



# BSCIC CERTIFICATIONS PVT. LTD.

## ASSESSMENT REPORT OF REVA UNIVERSITY

Dated

18-05-2017

# BSCIC

## BSCIC Certifications Pvt. Ltd.

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## SURVEILLANCE ASSESSMENT REPORT – QMS

CPN : **BN15391** ARN: **RVUY/SA/05/17** Team Leader: **Anil Patil** Date: **18.05.2017**

### ASSESSMENT REPORT

Name of Company (Organization): REVA UNIVERSITY				
Accreditation: JAS-ANZ				
Address: Rukmini Knowledge Park, Kattigenahalli, Yelahanka, Bengaluru – 560 064.				
Contact Person: Dr. VENKATARAMU .P.S	Position: Director – IQAC			
Alternate Contact Person: Dr. Jegadeeswaran	Position: MR			
E-mail Id: <a href="mailto:info@reva.edu.in">info@reva.edu.in</a>	Website: <a href="http://www.reva.edu.in">www.reva.edu.in</a>			
Registration Scope: <b>Imparting of services related to Higher Education, research and Training to Under Graduates, Post Graduates and Doctoral Programs and also providing support Services.</b>				
Employees: 250	No. of Shifts: One			
Company's Key Documented Information Reference (if any): Quality Manual Issue no.01 Dt 13-09-2015				
Management Standard: ISO 9001:2015				
Assessment Type: Surveillance Assessment				
Assessment Commencement Date: 16.05.2017		Assessment Completion Date:18.05.2017		
Assessment Team:				
Name	Status	Client's Activity Code		
Mr. Anil Patil	Team Leader	M 80.30		
Manday(s) : 3				
Nonconformities raised during Assessment				
NCR Ref. No.	Nil			
Minor/Major	Nil			
Nonconformities / <b>Observations / Opportunities for Further Improvement</b> raised during last visit : Nil				
NCR Ref. No.	Nil			
Closed/Open	Nil			

#### Areas Assessed

Leadership, Resources Assigned By Top Management, The Responsibility & Authority, Planning Risk And Opportunities, Requirements Services, School of Civil Engineering, Electronics & Communications, Mechanical Engineering, Computer & Information Technology, School of BBA/MCA, Commerce & Management, HR and Post Graduate Engineering Performance Evaluation/Monitoring & Measuring Resources, HR Related Processes, Complaint Mgt., Internal Audit, Management Review, QMS Documented Information & Changes, previous NC/CAP/CAT/Others

#### Audit Conclusion & Appropriateness of the Certification Scope

The quality management system of the organization is developed & maintained in compliance to ISO 9001 : 2015 Standard . The QMS is effectively implemented in the organization.

**\*\*Disclaimer - Auditing & its conclusion is based on a sampling process of the available information\*\***

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## SURVEILLANCE ASSESSMENT REPORT – QMS

CPN : **BN15391** ARN: **RVUY/SA/05/17** Team Leader: **Anil Patil** Date: **18.05.2017**

### Non-applicability of requirements (with suitable justification)

Nil

## QMS ASSESSMENT COMMENTARY & ASSESSMENT OBJECTIVE EVIDENCE

### ASSESSMENT OF LEADERSHIP

Date: 16.05.2017

Auditee Name: Dr.P.S.Venkataramu

REQUIREMENTS	Assessor's Notes of Objective Evidences / Finding Reference
<p>Please use the Plan – Do – Check – Act approach and cover the process approach including the Inputs, activities, resources, outputs, verification and improvements</p> <p>5.1.1 General (QMS effectiveness, Quality objectives, Context [4.1] &amp; Strategic directions, Integration with business processes, Process approach and Risk based thinking, Intended results, Engagement of people, Improvement)</p> <p>5.1.2 Customer focus</p> <p>5.2.1 Establishing the quality policy</p> <p>5.2.2 Communicating the quality policy</p> <p>5.3 Organizational roles, responsibilities and authorities</p> <p>9.3.1 General</p> <p>9.3.2 Management review inputs</p> <p>9.3.3 Management review outputs</p> <p>Please add any other audit trail as planned</p> <p>Please use Blank B030 in case if need more space to note such Audit Evidences</p>	<p>Quality management system of the organization found effective and satisfactory verified through discussion/interview with the Director i.e. Mr. Dr.P.S.Venkataramu.</p> <ul style="list-style-type: none"><li>-Resources are adequately provided by the Top management</li><li>-Quality management system of the organization is continuously supported by the competent staff through active participation under direct supervision of the top management found satisfactory.</li><li>-Risk based thinking &amp; process approach is followed and directed by the top management to improve the QMS in the organization.</li></ul> <p>Dr. P.S. Venkataramu Director is involved in Management activity.</p> <ul style="list-style-type: none"><li>- The organization has determined external and internal issues for the organization relevant to its purpose, strategic planning which affect the organization's ability to achieve its objectives. The organization has considered issues related to arising from competitive market, cultural, social and economical, legal, environmental etc. whether international, national, regional or local.</li></ul> <ul style="list-style-type: none"><li>- External issues defined are: -</li></ul> <p><b>Environmental:</b></p> <ul style="list-style-type: none"><li>- Resource Efficiency / Waste Prevention</li><li>- Water &amp; Soil Quality</li></ul> <p><b>Economical:</b></p> <ul style="list-style-type: none"><li>- Functioning of the internal/external market &amp; competition</li></ul> <p>Market Failure – Vacant Seat, Less admission rate, Demand Ratio.</p> <p><b>Social:</b></p> <ul style="list-style-type: none"><li>- Employment and labor markets</li><li>- Standards &amp; Rights related to job quality</li></ul> <p>Management is committed towards continual improvement of QMS. This was evidenced in conduct of Internal Audits, MRMs, Improvement plans, NAAC plans</p> <p>Student Centric approach focus was strongly evidenced viz extra classes, curricular activities, Teacher-ward system, Mentoring of slow learners etc.</p> <p>Quality Policy is signed by top management, displayed, understood by staffs</p> <p>Responsibilities and authorities are defined in Quality Manual QM5.0 Issue 01.</p> <p>Organizational &amp; relevant functions at dept levels.</p> <p>Evidenced in planning of Internal Audits, Stage2 audit, plans for NAAC</p> <p>Organogram current, verified in QM</p> <p>Dr. Jegadeeswaran, a senior staff member is appointed as Management Representative.</p> <p>Circulars through Direct, internal memos and HOD meetings</p> <p>Last MRM conducted on 06-05-2017, evidences all inputs &amp; outputs.</p> <p>Organizational Roles, Responsibility and authorities of all the employees including top management defined in QM in Annexure "B" verified.</p> <ul style="list-style-type: none"><li>- Top management reviews the organization's quality management system at regular interval of six</li></ul>

