

Standard	ISO9001:2015
Type of Audit	2 nd SURVEIILLANCE AUDIT
Name of the Organisation	DEV SANSKRITI VISHWAVIDYALAYA
Address of the Organisation	GAYATRIKUNJ - SHANTIKUNJ, HARIDWAR - 249411, UTTARAKHAND, INDIA
SiteAddress,If any	NA
No.of Employees	NR
Contact Person	Mr. Jagdish Kulmi
Scope	PROVIDING EDUCATION TO UNDERGRADUATES, GRADUATES, POST-GRADUATES AND PROVIDING DOCTORATE DEGREES.
Exclusion	THE STATE INCOME DOCTORATE DEGREES.
NACECode	
AnyOtherInformation	No

AQCGlobalLLC AQC-CA-Q-F20(Rev00)

SHARAC PAROHY
Vice Chancellor (2)
Dev Ganskriti Vishwavidyalaya
Goyafrikunj, Shantikunj,
Haridwar 249411

PageNo 1of8



Changes since Last Audit

Name of Organization	DEV SANSKRITI VISHWAVIDYALAYA
Changes in Scope	No No
Changes inNo.ofEmployees	No major changes
ChangesinNACE Code	No
Changes inShift	No
Changes inNo.of Sites	No
Changes in Legal & Statutory Requirements	No
Status of the Previous audit	NC Closed with CAR plan.
Verification of auditor and recommendation to increase/decrease number of man-days	No

AuditTeam	Lead Auditor	V. Yadav
	Auditor	V. Kamboj
	Technical Expert	P. Sharma
No of Mandays	03	
Date of Audit	20/12/23 - 23/12/23	
Audit Objective		nent system continues to fulfill the
	Requirements of the s	tandard

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PageNo 2of8

SHARAD PARDHY

Vice Chancellor 2.
Dev Sanskriti Vishwavidyalaya
Gayatrikunj, Shantikunj,
Harriwar 249411



Surveillance Audit Schedule

Time	Function/Area/department	ApplicableClauses	Team Leader	Team Member 1	Team Member 2	Technical Expert
9.00- 9.30	Opening Meeting					
9.30- 10.00	OfficeVisit	7.1.3,7.1.4	Y			
10.00-	Understanding the	4.4.5,4.5.4,4.5.5,	Y	Υ	Y	
11.00	Organization and its context, Need and Expectation of Interested Parties, Scopeof QMS	4.6,4.1,4.2,4.3, 4.4				
11.00- 12.30	Risk&Opportunities, Documented Information,M&M	6.1,7.5, 9.1	Y			
12.30- 1.30	QualityPolicy,Quality Objectives	5.2,6.2	Y	Y	Y	
	1.30-2.00WorkingLunch				1	
2.00- 3.00	Internal Audit & MRM,Leadership& Commitment,Roles andResponsibilities	9.2,9.3,5.1, 5.3	Y			
3.00- 4.00	Resources, Competence, Awareness, Communication	7.1,7.2,7.3, 7.4	Y	Y	Y	
4.00- 5.00	Operation control	8.1,8.2,8.3,8.4,8.5, 8.6,8.7	Y	Y	Y	
5.00- 6.00	Nonconformity and corrective,Continual Improvement	10.1,10.2,10.3	Y	Y	Y	

AQCGlobalLLC AQC-CA-Q-F20(Rev00)

PageNo 3of8

SHARAD PARDHY

Vice Chancellor::

