meet specified requirements, • a number of minor nonconformities associated with the same requirement or issue could demonstrate a systemic failure and thus constitute a major nonconformity. |
| NC B | Minor Nonconformity (Nonconformity B "minor") | Nonconformities could be classified as minor, if these do not affect the capability of the management system to achieve the intended results. |
| OFI | Opportunity for improvement | Items which would allow optimisation of the management system in relation to the requirements of the relevant standard. It is recommended that the company implements these items. |
| GP | Positive aspects / Good Practice | Positive aspects of the management system worthy of special mention (see also point 4.3 if applicable). |
| CM | Comments | Special situation and information to be traced in next audit. |

| If applicable: Guidance for management of nonconformities | | | |
|---|----------------------|-------------|------------------------------------|
| <p>Identified nonconformities are each documented in a nonconformity report ("Management of a nonconformity"), which are part of this audit report as annexes.</p> <p>The audit team uses the nonconformity reports after the audit to track the processing status and also documents in them the final assessment results for the nonconformities concerned.</p> <p>The organization shall perform a root cause analysis for any nonconformity and define adequate corrective actions. Root cause analysis, corrective actions including action plan for implementation and - if applicable - objective evidence for performed corrections or containment actions shall be submitted electronically to nominated lead auditor in charge on time to agreed deadline (latest six weeks after last day of the audit). The lead auditor will review these documents and shall inform organisation about the result.</p> <p>The auditee organisation shall implement the corrective actions as defined in the approved action plan and review the effectiveness of implemented actions.</p> <p>In the case of major nonconformities (NC A) the lead auditor shall verify the complete and effective implementation of action plan until agreed date (latest three months after last day of the audit). On decision of the auditor depending on type and extent of identified nonconformity, this can be done in a follow up audit on site or in a desktop-review of submitted documentation (objective evidence).</p> <p>For minor nonconformities (NC B) it can be agreed to perform the verification of effective implementation of action plan in the next regular audit.</p> <p>If any nonconformity applies to more than one of the audited standards, it may be recorded in a common nonconformity report, but shall be counted in the audit report for each applicable standard. The number of nonconformity reports may therefore be less than the number of nonconformities.</p> | | | |
| Summary for nonconformities | | | |
| Standard | Raised in this audit | | To be verified from previous audit |
| | Number NC A | Number NC B | Number NC |
| ISO 9001:2015 | 0 | 0 | 01 |
| Total | 0 | 0 | 01 |
| Total number of nonconformity-reports raised in this audit: | | | 0 |
| <input type="checkbox"/> At least one of the nonconformities is graded as „generic“ and is counted in more than one corresponding audited standard. | | | |
| <input checked="" type="checkbox"/> <input type="checkbox"/> During this audit the implementation of corrective actions and effectiveness of nonconformities of previous audit was verified. The records are attached to this audit file. | | | |

| No | OFI (Opportunity for Improvement) | Area / Process | Standard: clause |
|----|---|-----------------------|-------------------------------|
| 1. | <i>Interested parties needs and expectations are documented, however coverage of all interested parties may be reviewed and improved.</i> | System Coordinator/MR | ISO 9001: 2015 Clause – 4.2 |
| 2. | <i>Roles and Responsibilities are defined for all key positions, however authority details may be further reviewed, improved and captured.</i> | System Coordinator/MR | ISO 9001: 2015 Clause – 5.3 |
| 3. | <i>Digital labels/barcodes are assigned according to Dewey Decimal Classification (DDC) system in library management process,however summary of the codes details may be documented and displayed</i> | Library | ISO 9001: 2015 Clause – 7.5.3 |

| No | GP (Good Practice) | Area / Process | Standard: clause |
|----|--|-----------------------|-----------------------------------|
| 1. | <i>Management involvement and commitment evident for implementation of National Education Policy and ISO system.</i> | <i>Top Management</i> | <i>ISO 9001:2015 Clause – 5.1</i> |


| No | CM (Comment) | Area / Process | Standard: clause |
|----|---|---|--------------------------------------|
| 1. | <i>Climate change related issues may be elaborated in detail with consideration of impact of climate change on organization.</i> | <i>System Coordinator/MR</i> | <i>ISO 9001: 2015 Clause – 4.1</i> |
| 2. | <i>Risk and opportunities are documented with mitigation plan, however its linkage to be reviewed by considering issues (Internal/external) and interested parties needs and expectations.</i> | <i>System Coordinator/MR</i> | <i>ISO 9001: 2015 Clause – 6.1</i> |
| 3. | <i>Planning of Changes process is addressed in manual, however may be further reviewed to capture details related to consequences, resource requirement and reallocation of responsibilities and authorities as per standard requirement.</i> | <i>System Coordinator/MR</i> | <i>ISO 9001: 2015 Clause – 6.3</i> |
| 4. | <i>Objectives are documented, however details of activities to achieve objectives and plan of action for not achieving defined target may be reviewed, improved and documented.</i> | <i>System Coordinator/MR</i> | <i>ISO 9001: 2015 Clause – 6.2</i> |
| 5. | <i>Quality manual/Documented information may be reviewed to ensure scope details to be captured as per scope mentioned on ISO 9001:2015 certificate.</i> | <i>System Coordinator/MR</i> | <i>ISO 9001: 2015 Clause – 4.3</i> |
| 6. | <i>Examination operating procedures and policies documented however all details related to outsource process and its control, information capturing in senior supervision report and all activities conducted in examination process to be further reviewed and documented.</i> | <i>Examination Process</i> | <i>ISO 9001: 2015 Clause – 8.1</i> |
| 7. | <i>Teaching and learning process with details of academic calendar plan and syllabus report is evident, however the course outcomes mapping with syllabus topic/report may be further reviewed and strengthen.</i> | <i>Teaching and Learning Process [Graduate and post Graduate courses]</i> | <i>ISO 9001: 2015 Clause – 8.5.1</i> |

Audit Report (SA1)

Organisation NIRMALA MEMORIAL FOUNDATION COLLEGE OF
 COMMERCE AND SCIENCE
 Audits(ZA) MUM/AUD/24-25/9824

| Closure and Recommendations | | | | |
|---|-------------------------------------|------------------------------------|------------------------------------|------------------------------------|
| Closure result | ISO 9001:2015 | Error! Reference source not found. | Error! Reference source not found. | Error! Reference source not found. |
| Fulfilled | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Open nonconformities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Not fulfilled | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Recommendations of audit team | ISO 9001:2015 | Error! Reference source not found. | Error! Reference source not found. | Error! Reference source not found. |
| Grant*/ Extension*/ Renewing* | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Maintenance* | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Suspension | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Restoring | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Refuse | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Withdrawal | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <p>*) Grant / Extension / Renewing / Maintenance in the case of open nonconformities assumes that the nonconformities will be cleared as agreed</p> <p>Explanation of the terms: Renewing: New issue of the certificate for the re-certification. Restoring: End of the temporary invalidity of certificate after the suspension or after delayed re-certification.</p> | | | | |

| Comments for next Audit |
|--|
| If applicable, the final evidence of effectiveness and implementation of corrections and corrective actions for the nonconformities from this audit will be verified in the next audit. The comments and opportunities for improvement will be taken up again. The next audit is preliminarily scheduled for: 15/03/2026 |

| Responsible for Content | |
|--|------------------|
| Name: Dr. Nilesh Gaikar | Date: 12/04/2025 |
|  Signature audit team leader | |