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	<p>months to ensure adequacy, effectiveness, continuing suitability and alignment etc. as per RU/9.3/F3.</p> <p>Agenda of MRM includes:</p> <ol style="list-style-type: none"> <li>1. Previous MRM points</li> <li>2. Changes in internal &amp; external issues those are relevant to QMS.</li> <li>3. Student satisfaction &amp; feedback from interested parties.</li> <li>4. The extent to which quality objectives have been met.</li> <li>5. Process performance and conformity of products and services.</li> <li>6. Non conformities and corrective actions.</li> <li>7. Monitoring &amp; measurement results.</li> <li>8. Audit results (internal &amp; external).</li> <li>9. Performance of external providers.</li> <li>10. Resources provided.</li> <li>11. Effectiveness of actions taken to address risks and opportunities.</li> <li>12. Opportunities for improvement.</li> </ol> <p>And other points, Research activities have to be taken seriously and directors has been advised to prepare strategic plan.</p> <p>QMS process performance evaluation verified RU/9.1/F1.</p> <p>Verified documented information of MRM – RU/MRM/9.3/F3 dt.06.05.2017.</p> <p>Output shows the following points:</p> <ol style="list-style-type: none"> <li>1. Opportunities for improvement.</li> <li>2. Needs for changes to the QMS.</li> </ol>
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### ASSESSMENT OF A RESOURCE ASSIGNED BY TOP MANAGEMENT, THE RESPONSIBILITY AND AUTHORITY FOR 5.3 (a) to (e)

Date: **16.05.2017**

Auditee Name: **Dr.P.S.Venkataramu**

REQUIREMENTS	Assessor's Notes of Objective Evidences / Finding Reference
<p>Please use the Plan – Do – Check – Act approach and cover the process approach including the Inputs, activities, resources, outputs, verification and improvements</p> <p>4.1 Understanding the organization and its context</p> <p>6.1 Actions to address risks and opportunities</p> <p>6.2 Quality objectives and planning to achieve them</p> <p>7.1.1 General (Capabilities and Constraints on internal resources and needs of external provisions / outsourcing)</p> <p>7.1.6 Organizational knowledge</p> <p>7.2 Competence</p> <p>7.4 Communication</p> <p>7.5 Documented information</p> <p>7.5.1 General</p> <p>7.5.2 Creating and updating</p> <p>7.5.3 Control of documented information</p> <p>9.1.3 Analysis and evaluation (Check a system for entire organization if applicable at this responsibility)</p>	<p>The top management has assigned single point of contact as MR to Dr. Jagadeeshwaran who is well experienced and well qualified PhD holder to collect all the data from the all the schools and collectively assess the All the schools in order to arrive at the quality objectives and do the Risk assessment in all the Schools and take appropriate actions to address the identified risks.</p> <p>Documents are controlled and available at the point of use.</p> <p>Master list of documents ref. RU/MR/MLD-01 Issue 01 dt 13-09-2015.</p> <p>Records are complete and legible.</p> <p>Master list of records RU/MR/MLR Issue 01 dt 13-09-2015.</p> <p>Dr. Jagadeeshwaran, one of the senior Professors is appointed as M.R.</p> <p>Internal Audits are planned once in six months.</p> <p>Evidenced Audit plan QMS-F004.</p> <p>Audit schedule covers all areas and applicable ISO Clauses.</p> <p>Audit schedule from 14-04-2017 to 19-04-2017.</p> <p>Audit checklists are prepared by auditors and Audit findings are recorded in Audit Observation sheets.</p> <p>Data analysis of student satisfaction and feedback on Teachers, Library, Resources seen.</p> <p>Continual improvements plans are evidenced through Progressive plan for next Five Years.</p> <p>Evidenced throughout the campus, serene environment, well equipped labs, licensed software for</p>