Dev Sanskriti Vishwavidyalaya
Gayatrikunj, Shantikunj,
Haridwar 249411



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	ISO9001:2015						AUD	T	10				
		Cer	Initial tifica			1st veilla				ance	Cert	Re ifica day	_
		5days		NÇ	2.5day		2.5day		NC			NC	
4.1	understandingtheorganization	X	0	NO	X		140	X			X		
	and its context	2000									396		
4.2	Understandingtheneedsand expectationsofinterested parties	X			Х			X			X		
4.3	Determiningthescopeofthe qualitymanagementsystem	X			X			X			X		
4.4	Qualitymanagement systemand its processes	х			X			X			X		
5.1.1	Leadership & Commitment (Statementofensurity)	X			X			Х			X		
5.1.2		X			Х			X			X		
5.2	Qualitypolicy	X			Х			X			X		
5.3	Organizational roles, responsibilities and authorities	X			X			Х			X		
6.0	Planning	X			Х			X			X		
6.1	Actionstoaddressrisksand opportunities	X			Х			X			X		
6,2	Qualityobjectivesandplanning toachievethem	X			Х			Х			X		
6.3	Planning of changes and Purpose, resource availability and allocation	X			Х			X			X		
7.1	Resources	X			Х			X			X		
7.2	Competence	X			X			X			X		
7.3	Awareness	N/A			N/A			N/A			N/A		
7.4	Communication	X			X			X			X		
7.5	Documentedinformation	X			X			X			X		
8.1	Operational planning and control	X			X			X			X		
8.2.1	Customercommunication	X			Х			X			X		
8.2.2	Determining of Requirements for products and services	X			X			X			X		
8 2.3		Х			X			X			X		
8.2.4		X			Х			X			X		
8.3	Design and Development (D&D)				N/A			NA			N/A		
8.4.1	processes, products and	X			X			X			X		
842	services Typeandextentofcontrol	X			X			X	1		X		
	Information for external providers	Contractor of the last of the			X			X			X		

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PageNo 4of8

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Dev Sanskriti Vishwavidyalaya
Gayatrikunj, Shantikunj,
Haridwar 249411 ::



SURVEILLANCEAUDITREPORT

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PageNo 5of8

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Vice Chancellor ::

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Gayafrikunj, Shantikunj,
Haridwar 249411



SURVEILLANCEAUDITREPORT

1618	serviceprovision				THE SECTION OF THE SE
8.5.2	IdentificationandTraceability	X	X	X	X
8.5.3	Propertybelonging to customers or external providers	X	x	X	X
8.5.4	Preservationofoutput	X	X	X	X
	Post-deliveryactivities	X	X	X	X
8.5.6	Control of changes	Х	X	X	X
8.6	Release ofproductsandservices	188	X	Х	X
8.7	Control of nonconforming outputs	X	X	X	X
	Monitoring, Measurement analysisand evaluation	X	X	X	х
9.1.2	CustomerSatisfaction	X	X	X	X
9.1.3	Analysisand Evaluation	X	X	X	X
9.2	Internal Audit	X	X	X	X
9.3	ManagementReview	X	X	X	X
10.1	Improvement-General	X	X	X	X
10.2	NonconformityandCorrective action	X	X	X	X
10.3	Continualimprovement	X	X	X	X
THE STATE OF	Logo	X	X	X	X
15 T	Complaints	X	X	X	X

Shadedclausetitlesmustbeaddressedateachvisit

X=Clauses to be addressed at the visit,O=OFI raised, M=NCMajor, m= NCMinor

SUMMARYOFSURVEILLANCEAUDIT FINDINGS:

\$.N.	Observations	Clause	Type
1.	Review of risk and opportunities not evidence since 2022. Evidence: Risk register	6.1	m
2.	Identification and storage of chemicals stored in Chemistry lab not evidence. Evidence: Identification with Self life/MSDS/Storage conditions	8.5.2	М
3.	Internal audit and MRM not evidence with reference to the requirement of ISO 9001:2015 Standard. Evidence: Internal audit schedule/ Checklist	9.2	m

Area of Improvement

- 1. Evacuation layout to be improve
- Training related to the standard to the HOD's
 Objectives and targets to be review in define interval
- Awareness of Quality policy, Vision & mission
 Awareness of risk and opportunities to the HOD's

Non-Conformities	Type	No.	Description
1	Major	0	
	Minor	3	
	OFI	5	

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PageNo 6of8

SHARAD PARDHY

Vice Chancellor Dev Sanskriti Vishwavidyalaya Gayatrikunj, Shantikunj, Haridwar 249411 35



SURVEILLANCEAUDITREPORT

This report details the outcome of our surveillance audit of your Quality Management System to determine the degree of compliance with your own Quality Management System documentation and the requirements of the ISO 9001:2015 standard. The surveillance audit was conducted in accordance with AQC' standard operating procedures.

The reporting format follows the selected Quality Management System standard, clause byclause, and findings are reported as appropriate. Activities that are not in compliance with your own documentation or the ISO standard are reported on our Non-Conformance Reports (NCR'S) or Opportunity For Improvement (OFI) or Observation.

