



Assurance Quality Certification LLC

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SURVEILLANCE AUDIT REPORT ENVIRONMENT

Standard	ISO 14001:2015
Type Of Audit	1 ST SURVEILLANCE AUDIT
Name of the Company	MAULANA AZAD COLLEGE,
Address of the company	8, Rafi Ahmed Kidwai Rd, Taltala, Kolkata, West Bengal, Kolkata - 700013
Site Address, If any	8, Rafi Ahmed Kidwai Rd, Taltala, Kolkata, West Bengal, Kolkata - 700013
No. of Employees	Teaching = 101, Non-teaching = 41 , House-keeping = 5, Security =10, Electrician=1, Total = 158
No. Of Shift	1
E mail id	,maulanaazadcollegekolkata@gmail.com
Contact Person Detail	Dr. Subhasis Dutta
Telephone/Fax	033-29730203
Scope	Teaching, Learning and Evaluation processes relating to awarding of Bachelor Degrees in Arts, Commerce, Science and General subject along with Post Graduate Degrees in Arts and Science considering Environment friendly and Energy efficiency manner in College Green Campus.
Technical Area	Teaching, Learning and Evaluation, Capacity Building, Skill Enhancement, Institutional Social Responsibility, Heritage Studies.
Exclusion	No exclusion is there
IAF Code	37
Complexity	Normal
Any Other Information	No



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Changes since Last Audit

Name of Organization	MAULANA AZAD COLLEGE
Changes in Scope	Same as before
Changes in No. of Employees	No changes
Changes in IAF Code	No changes
Changes in Shift	No changes
Changes in No. of Sites	No changes
Changes in Legal & Statutory Requirements	No changes
Status of the Previous audit finding	Previous finding "Proper traceability of records in soft copy" taken care by College.
Verification of auditor and recommendation to increase/decrease number of mandays	No such changes required.

Audit Team	Team Leader	Amalesh Kumar Mandal
	Tem Member	-
	Technical Expert	-
No of Mandays		1 days
Date of Audit	16/04/2024	
Audit Objective	Organization management system continues to fulfill of the requirements of the standard	



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Surveillance Audit Schedule (16/04/2024)

Time	Function/Area/department	Applicable Clauses	Team Leader	Team Member 1	Team Member 2	Technical Expert
9.00-9.30	Opening Meeting			AKM		
9.30-10.00	Office Visit	7.1.3, 7.1.4	Y	AKM		
10.00-11.00	Understanding of the organization context, Need & Expectation of Interested Parties, Scope, Processes and sequence & interaction, Leadership & Commitment, Environmental Policy, Roles Responsibilities	4.1, 4.2, 4.3, 4.4, 5.1, 5.2, 5.3	Y	AKM		
11.00-12.30	Risks & Opportunities, Environmental aspects, Compliance obligations, Planning action, Environmental Objectives, Planning actions, IA & MRM records, monitoring, Measurement, Analysis & Evaluation	6.1.1, 6.1.2, 6.1.3, 6.1.4, 6.2.1, 6.2.2, 9.1, 9.2, 9.3	Y	AKM		
12.30-1.30	Resources, Competence, Awareness, Communication, Documented Information	7.1, 7.2, 7.3, 7.4, 7.5	Y	AKM		
	1.30-2.00 Working Lunch			AKM		
2.00-3.00	Operational Planning & Control	8.1	Y	AKM		
3.00-4.00	Emergency preparedness & response	8.2	Y	AKM		
4.00-5.00	Nonconformity and corrective and preventive action, Continual Improvement	10.1, 10.2, 10.3	Y	AKM		