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<p>9.2 Internal audit 10.1 General 10.2 Nonconformity and corrective action 10.3 Continual improvement</p> <p>Please add any other audit trail as planned Please use Blank B030 in case if need more space to note such Audit Evidences</p>	<p>computer related teaching</p> <p>Improvement plans evidenced in prep for NAAC, planning for Internal Audits. Internal Audit was conducted on 14-04-2017 to 19-04-2017.</p> <p>12 Minor NCRs were reported and closed with CAPs . PDCA evidenced in MRMs as above.</p>
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### ASSESSMENT OF PLANNING / RISKS AND OPPORTUNITIES

Date: **16.05.2017**

Auditee Name: **Dr.P.S.Venkataramu**

REQUIREMENTS	Assessor's Notes of Objective Evidences / Finding Reference
<p>Please use the Plan – Do – Check – Act approach and cover the process approach including the Inputs, activities, resources, outputs, verification and improvements</p> <p>6.1 Actions to address risks and opportunities 6.2 Quality objectives and planning to achieve them 6.3 Planning of changes</p> <p>Please add any other audit trail as planned Please use Blank B030 in case if need more space to note such Audit Evidences</p>	<p>Verified the Procedure for addressing risks and opportunities – RU/RISK/ 6.1/F1.</p> <p>Risk associated to University are :</p> <ul style="list-style-type: none"> <li>➤ Less Admission</li> <li>➤ Quality of intake</li> <li>➤ Curriculum design</li> <li>➤ Faculty retention</li> <li>➤ Results</li> <li>➤ Employability</li> </ul> <p><b>Risk mitigation plan:</b></p> <p>Improve the marketing strategy and include more and more emphasis of practices Conduct entrance test to improve quality of intake students More facility and encouragement for the faculty members for paper publications, Ph.D enrollments, Maternity leave, Appraisal. More student centric approach, more number of tests to be conducted Call for more number of companies for the placements.</p>

### ASSESSMENT OF REQUIREMENTS FOR PRODUCTS AND SERVICES (CUSTOMER RELATED PROCESSES)

Date : **16.05.2017**

Auditee Name: **Ms. Deepa**

REQUIREMENTS	Assessor's Notes of Objective Evidences / Finding Reference
<p>Please use the Plan – Do – Check – Act approach and cover the process approach including the Inputs, activities, resources, outputs, verification and improvements</p> <p>4.2 Understanding the needs and expectations of interested parties</p>	<p>Documents are controlled and applicable documents are available at the point of use. Records are controlled and completely filled and legible. Admission analysis of applications received to seat allotted. Ms. Deepa R.M. is Director – Admission with more than 8 years of experience. Admission plan vide publicity in Marketing, Branding, Media, Issue of Applications, Screening, Counseling, Educational portals and completion evidenced. Admission of following students verified. Pooja N Registration No- R16BC510 BCA</p>

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<p>6.1 Actions to address risks and opportunities 6.2 Quality objectives and planning to achieve them 7.1.6 Organizational knowledge 7.2 Competence 7.5.3 Control of documented information 8.2.1 Customer communication 8.2.2 Determining the requirements related to products and services 8.2.3 Review of requirements related to products and services 8.2.4 Changes to requirements for products and services 8.5.3 Property belonging to customers 8.5.5 Post-delivery activities 9.1.2 Customer satisfaction and Complaints Management 9.1.3 (b) Analysis and evaluation related to Degree of customer satisfaction 10.2 Nonconformity and corrective action</p> <p>Please add any other audit trail as planned Please use Blank B030 in case if need more space to note such Audit Evidences</p>	<p>Gurushanth Registration No- R16ME088 Mechanical Sofia Registration No – R16CS520 Computer Science</p> <p>Students are communicated through S.M.S and notice boards, Parents are communicated through Letters and Parents meets are held regularly. Students feedbacks are collected for the following areas. Teacher 's performance Library Resources. Feedbacks of following teachers were verified. Dr.K.S.Narayana Swamy - Director/School of Mechanical Engineering – Very Good Professor Chindu Mohan- Director/School of Civil Engineering – Good Prof. C.K.Lokesh- School of Computer Science &amp; Applications – Very Good Mrs. Saraswathi- Chief Librarian- Excellent Students complaints are received in the form of Grievances and there is Grievance Redressal Cell which maintains the corrective action records. Last Grievance Redressal meeting was held in the month of March 2017.</p>
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### ASSESSMENT OF DESIGN & DEVELOPMENT OF PRODUCTS AND SERVICES

DATE: 17.05.2017

AUDITEE NAME: Dr. Ramesh

REQUIREMENT	Assessor's Notes of Objective Evidences / Finding Reference
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<p>Please use the Plan – Do – Check – Act approach and cover the process approach including the Inputs, activities, resources, outputs, verification and improvements</p> <p>4.2 Understanding the needs and expectations of interested parties</p> <p>6.1 Actions to address risks and opportunities</p> <p>6.2 Quality objectives and planning to achieve them</p> <p>7.1.6 Organizational knowledge</p> <p>7.2 Competence</p> <p>7.5.3 Control of documented information</p> <p>8.3.1 General</p> <p>8.3.2 Design and development planning</p> <p>8.3.3 Design and development inputs</p> <p>8.3.4 Design and development controls</p> <p>8.3.5 Design and development outputs</p> <p>8.3.6 Design and development changes</p> <p>10.2 Nonconformity and corrective action</p> <p>Please add any other audit trail as planned</p> <p>Please use Blank B030 in case if need more space to note such Audit Evidences</p>	<p>As the University frames its own curriculum, it has well established team to design its curriculum keeping in view of the present needs and expectations in the present market and student’s interest. It has committee called BOS (Board of Studies) which includes experts from different Universities, Industry personnel, subject expert and student committee to frame the syllabi.</p> <p>And Also, It has got BOE ( Board of Examination) to conduct exams in an Impartial Transparent method</p>
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### ASSESSMENT OF CONTROL OF EXTERNALLY PROVIDED PROCESSES, PRODUCTS AND SERVICES (SUPPLIER, STORAGE & DELIVERY RELATED)