ANON-CONFORMANCEREPORT is a non-compliance of a serious nature, one that may have a significant impact on the quality of the services provided by your Organisation, and/ or relate to multiple non-complying activities. NCR's must be responded to, corrected and formally closed-out before surveillance and registration can proceed. Many Non Conformance Reports can be closed-out by our review of revised documentation and therefore, you should submit copies of such documentation with your response. If follow-up visits are required for close-out purposes, then we will contact you to arrange a mutually convenient time.

OPPORTUNITY FOR IMPROVEMENT forms address areas which are not considered to have a serious impact on the quality of the services provided by your Organisation and normally relate to isolated non-complying activities. They may also point out areas where initiative can be taken to improve sections of your Quality Management System. It is not mandatory to respond to OFI's. However, they are taken into consideration at the next surveillance visit, since an opportunity for improvement may be preventative measure or part of the continuous improvements process.

Please respond to this report by completing the Non-Conformance Reports (NCR's) and, if necessary, Opportunity For Improvement forms (OFI'S) attached, within the time period agreed at the audit closing meeting.

Yoursignatureisrequiredagainst both "OrganisationRepresentative" spacesonthe form, and please fills indetails of your intended corrective action and the date you anticipate completing the corrective action. If you have a problem meeting the required response times, then please contact us to re-evaluate proposed action and time-scale.

Ifyou haveanyqueries, please contact AQC GlobalLLC

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PageNo 7of8

SHARAD PARDHY
Vice Chancellor

Dav Sanskriti Vishwavidyalaya Gayatrikunj, Shantikunj, Haridwar 249411



SURVEILLANCEAUDITREPORT

Disclosure

"We confirmthe following informationand opinions were givento you inconnectionwith your examination of the Management System. We acknowledge as top management ourresponsibility for the Management System, results and audit report, which you have prepared for the organization. All the records have been made available to you for the purpose of your audit and all the transactions undertaken by the organization have been property reflected and recorded in the Management System. All other records and related information have been made available to you.

We also confirmthere are no materialcontingents, major customer Dis-satisfaction issues or potentialliabilities under claims or pending or threatening litigation. Disclosure has been made in the audit report for all matters necessary for the audit report to show a true and fair view of the organization's Management System state of affairs and results".

SIGNOFF:

Signed on behalf of AQC Global LLC

- 1. V.Yadav
- 2. V. Kamboj
- 3. P. Sharma

Digital report_Date: 28/12/23

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Jan 28/12/23

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PageNo 8of8

SHARAD PARDHY
Vice Chancellor ::

Dev Sanskriti Vishwavidyalaya
Gayatrikuni, Shantikuni,
Haridwar 249411



Standard	ISO 45001:2018
Type of Audit	2 nd SURVEIILLANCE AUDIT
Name of the Organisation	DEV SANSKRITI VISHWAVIDYALAYA
Address of the Organisation	GAYATRIKUNJ - SHANTIKUNJ, HARIDWAR - 249411, UTTARAKHAND, INDIA
SiteAddress,If any	NA
No.of Employees	NR
Contact Person	Mr. Jagdish Kulmi
Scope	PROVIDING EDUCATION TO UNDERGRADUATES, GRADUATES, POST-GRADUATES AND PROVIDING DOCTORATE DEGREES.
Exclusion	DEGITE DEGITED.
NACECode	
AnyOtherInformation	No

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PageNo 1of6

SHARAD PARDHY

Vice Chancellor ::
Dev Sanskrift Vishwavidyalaya
Gayatrikunj, Shantikunj,
Haridwar 249411



Changes since Last Audit

Name of Organization	DEV SANSKRITI VISHWAVIDYALAYA
Changes in Scope	No
Changes inNo.ofEmployees	No major changes
ChangesinNACE Code	No
Changes inShift	No
Changes inNo.of Sites	No
Changes in Legal & Statutory Requirements	No
Status of the Previous audit finding	NC Closed with CAR plan.
Verification of auditor and recommendation to increase/decrease number of man-days	No

Lead Auditor	V. Kamboj				
Auditor	V. Yadav				
Technical Expert	P. Sharma				
03					
20/12/23 - 23/12/23					
	Organization management system continues to fulfill the				
	Auditor Technical Expert 03 20/12/23 - 23/12/23				

AQCGlobalLLC AQC-CA-Q-F20(Rev00)

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PageNo 2of6

SHARAD PAR DHY

Vice Chancellor ::