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3 YEARS AUDIT PLAN MATRIX

ISO 14001:2015		AUDIT											
		Initial Certification			1st Surveillance			2nd Surveillance			Re Certification		
		2.5 days			2 day			2 day			2 days		
		X	O	NC	X	O	NC	X	O	NC	X	O	NC
4.1	Understanding the organization and its context	X			X			X			X		
4.2	Understanding the needs and expectations of interested parties	X			X			X			X		
4.3	Determining the scope of the Environmental management system	X			X			X			X		
4.4	Environmental management system	X			X			X			X		
5.1	Leadership & Commitment	X			X			X			X		
5.2	Environmental policy	X			X			X			X		
5.3	Organizational roles, responsibilities and authorities	X			X			X			X		
6.0	Planning	X			X			X			X		
6.1.1	Actions to address risks and opportunities	X			X			X			X		
6.1.2	Environmental Aspect	X			X			X			X		
6.1.3	Compliances Obligation	X			X			X			X		
6.1.4	Planning action	X			X			X			X		
6.2	Environmental objectives and planning to achieve them	X			X			X			X		
7.1	Resources	X			X			X			X		
7.2	Competence	X			X			X			X		
7.3	Awareness	X			X			X			X		
7.4	Communication	X			X			X			X		
7.5	Documented information		X		X			X			X		
8.1	Operational planning and control	X			X			X			X		
8.2	Emergency Prepared and Responses	X			X			X			X		
9.1.1	Monitoring, Measurement analysis and evaluation	X			X			X			X		
9.1.2	Evaluation Of Compliances Documented	X			X			X			X		
9.2	Internal Audit	X			X			X			X		
9.3	Management Review	X			X			X			X		
10.1	Improvement – General	X			X			X			X		
10.2	Nonconformity and corrective action	X			X			X			X		
10.3	Continual improvement	X			X			X			X		
	Logos	X			X			X			X		
	complaints	X			X			X			X		

Shaded clause titles must be addressed at each visit

X = Clauses to be addressed at the visit, O = OFI raised, M = NC Major, m = NC Minor



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SUMMARY OF SURVEILLANCE AUDIT FINDINGS:

1. Audit conducted based on random sampling. Found observed their course delivery process going on as per standard work process as specified by University/UGC Accredited norms.
2. Respective Green projects found reviewed.
3. Communication and display process maintained.
4. World's environment day celebration done
5. Greenery development project found maintain
6. Rain water harvesting project utilized.
7. Auditee/Management commitment towards environment improvement found observed

Area of Improvement	No such observation/improvement points observed in this session.		
Non Conformities	Type	No.	Description
0	Major	0	
	Minor	0	

This report details the outcome of our surveillance audit of your Environmental management system to determine the degree of compliance with your own Environmental system documentation and the requirements of the ISO 14001:2015 standard. The surveillance audit was conducted in accordance with AQC' standard operating procedures.

The reporting format follows the selected Environmental 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.

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



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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 quality of the services provided by your company and normally relate to isolated non-complying activities. They may also point out areas where initiative can be taken to improve sections of your Environmental 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.

Your signature is required against both "Company Representative" spaces on the form, and please fills in details 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.

If you have any queries, please contact **Assurance Quality Certification LLC**

Client Disclosure

"We confirm the following information and opinions were given to you in connection 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.

We also confirm there are no material contingents, major customer Dis-satisfaction issues or potential liabilities 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".

SIGN OFF:

Signed on behalf of
Assurance Quality Certification LLC

Signed on Behalf of
(Company Name)

Lead Auditor

(Authorised Signatory)

Amalish Kr. Menon

Date: 16/04/2024

Date: 16/04/2024



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AUDIT FINDINGS:

VERIFICATION OF DOCUMENTED INFORMATION & RECORDS AS PER STD REQUIREMENT (C- Conformity, NC-Non Conformity, O-Observation)		
Clause Number	C/NC/O	Document Verification detail with statement of Conformity
4. Context of the organization		
4.1 Understanding the organization and its context (Determination of external and Internal Issues)	C	Identified and included in Manual. (Doc. Ref No. EMS/001)
4.2 Understanding the needs and expectations of interested parties (Determination, Monitor & Review of the Interested Parties)	C	Identified and included in Manual. (Doc. Ref No. EMS/001)
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)	C	Scope established and included in Manual. (Doc. Ref No. EMS/001)
4.4 Environmental management system and its processes (Established, Implement and maintained, process and Interaction of Process)	C	Process Flow related to Course delivery found established.
5. Leadership		
5.1 Leadership & Commitment (Statement of ensurity)	C	Interviewed with Top Management, Principal. Commitment related to Environment found implemented in documentation as well as in College Campus.
5.2 Environmental policy (Documented Information, Establish, Implement, Maintain, communicated and understood)	C	Environment Policy established and found displayed and communicated properly.
5.3 Organizational roles, responsibilities and authorities	C	Defined in Manual and in their departmental records.
6. Planning		
6.1 Actions to address risks and opportunities (Risk Assessment has done with prevention of undesirable effects)	C	Environmental Risk analysis carried out and review also takes place.
6.2 Determination and maintained documented information of Environmental Aspect, associated impacts Criteria Used and significant aspects and, of the activity and Environmental Impacts	C	Environmental Aspect/Impact analysis established and review also takes place.
6.3 Determination of the Compliances Obligation and maintained documented information how to comply.	C	Environment review has done based on Meter reading study and kept as documented information. Affiliation copies also available as compliance documents.