**Date: 17.05.2017**

**Auditee Name: Mrs. Saraswathi**

REQUIREMENTS	Assessor’s Notes of Objective Evidences / Finding Reference
<p>Please use the Plan – Do – Check – Act approach and cover the process approach including the Inputs, activities, resources, outputs, verification and improvements</p> <p>4.2 Understanding the needs and expectations of interested parties</p> <p>6.1 Actions to address risks and opportunities</p> <p>6.2 Quality objectives and planning to achieve them</p> <p>7.1.3 Infrastructure</p> <p>7.1.6 Organizational knowledge</p> <p>7.2 Competence</p> <p>7.5.3 Control of documented information</p> <p>8.4.1 General</p> <p>8.4.2 Type and extent of control</p> <p>8.4.3 Information for external providers</p> <p>8.5.2 Identification and traceability</p> <p>8.5.3 Property belonging to customers or external providers</p> <p>8.5.4 Preservation</p> <p>8.7 Control of nonconforming outputs</p> <p>9.1.3 (f) Analysis and evaluation related to Performance of external providers</p>	<p>Documents are controlled and made available at the point of use.</p> <p>Records are legible, Completely filled and properly filed.</p> <p>Mrs. Saraswathi having more than 8 years of administrative experience is handling the purchase.</p> <p>Infrastructure in the form of computer, printers and office space evidenced.</p> <p>Purchase of Books, Journals for library is from authorized publishers.</p> <p>Good work environment evidenced in the purchase.</p> <p>Supplier evaluations are done and records maintained.</p> <p>Supplier Evaluation records of following were verified.</p> <p>Sapna Book House – Text Books</p> <p>Book Paradise – Text Books</p>

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10.2 Nonconformity and corrective action  Please add any other audit trail as planned Please use Blank B030 in case if need more space to note such Audit Evidences	
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### ASSESSMENT OF PRODUCTION AND SERVICE PROVISION. TEACHING, LEARNING AND EVALUATION OF BASIC SCIENCE DEPARTMENT

Date : **17.05.2017**

Auditee Name: **Mrs. Bharathi Devi and Dr. Hanuma Gowda**

REQUIREMENTS	Assessor's Notes of Objective Evidences / Finding Reference
10.2 Nonconformity and corrective action  Please add any other audit trail as planned Please use Blank B030 in case if need more space to note such Audit Evidences	Documents are controlled and relevant documents are made available at the point of use. Records are legible and retrievable completely filled. Quality policy along with Vision & Mission evidenced. Staff are well aware of the Quality Policy. Infrastructure with adequate department library Books, Journals and class rooms evidenced. Good Ambience observed in the lecture halls. Latest copy of Reva University is evidenced (RU/CSE/03). University Syllabus, Master Timetable, Teacher and Subject Time table seen. Lesson Plans (RU/CSE/05) are prepared and used. Competence of teaching faculty is good. Evidence: Prof. S.K.Usha – BE, M.Sc-15 years of experience. Total No of Faculties- 15 Nos Syllabus for 2016-17 maintained. Attendance register is maintained. Lesson Plans are evidenced. They have online feedback system for all the faculty members. Feedback is taken from all the students twice in a semester and proper corrective actions are taken to address any issues. Faculty Course file, personnel file, Publication details with Impact factor evidenced. Mentor-Mentee system is established which is very effective in achieving the target results. Result analysis evidenced, Consolidated result is 76%.
6.2 Quality objectives related to functions	
7.1.2 People	
7.1.3 Infrastructure	
7.1.4 Environment for the operation of processes	
7.1.5 Monitoring and measuring resources (Random Verification)	
7.1.6 Organizational knowledge	
7.3 Awareness	
7.5.3 Control of documented information	
8.1 Operational planning and control	
8.5.1 Control of production and service provision	
8.5.2 Identification and traceability	
8.5.3 Property belonging to customers or external providers	
8.5.4 Preservation	
8.5.5 Post-delivery activities	
8.5.6 Control of changes	
8.7 Control of nonconforming outputs	

### ASSESSMENT OF PRODUCTION AND SERVICE PROVISION. TEACHING, LEARNING AND EVALUATION OF SCHOOL OF MECHANICAL ENGINEERING DEPARTMENT



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CPN : **BN15391** ARN: **RVUY/SA/05/17** Team Leader: **Anil Patil** Date: **18.05.2017**