Dev Sanski ti Vishwavidyalaya
Gayatrikunj, Shantikunj, Haridwar 249411



SURVEILLANCEAUDITREPORT

Surveillance Audit Schedule

Time	Function/Area/department	ApplicableClauses	Team Leader	Team Member	Team Member 2	Technical Expert
9.00- 9.30	Opening Meeting					
9.30- 10.00	OfficeVisit	7.1.3,7.1.4	Y			
10.00- 11.00	Understanding the Organization and its context, Need and Expectation of Interested Parties, Scopeof OHSMS	4.4.5,4.5.4,4.5.5, 4.6,4.1,4.2,4.3, 4.4	Y	Y	Y	
11.00- 12.30	Risk&Opportunities, Documented Information, M&M	6.1,7.5, 9.1	Y			
12.30- 1.30	OH&S Policy, Objectives	5.2,6.2	Y	Y	Υ	
	1.30-2.00WorkingLunch					
2.00- 3.00	Internal Audit & MRM,Leadership& Commitment,Roles andResponsibilities	9.2,9.3,5.1, 5.3	Y			
3.00- 4.00	Resources, Complaince, Competence, Awareness, Communication	7.1,7.2,7.3, 7.4	Y	Y	Y	
4.00- 5.00	Operation control	8.1,8.2,8.3,8.4,8.5, 8.6,8.7	Y	Y	Υ	
5.00- 6.00	Nonconformity and corrective, Continual Improvement	10.1,10.2,10.3	Y	Y	Y	

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PageNo 3of6

SHARAD PAR DHY
Vice Chancellor (2)
Dev Sanskriti Vishwavidyalaya
Gayatrikunj, Shantikunj,
Haridwar 249411



3YEARSAUDITPLAN MATRIX (AQC Reference only)

	ISO9001:2015			AUDIT										
14		Ce	Initia rtifica		Su	1st rveilla	ance			ance			ation	
		X	days	NC	X	2.5da	NC NC	X	2.5d			2day	_	
4.1	understandingtheorganization	X	U	IAC	X	U	NC		0	NC	X	0	NC	
	and its context				^			X			X			
4.2	Understandingtheneedsand expectationsofinterested parties	X			X			X			X			
4.3	Determiningthescopeofthe OHSmanagementsystem	X			X			X			X			
4.4	OHS management systemand its processes	X			Х			X			X			
5.1	Leadership & Commitment (Statementofensunity)	X			X			X			X			
5.2	OHS policy	X			Х			Х			X			
5.3	Organizational rol es, responsibilities and authorities	X			X			X			X			
5.4	Consultation and participation of workers	X			X			X			X			
6.0	Planning	X			Х			Х			X			
6.1	Actionstoaddress Risk and opp.	X			X			X			X			
6.1.2	Hazard identification and assessment of risks and opportunities	X			X			X			X			
6.1.2.2	other risks to the OH&S management system	X			X			X			X			
6.1.2.3	Assessment of OH&S opportunities and other opportunities for the OH&S management system	X			X			X			X			
6.1.3	Determination of legal requirements and other requirements	X			Х			X			X			
61.4	Planning action	X			Х			Х			X	+		
6.2	OH&S objectives and planning to achieve them	X			х			X		- 1	X	+		
7.1	Support Resources	X			х	1		X		- 8	X	-		
7.2	Competence	X			x	-		X	-		Y	-		
7.3	Awareness	No. of the			-	-		^	-	10	X	-		
7.4	Communication	X			х	-		X	-	- 1		-		
7.5	Documentedinformation	X			X	-		X	-	- 5	X			
8.1	Operational planning and	X			x			X			X			

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AQC-CA-Q-F20(Rev00)

PageNo 4of6

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SHARAD PARDHY
Vice Chancellor:

Dev Sanskriti Vishwavidyalaya
Gayatrikunj, Shantikunj,



SURVEILLANCEAUDITREPORT

485	Control				
8.1.2	Eliminating hazards and reducing OH&S risks	×	X	X	X
8.1.3	Management of change	THE STATE OF			
8.1.4	Procurement	IND A			
8.2	Emergency preparedness and response				