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6.4 Planning action for Environmental aspect, Compliance Obligation and Risk and Opportunities.	C	Environmental Aspect/Impact analysis established and review also takes place. Documented and planned
6.5 Environmental objectives and planning to achieve them (Documented, Measurable, Monitored and communicated)	C	Environment Objectives found established and planned to achieve action (MAP). Review also takes place against set targets.
7 Support		
7.1 Resources (Resource needed for Continual Improvement)	C	Found available as to delivery their current process.
7.2 Competence (Employee records & Competence skill matrix)	C	Competency matrix, training planning and related training records found available. Knowledge delivery related MOU also made with 3 rd party.
7.3 Awareness (Environmental Policy, Objectives & Effectiveness of EMS)	C	Done through training and display
7.4 Communication (what, who, when, whom, how with retained documented information)	C	Done through training and display
7.5 Documented information (External Origin, Creation, Updation, Distribution, Preservation, version control, Retention and disposition)	C	Control of documented information procedure established. Documents mostly available in Soft mode.
8 Operation		
8.1 Operational planning and control (Documented, Plan, Implement, Control the process related to SEU and communication)	C	Operational procedures established supported with work instructions and related records. Respective Green projects also found established and action plan initiated and monitored.
8.2 Design (Documented, Specification, design consideration)	C	Design part not included
8.3 Procurement (Establish & Implement criteria for evaluating Environment performance)	C	Procurement process well established. Effectively implemented
9 Performance evaluation		
9.1.1 General (Monitoring, measurement, analysis and evaluation of Environment performance and the EnMS)	C	Performance monitored through Green monitoring report review.
9.1.2 Evaluation of compliance with legal requirements and other requirements	C	Affiliated to the University of Calcutta NAAC Accredited with 'A' Grade DBT Star College with Star Status
9.2 Internal audit (Frequency and Effectiveness)	C	On year to year wise they monitor their performance through Green Monitoring report. This and Internal Audit plan/records found available
9.3 Management review (Frequency and input/output)	C	MRM agenda and minutes found available. Overall Green monitoring report maintained on year to year wise.



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10 Improvement		
10.1 Nonconformity and corrective action	C	Procedure established and suggestion taking protocol also applicable.
10.2 Continual improvement	C	Objective and monitoring data found available.
11.0 Review of Logo Checked the use of logo of AQC & EGAC, found that the organization is using on publicity material, letter heads, business cards, the certificate is hanged in the office of top management	C	They have displayed their Certificate in Principal Room. There is no LOGO uses required from their side.
12.0 Overall Conclusions/ Recommendations: Recommendation: Surveillance to ISO 14001:2015 is recommended to continue Surveillance Frequency: It is recommended that surveillance frequency to be once in a eleven months	C	Overall conformance found satisfactory. Next Surveillance-2 Audit shall be scheduled within next eleven months.



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AUDIT ATTENDANCE SHEET

Date: 16/04/2024

Client Name: MAULANA AZAD COLLEGE

Lead Auditor: Amalesh Kumar Mandal

Standard: ISO 14001:2015

Audit type: Surveillance-1

Technical Expert: N/A

S.N.	NAME	Position	Department	Sign.	
				Opening Meeting	Closing Meeting
1	Amalesh Kumar Mandal	Lead Auditor	Certification Body		
2	Dr. Subhasis Dutta	Principal	MAULANA AZAD COLLEGE		
3	Dr. Sanjit Kumar Das	HOD, Physics	MAULANA AZAD COLLEGE		
4	Prof. Tapan Kumar Karpha	HOD, Chemistry	MAULANA AZAD COLLEGE		
5	Dr. Biswajit Maiti	Associate Prof. of Physics	MAULANA AZAD COLLEGE		
6	Dr. Shampa Datta Gupta	Coordinator, IQAC	MAULANA AZAD COLLEGE		
7	Dr. Dipak Kumar Som	HOD, Zoology	MAULANA AZAD COLLEGE		
8	Dr. Samudra Prasad Banik	HOD, Microbiology	MAULANA AZAD COLLEGE		