Date : **17.05.2017**

**Auditee Name: Dr. Narayana Swamy**

REQUIREMENTS	Assessor's Notes of Objective Evidences / Finding Reference
<p>Please use the Plan – Do – Check – Act approach and cover the process approach including the Inputs, activities, resources, outputs, verification and improvements</p> <p>6.2 Quality objectives related to functions</p> <p>7.1.2 People</p> <p>7.1.3 Infrastructure</p> <p>7.1.4 Environment for the operation of processes</p> <p>7.1.5 Monitoring and measuring resources (Random Verification)</p> <p>7.1.6 Organizational knowledge</p> <p>7.3 Awareness</p> <p>7.5.3 Control of documented information</p> <p>8.1 Operational planning and control</p> <p>8.5.1 Control of production and service provision</p> <p>8.5.2 Identification and traceability</p> <p>8.5.3 Property belonging to customers or external providers</p> <p>8.5.4 Preservation</p> <p>8.5.5 Post-delivery activities</p> <p>8.5.6 Control of changes</p> <p>8.7 Control of nonconforming outputs</p> <p>10.2 Nonconformity and corrective action</p> <p>Please add any other audit trail as planned</p> <p>Please use Blank B030 in case if need more space to note such Audit Evidences</p>	<p>Documents are controlled and relevant documents are made available at the point of use.</p> <p>Records are legible and retrievable completely filled.</p> <p>Quality policy along with Vision &amp; Mission evidenced. Staff are well aware of the Quality Policy.</p> <p>Infrastructure with adequate department library Books, Journals and class rooms evidenced.</p> <p>Good Ambience observed in the lecture halls.</p> <p>Latest copy of Reva University is evidenced (RU/CSE/03). University Syllabus, Master Timetable, Teacher and Subject Time table seen.</p> <p>Lesson Plans (RU/ME/05) are prepared and used.</p> <p>Competence of teaching faculty is good.</p> <p>Evidence: Dr. Sharanappa – BE, ME, Ph.D-15 years of experience.</p> <p>Total No of Faculties- 51</p> <p>Syllabus for 2016-17 maintained.</p> <p>Attendance register is maintained.</p> <p>Lesson Plans are evidenced.</p> <p>They have online feedback system for all the faculty members. Feedback is taken from all the students twice in a semester and proper corrective actions are taken to address any issues.</p> <p>Faculty Course file, personnel file, Publication details with Impact factor evidenced. Mentor-Mentee system is established which is very effective in achieving the target results. Result analysis evidenced, Consolidated result is 81%.</p> <p>Results of IV Semester of some of the students are given below</p> <p>Gurushanth – R15ME088 – 97%</p> <p>V.Madhavan – R14ME205 – 60%</p> <p>Abhishek.K – R15ME005 – 81%</p>

## ASSESSMENT OF PRODUCTION AND SERVICE PROVISION. TEACHING, LEARNING AND EVALUATION OF POST GRADUATION OF CIVIL ENGINEERING DEPARTMENT

Date : **17.05.2017**

**Auditee Name: Dr. Y. Ramalinga Reddy, Director**

REQUIREMENTS	Assessor's Notes of Objective Evidences / Finding Reference
<p>Please use the Plan – Do – Check – Act approach and cover the process approach including the Inputs, activities, resources, outputs, verification and improvements</p> <p>6.2 Quality objectives related to functions</p> <p>7.1.2 People</p> <p>7.1.3 Infrastructure</p> <p>7.1.4 Environment for the operation of processes</p> <p>7.1.5 Monitoring and measuring resources (Random Verification)</p> <p>7.1.6 Organizational knowledge</p>	<p>Documents are controlled and relevant documents are made available at the point of use.</p> <p>Records are legible and retrievable completely filled.</p> <p>Quality policy along with Vision &amp; Mission evidenced. Staff are well aware of the Quality Policy.</p> <p>Infrastructure with adequate department library Books, Journals and class rooms evidenced.</p> <p>Good Ambience observed in the lecture halls.</p> <p>Latest copy of Reva University is evidenced (RU/CSE/03). University Syllabus, Master Timetable, Teacher and Subject Time table seen.</p> <p>Lesson Plans (RU/MCE/05) are prepared and used.</p> <p>Competence of teaching faculty is good.</p>

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<p>7.3 Awareness</p> <p>7.5.3 Control of documented information</p> <p>8.1 Operational planning and control</p> <p>8.5.1 Control of production and service provision</p> <p>8.5.2 Identification and traceability</p> <p>8.5.3 Property belonging to customers or external providers</p> <p>8.5.4 Preservation</p> <p>8.5.5 Post-delivery activities</p> <p>8.5.6 Control of changes</p> <p>8.7 Control of nonconforming outputs</p> <p>10.2 Nonconformity and corrective action</p> <p>Please add any other audit trail as planned</p> <p>Please use Blank B030 in case if need more space to note such Audit Evidences</p>	<p>Evidence: Dr. Sharanappa – BE, ME, Ph.D-15 years of experience.</p> <p>Total No of Faculties- 42</p> <p>Syllabus for 2016-17 maintained.</p> <p>Attendance register is maintained.</p> <p>Lesson Plans are evidenced.</p> <p>They have online feedback system for all the faculty members. Feedback is taken from all the students twice in a semester and proper corrective actions are taken to address any issues.</p> <p>Faculty Course file, personnel file, Publication details with Impact factor evidenced. Mentor-Mentee system is established which is very effective in achieving the target results. Result analysis evidenced, Consolidated result is 100%.</p> <p>Results of IV Semester of some of the students are given below</p> <p>Madhuri – R15MCE088 – 93%</p> <p>Tharun.G – R15MCE205 – 73%</p> <p>Balaji K.N – R15MCE005 – 82%</p>
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### ASSESSMENT OF PRODUCTION AND SERVICE PROVISION. TEACHING, LEARNING AND EVALUATION OF SCHOOL OF COMMERCE DEPARTMENT