9.0	Monitoring, Measurement analysisand evaluation	X	X	X	X
9.1.2	Evaluation of compliance	X	Х	X	X
	Analysisand Evaluation	X	X	Х	X
9.2	Internal Audit	X	X	Х	X
9.3	ManagementReview	X	X	X	X
10.1	Improvement-General	X	X	Х	X
10.2	Incident, nonconformity and corrective action	×	X	Х	X
10.3	Continualimprovement	X	X	X	X

Shadedclausetitlesmustbeaddressedateachvisit

X=Clauses to be addressed at the visit,O=OFI raised, M=NCMajor, m= NCMinor

SUMMARY OF SURVEILLANCE AUDIT FINDINGS:

S.N.	Observations	Clause	Type	
1.	OH&S risks and other risks in the area of Chemical Lab not evidence Evidence: Hazard identification and risk assessment related to the Chemical storage/ prevention	6.1.2.2	m	
2.	Emergency preparedness planning as per schedule not evidence. Evidence: Emergency preparedness mockdrills/ plan vs actual/ documented information of completed drills	8.2	m	
3.	Analysis of reported incident not evidenced, also category of incident not classify precisely. Evidence: Incident reporting method to be review, near miss incident and analysis of reported incident to avoid repetition.	10.2	m	

Area of Improvement

- 1. Mock drill criteria to be increase with real scenarios.
- 2. OHS Objectives and targets to be review in define interval and it should be measurable.
- 3. Communication matrix has to improve
- 4. Awareness of Hazard identification and risk assessment analysis to the HOD's
- 5. Consultation and participation of users to be improve by reviewing the committee structure

Non-Conformities	Туре	No.	Description
	Major	0	
	Minor	3	
	OFI	5	

This report details the outcome of our surveillance audit of your Environment Management Systemto determine the degree of compliance with your own Environment Management System documentation and the requirements of the ISO 9001:2015 standard. The surveillance audit was conducted in accordance with AQC' standard operating procedures.

AQCGlobalLLC AQC-CA-Q-F20(Rev00) Court

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PageNo 5of6

SHARAD PAR JHY

Vice Chancellor ::.
Dev Sanskriti Vishwavidyalaya
Gayatrikunj, Shantikunj,

Haridwar 249411 433

SURVEILLANCEAUDITREPORT

The reporting format follows the selected Environment Management System standard, clause by clause, and findings are reported as appropriate. Activities that are not in compliance with your own documentation or the ISO standard are reported on our Non-Conformance Reports (NCR'S) or Opportunity For Improvement (OFI) or Observation.

ANON-CONFORMANCEREPORT is a non-complianceofaserious nature, onethat mayhavea significant impact on the Environment of the services provided by your Organisation, and/ or relate to multiple non-complying activities. NCR's must be responded to, corrected and formally closed-out before surveillance and registration can proceed. Many Non Conformance Reports can be closed-out by our review of revised documentation and therefore, you should submit copies of such documentation with your response. If follow-up visits are required for close-out purposes, then we will contact you to arrange a mutually convenient time.

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Disclosure

"We confirmthe following informationand opinions were given to you inconnection with your examination of the Management System. We acknowledge as top management our responsibility for the Management System, results and audit report, which you have prepared for the organization. All the records have been made available to you for the purpose of your audit and all the transactions undertaken by the organization have been property reflected and recorded in the Management System. All other records and related information have been made available to you.

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SIGNOFF:

Signed on behalf of AQC Global LLC

1. V. Kamboj

2. V. Yadav

3. P. Sharma

Digital report Date 28/12/23

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PageNo 60f6

AQCGlobalLLC AQC-CA-Q-F20(Rev00)

SHARAD PARDHY

Vice Chancellor ::
Dev Sanskriti Vishwavidyalaya
Gayatrikunj, Shantikunj,
Haridwar 249411



Standard	ISO 14001:2015
Type of Audit	2 nd SURVEIILLANCE AUDIT
Name of the Organisation	DEV SANSKRITI VISHWAVIDYALAYA
Address of the Organisation	GAYATRIKUNJ – SHANTIKUNJ, HARIDWAR – 249411, UTTARAKHAND, INDIA
SiteAddress,If any	NA
No.of Employees	NR
Contact Person	Mr. Jagdish Kulmi
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AnyOtherInformation	No

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PageNo 1of7

SHARAD PARDHY Vice Chancellor Dev Sanskriti Vishwavidyalaya Gayatrikunj, Shantikunj, Haridwar 249411



Changes since Last Audit

Name of Organization	DEV SANSKRITI VISHWAVIDYALAYA
Changes in Scope	No
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Changes in Legal & Statutory Requirements	No
Status of the Previous audit finding	NC Closed with CAR plan.
Verification of auditor and recommendation to increase/decrease number of man-days	No

AuditTeam	Lead Auditor	V. Yadav				
	Auditor	V. Kamboj				
	Technical Expert	P. Sharma				
No of Mandays	03					
Date of Audit	20/12/23 - 23/12/23					
Audit Objective	Organization manager	ment system continues to fulfill the				
	Requirements of the standard					

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PageNo 2of7

SHARAD PARDHY

Vice Chancellor ::
Dev Sanskriti Vishwavidyalaya
Gayatrikunj, Shantikunj,
Haridwar 249411 ::

Surveillance Audit Schedule

Time	Function/Area/department ApplicableClauses		Team Leader	Team Member 1	Team Member 2	Technical Expert
9.00- 9.30	Opening Meeting					
9.30- 10.00	OfficeVisit	7.1.3,7.1.4	Y			
10.00-	Understanding the	4.4.5,4.5.4,4.5.5,	Y	Υ	Υ	
11.00	Organization and its context, Need and Expectation of Interested Parties, Scopeof EMS	4.6,4.1,4.2,4.3, 4.4				
11.00- 12.30	Risk&Opportunities, Documented Information, M&M	6.1,7.5, 9.1	Y			
12.30- 1.30	Enviornment Policy, Objectives	5.2,6.2	Y	Y	Y	
	1.30-2.00WorkingLunch					
2.00- 3.00	Internal Audit & MRM,Leadership& Commitment,Roles andResponsibilities	9.2,9.3,5.1, 5.3	Y			
3.00 - 4.00	Resources, Complaince, Competence, Awareness, Communication	7.1,7.2,7.3, 7.4	Y	Y	Y	
4.00- 5.00	Operation control	8.1,8.2,8.3,8.4,8.5, 8.6,8.7	Y	Y	Y	
5.00- 6.00	Nonconformity and corrective,Continual Improvement	10.1,10.2,10.3	Y	Y	Y	

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PageNo 3of7

SHARAD PAR DHY

Vice Chancellor ::
Dev Sanskiii Vishwavidyalaya Gayatrikuni, Shantikuni, Haridwar 249411



SURVEILLANCEAUDITREPORT

3YEARSAUDITPLAN MATRIX (AQC Reference only)

iSO9001:2015		AUDIT											
			Initia rtifica		Sui	1st veilla		Sur	2nd veill	ance	Cer	Re tifica	ation
		5	days			2.5da			2.5d			2day	
		X	0	NC	X	0	NC	X	0	NC	X	0	NC
4.1	understandingtheorganization and its context	X			X		, iii	X			X		
4.2	Understandingtheneedsand expectationsofinterested parties	X			X			X			X		
4.3	Determiningthescopeofthe Environment managementsystem	X			X			X			X		
4.4	Environment management systemand its processes	X			Х			X			X		
5.1.1		X			X			X			X		
5.1.2	Customerfocus(statementof conformity)	X			X			X			X		
5.2	Environment policy	X			X			X			X		
53	Organizational roles, responsibilities and authorities	X			X			X			Х		
6.0	Planning	X			Х			X			X		
6,1	Actionstoaddress Risk and opp./ Aspect and impacts	X			X			X			X		
6.2	Environment objectivesandplanning toachievethem	X			X			X			X		
6.3	Planning of changes and Purpose, resource availability and allocation	X			X			X			X		
7.1	Resources	X			X			X			X		
7.2	Competence	X			X			X			X		
7.3	Awareness	He B											
7.4	Communication	Х			X			X			X		
7.5	Documentedinformation	X			X			X			X		
8.1	Operational planning and Control	X			X			X			X		
8.2.	Emergency preparedness and response	X			Х			X			X		

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PageNo 4of7



SURVEILLANCEAUDITREPORT

9.0	Monitoring, Measurement analysisand evaluation	X	X	X	X
9.1.2	Evaluation of compliance	X	X	X	X
	Analysisand Evaluation	Х	X	X	X
9.2	Internal Audit	X	X	X	X
9.3	ManagementReview	X	X	X	X
10.1	Improvement-General	X	X	X	X
10.2	NonconformityandCorrective action	×	X	X	X
10.3	Continualimprovement	X	X	X	X