Date : **17.05.2017**

Auditee Name: **A.Shubha, Director**

REQUIREMENTS	Assessor's Notes of Objective Evidences / Finding Reference
<p>Please use the Plan – Do – Check – Act approach and cover the process approach including the Inputs, activities, resources, outputs, verification and improvements</p> <p>6.2 Quality objectives related to functions</p> <p>7.1.2 People</p> <p>7.1.3 Infrastructure</p> <p>7.1.4 Environment for the operation of processes</p> <p>7.1.5 Monitoring and measuring resources (Random Verification)</p> <p>7.1.6 Organizational knowledge</p> <p>7.3 Awareness</p> <p>7.5.3 Control of documented information</p> <p>8.1 Operational planning and control</p> <p>8.5.1 Control of production and service provision</p> <p>8.5.2 Identification and traceability</p> <p>8.5.3 Property belonging to customers or external providers</p> <p>8.5.4 Preservation</p> <p>8.5.5 Post-delivery activities</p> <p>8.5.6 Control of changes</p> <p>8.7 Control of nonconforming outputs</p> <p>10.2 Nonconformity and corrective action</p> <p>Please add any other audit trail as planned</p>	<p>Documents are controlled and relevant documents are made available at the point of use.</p> <p>Records are legible and retrievable completely filled.</p> <p>Quality policy along with Vision &amp; Mission evidenced. Staff are well aware of the Quality Policy.</p> <p>Infrastructure with adequate department library Books, Journals and class rooms evidenced.</p> <p>Good Ambience observed in the lecture halls.</p> <p>Latest copy of Reva University is evidenced (RU/CSE/03). University Syllabus, Master Timetable, Teacher and Subject Time table seen.</p> <p>Lesson Plans (RU/BC/05) are prepared and used.</p> <p>Competence of teaching faculty is good.</p> <p>Evidence: Dr. M. Subramanyam – BE, ME, Ph.D-9 years of experience.</p> <p>Total No of Faculties- 17 Nos</p> <p>Syllabus for 2016-17 maintained.</p> <p>Attendance register is maintained.</p> <p>Lesson Plans are evidenced.</p> <p>They have online feedback system for all the faculty members. Feedback is taken from all the students twice in a semester and proper corrective actions are taken to address any issues.</p> <p>Faculty Course file, personnel file, Publication details with Impact factor evidenced. Mentor-Mentee system is established which is very effective in achieving the target results. Result analysis evidenced, Consolidated result is 70%.</p> <p>Results of IV Semester of some of the students are given below</p> <p>Keerthi Gowda– R16BC510 – 69%</p> <p>Pooja N – R16BC510 – 81%</p>

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## SURVEILLANCE ASSESSMENT REPORT – QMS

CPN : **BN15391** ARN: **RVUY/SA/05/17** Team Leader: **Anil Patil** Date: **18.05.2017**

Please use Blank B030 in case if need more space to note such Audit Evidences	
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### ASSESSMENT OF PRODUCTION AND SERVICE PROVISION. TEACHING, LEARNING AND EVALUATION OF COMPUTER SCIENCE & APPLICATIONS DEPARTMENT

Date : **18.05.2017**

Auditee Name: **Dr. S.Senthil, Director**

REQUIREMENTS	Assessor's Notes of Objective Evidences / Finding Reference
<p>Please use the Plan – Do – Check – Act approach and cover the process approach including the Inputs, activities, resources, outputs, verification and improvements</p> <p>6.2 Quality objectives related to functions</p> <p>7.1.2 People</p> <p>7.1.3 Infrastructure</p> <p>7.1.4 Environment for the operation of processes</p> <p>7.1.5 Monitoring and measuring resources (Random Verification)</p> <p>7.1.6 Organizational knowledge</p> <p>7.3 Awareness</p> <p>7.5.3 Control of documented information</p> <p>8.1 Operational planning and control</p> <p>8.5.1 Control of production and service provision</p> <p>8.5.2 Identification and traceability</p> <p>8.5.3 Property belonging to customers or external providers</p> <p>8.5.4 Preservation</p> <p>8.5.5 Post-delivery activities</p> <p>8.5.6 Control of changes</p> <p>8.7 Control of nonconforming outputs</p> <p>10.2 Nonconformity and corrective action</p> <p>Please add any other audit trail as planned</p> <p>Please use Blank B030 in case if need more space to note such Audit Evidences</p>	<p>Documents are controlled and relevant documents are made available at the point of use.</p> <p>Records are legible and retrievable completely filled.</p> <p>Quality policy along with Vision &amp; Mission evidenced. Staff are well aware of the Quality Policy.</p> <p>Infrastructure with adequate department library Books, Journals and class rooms evidenced.</p> <p>Good Ambience observed in the lecture halls.</p> <p>Latest copy of Reva University is evidenced (RU/CSE/03). University Syllabus, Master Timetable, Teacher and Subject Time table seen.</p> <p>Lesson Plans (RU/CSE/05) are prepared and used.</p> <p>Competence of teaching faculty is good.</p> <p>Evidence: Dr. M.Vinayaka Murthy – M.Sc, Ph.D-24 years of experience.</p> <p>Total No of Faculties- 12</p> <p>Syllabus for 2016-17 maintained.</p> <p>Attendance register is maintained.</p> <p>Lesson Plans are evidenced.</p> <p>They have online feedback system for all the faculty members. Feedback is taken from all the students twice in a semester and proper corrective actions are taken to address any issues.</p> <p>Faculty Course file, personnel file, Publication details with Impact factor evidenced. Mentor-Mentee system is established which is very effective in achieving the target results. Result analysis evidenced, Consolidated result is 76%.</p> <p>Results of IV Semester of some of the students are given below</p> <p>Rinki Kumari– R16CA139 – 90%</p> <p>G.Shivani– R16CA133– 58%</p> <p>Jayaraj– R16CA1384– 75%</p>