Shadedclausetitlesmustbeaddressedateachvisit

X=Clauses to be addressed at the visit,O=OFI raised, M=NCMajor, m= NCMinor

SUMMARYOFSURVEILLANCEAUDIT FINDINGS:

S.N.	Observations	Clause	Type
1.	Review of Aspect and impact analysis with reference to environment requirement while considering the self life since 2022.	6.1/9.1.1	m
	Evidence: Aspect and impact analysis		
2.	Environment management programs not properly documented for further measuring and monitoring.	8.1/8.2	m
	Evidence: EMP's of Electricity saving/ soil contamination/ water consumption		
3.	Environment objectives supplementary document not evidenced.	6.2/9.1.1	m
	Evidence: Environment objectives trend with action plan		

Area of Improvement

- 1. Training related to the standard to the HOD's
- 2. Objectives and targets to be review in define interval
- 3. Awareness of Environment policy, Vision & mission
- 4. Awareness of aspect and impacts analysis to the HOD's

Non-Conformities	Туре	No.	Description
	Major	0	
	Minor	3	
	OFI	4	

This report details the outcome of our surveillance audit of your Environment Management System to determine the degree of compliance with your own Environment Management System documentation and the requirements of the ISO 9001:2015 standard. The surveillance audit was conducted in accordance with AQC' standard operating procedures.

The reporting format follows the selected Environment Management System standard, clause by clause, and findings are reported as appropriate. Activities that are not in compliance with your own documentation or the ISO standard are reported on our Non-Conformance Reports (NCR'S) or Opportunity For Improvement (OFI) or Observation.

ANON-CONFORMANCEREPORT is a non-compliance of a serious nature, one that may have a significant impact on the Environment of the services provided by your Organisation, and/ or relate to multiple non-complying activities. NCR's must be responded to, corrected and formally closed-out before surveillance and registration

AQCGlobalLLC AQC-CA-Q-F20(Rev00)

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PageNo 5of7

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can proceed. Many Non Conformance Reports can be closed-out by our review of revised documentation and therefore, you should submit copies of such documentation with your response. If follow-up visits are required for close-out purposes, then we will contact you to arrange a mutually convenient time.

OPPORTUNITY FOR IMPROVEMENT forms address areas which are not considered to have a serious impact on the Environment of the services provided by your Organisation and normally relate to isolated noncomplying activities. They may also point out areas where initiative can be taken to improve sections of your Environment ManagementSystem.It is not mandatory to respond to OFI's. However, they are taken into consideration at the next surveillance visit, since an opportunity for improvement may be preventative measure or part of the continuous improvements process.

Please respond to this report by completing the Non-Conformance Reports (NCR's) and, if necessary, Opportunity For Improvement forms (OFI'S) attached, within the time period agreed at the audit closing meeting.

Yoursignatureisrequiredagainst both "OrganisationRepresentative" spaces on the form, and please fills indetails of your intended corrective action and the date you anticipate completing the corrective action.If you have a problem meeting the required response times, then please contact us to re-evaluate proposed action and time-

Ifyou haveanyqueries, please contact AQC Global LLC

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Vice Chancellor::: Dev Sanskriti Vishwavidyalaya Gayatrikunj, Shantikunj,

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PageNo 6of7

AQCGlobalLLC AQC-CA-Q-F20(Rev00)

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SURVEILLANCEAUDITREPORT

Disclosure

"We confirmthe following informationand opinions were givento you inconnectionwith your examination of the Management System. We acknowledge as top management ourresponsibility for the Management System, results and audit report, which you have prepared for the organization. All the records have been made available to you for the purpose of your audit and all the transactions undertaken by the organization have been property reflected and recorded in the Management System. All other records and related information have been made available to you.

We also confirmthere are no materialcontingents, major customer Dis-satisfaction issues or potentialliabilities under claims or pending or threatening litigation. Disclosure has been made in the audit report for all matters necessary for the audit report to show a true and fair view of the organization's Management System state of affairs and results".

SIGNOFF:

Signed on behalf of AQC Global LLC

- 1. V.Yadav
- 2. V. Kamboj
- 3. P. Sharma

Digital report_Date: 28/12/23

Canf 28/12/23

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Vice Chancellor ::
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