### ASSESSMENT OF PRODUCTION AND SERVICE PROVISION. TEACHING, LEARNING AND EVALUATION OF EEE Department

Date : **18.05.2017**

Auditee Name: **Dr. Rajashekar P Mandi- Director – school of EEE**

REQUIREMENTS	Assessor's Notes of Objective Evidences / Finding Reference
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## SURVEILLANCE ASSESSMENT REPORT – QMS

CPN : **BN15391** ARN: **RVUY/SA/05/17** Team Leader: **Anil Patil** Date: **18.05.2017**

<p>Please use the Plan – Do – Check – Act approach and cover the process approach including the Inputs, activities, resources, outputs, verification and improvements</p> <p>6.2 Quality objectives related to functions</p> <p>7.1.2 People</p> <p>7.1.3 Infrastructure</p> <p>7.1.4 Environment for the operation of processes</p> <p>7.1.5 Monitoring and measuring resources (Random Verification)</p> <p>7.1.6 Organizational knowledge</p> <p>7.3 Awareness</p> <p>7.5.3 Control of documented information</p> <p>8.1 Operational planning and control</p> <p>8.5.1 Control of production and service provision</p> <p>8.5.2 Identification and traceability</p> <p>8.5.3 Property belonging to customers or external providers</p> <p>8.5.4 Preservation</p> <p>8.5.5 Post-delivery activities</p> <p>8.5.6 Control of changes</p> <p>8.7 Control of nonconforming outputs</p> <p>10.2 Nonconformity and corrective action</p> <p>Please add any other audit trail as planned</p> <p>Please use Blank B030 in case if need more space to note such Audit Evidences</p>	<p>Documents are controlled and relevant documents are made available at the point of use.</p> <p>Records are legible and retrievable completely filled.</p> <p>Quality policy along with Vision &amp; Mission evidenced. Staff are well aware of the Quality Policy.</p> <p>Infrastructure with adequate department library Books, Journals and class rooms evidenced.</p> <p>Good Ambience observed in the lecture halls.</p> <p>Latest copy of Reva University is evidenced (RU/CSE/03). University Syllabus, Master Timetable, Teacher and Subject Time table seen.</p> <p>Lesson Plans (RU/CSE/05) are prepared and used.( EM-1 dt.6-Feb-2017)</p> <p>Competence of teaching faculty is good.</p> <p>Student Strength is 228+239+22.</p> <p>Faculty Strength 28 nos</p> <p>Mr. Mahesh Associate Prof. , Mr. N Himabindu – Associate prof.</p> <p>Non-teaching staff is about 8 nos.</p> <p>Class room – 17 &amp; Laboratories – 6 nos.</p> <p>Syllabus for 2016-17 maintained.</p> <p>Attendance register is maintained.. Staff attendance register is also maintained</p> <p>University syllabus is also maintained. Profile of Faculty members maintained</p> <p>Lesson Plans are evidenced. Time table for the 2<sup>nd</sup> &amp; 4<sup>th</sup> Semester available</p> <p>Handbook for B Tech 1<sup>st</sup> Year available</p> <p>They have online feedback system for all the faculty members. Feedback is taken from all the students twice in a semester and proper corrective actions are taken to address any issues.</p> <p>Internal assessment ( Orange book maintained)</p> <p>Mr. Harish ( 12+5=17) &amp; Mr. Gautham ( 4+4=8)</p> <p>Attendance &lt;74% - 6 students</p> <p>Storage of 1<sup>st</sup> &amp; 2<sup>nd</sup> Sem orange books reviewed</p> <p>Faculty Course file, personnel file, Publication details with Impact factor evidenced. Mentor-Mentee system is established which is very effective in achieving the target results. Result analysis evidenced, Consolidated result.</p> <p>Result analysis 1<sup>st</sup> Sem 70.56% ; 2<sup>nd</sup> Sem – 68.2 %</p> <p>Course file checklist available ( EM-1, Sem-4, Sec-B) -2016-17</p> <p>Students feedback 3.5 &amp; above</p> <p>Meeting minutes weekly available ( 4-May-17, 5-Mar-17, 28-Mar-17)</p> <p>Director Meeting – 20-May-17 planned but done on 8-May-17 .</p> <p>Two FDP per faculty</p> <p>Improvements done in the department – Regular weekly meeting, Proper documentation, Special classes for specific children, Conferences, etc</p>
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## SURVEILLANCE ASSESSMENT REPORT – QMS

CPN : **BN15391** ARN: **RVUY/SA/05/17** Team Leader: **Anil Patil** Date: **18.05.2017**

### ASSESSMENT OF PRODUCTION AND SERVICE PROVISION. TEACHING, LEARNING AND EVALUATION OF ECE Department Date : 18.05.2017

Auditee Name: **Dr. Rajashekar Biradar – Professor – school of ECE**

REQUIREMENTS	Assessor's Notes of Objective Evidences / Finding Reference
Please use the Plan – Do – Check – Act approach and cover the process approach including the Inputs, activities, resources, outputs, verification and improvements	Documents are controlled and relevant documents are made available at the point of use. Records are legible and retrievable completely filled. Quality policy along with Vision & Mission evidenced. Staff are well aware of the Quality Policy.
6.2 Quality objectives related to functions	Infrastructure with adequate department library Books, Journals and class rooms evidenced.
7.1.2 People	Good Ambience observed in the lecture halls.
7.1.3 Infrastructure	Latest copy of Reva University is evidenced (RU/CSE/03). University Syllabus, Master Timetable, Teacher and Subject Time table seen.
7.1.4 Environment for the operation of processes	Lesson Plans (RU/CSE/05) are prepared and used.( EM-1 dt.6-Feb-2017)
7.1.5 Monitoring and measuring resources (Random Verification)	Competence of teaching faculty is good.
7.1.6 Organizational knowledge	Student Strength is 330+470+250 = 1050
7.3 Awareness	Faculty Strength 60 nos. Student faculty 17:1, Non teaching Staff - 21
7.5.3 Control of documented information	Class room – 28 & Laboratories – 12 nos.
8.1 Operational planning and control	Syllabus for 2016-17 maintained.
8.5.1 Control of production and service provision	Faculties mentoring 1:4
8.5.2 Identification and traceability	20 students each mentor; Faculties mentoring 1:4;
8.5.3 Property belonging to customers or external providers	Mentor handbook available & is used by all mentors
8.5.4 Preservation	Attendance register is maintained.. Staff attendance register is also maintained
8.5.5 Post-delivery activities	BOS Approval dt.6-May-2017
8.5.6 Control of changes	University syllabus is also maintained. Profile of Faculty members maintained
8.7 Control of nonconforming outputs	Lesson Plans are evidenced. Time table for the 2 <sup>nd</sup> & 4 <sup>th</sup> Semester available
10.2 Nonconformity and corrective action	They have online feedback system for all the faculty members. Feedback is taken from all the students twice in a semester and proper corrective actions are taken to address any issues.
Please add any other audit trail as planned	Internal assessment ( Orange book maintained)
Please use Blank B030 in case if need more space to note such Audit Evidences	LIC – 4 <sup>th</sup> Sem – Mr. Mohammed Riyaz 4 hrs per week 6 <sup>th</sup> Sem Weekly 4 classes. Lesson Plan 13-Feb-17. Course plan with allocated hours available. Unit # 12 hrs. Attendance Register Result Analysis – 3 <sup>rd</sup> Sem – 67% ( 254/465) ; 5 <sup>th</sup> Sem – 94% SWOT Analysis done . Statistical analysis done. QC meeting 1 <sup>st</sup> Feb & 24 <sup>th</sup> Feb done . All Participated. Remedial classes done. Storage of 1 <sup>st</sup> & 2 <sup>nd</sup> Sem orange books reviewed Faculty Course file, personnel file, Publication details with Impact factor evidenced. Mentor-Mentee system is established which is very effective in achieving the target results. Result analysis evidenced, Consolidated result. SZample verified – Shivaraj 6 <sup>th</sup> ASem & Roopesh – Recommendations listed action plan is in progress. Improvements Puzzles for terminologies, Schemes for tests allocation of marks .

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## SURVEILLANCE ASSESSMENT REPORT – QMS

CPN : **BN15391** ARN: **RVUY/SA/05/17** Team Leader: **Anil Patil** Date: **18.05.2017**

**ASSESSMENT OF PRODUCTION AND SERVICE PROVISION. TEACHING, LEARNING AND EVALUATION OF C & IT Department**  
**Date : 18.05.2017** **Auditee Name: Dr. S.S. Mani – Director – School of C&IT, Ashwin Kumar – Associate Prof**

REQUIREMENTS	Assessor's Notes of Objective Evidences / Finding Reference
Please use the Plan – Do – Check – Act approach and cover the process approach including the Inputs, activities, resources, outputs, verification and improvements	Documents are controlled and relevant documents are made available at the point of use. Records are legible and retrievable completely filled. Quality policy along with Vision & Mission evidenced. Staff are well aware of the Quality Policy.
6.2 Quality objectives related to functions	Infrastructure with adequate department library Books, Journals and class rooms evidenced.
7.1.2 People	Good Ambience observed in the lecture halls.
7.1.3 Infrastructure	Latest copy of Reva University is evidenced (RU/CSE/03). University Syllabus, Master Timetable, Teacher and Subject Time table seen.
7.1.4 Environment for the operation of processes	Lesson Plans (RU/CSE/05) are prepared and used.( EM-1 dt.6-Feb-2017)
7.1.5 Monitoring and measuring resources (Random Verification)	Competence of teaching faculty is good.
7.1.6 Organizational knowledge	Undergraduate , PG & PhD Courses offered
7.3 Awareness	Student Strength is 248+524=772
7.5.3 Control of documented information	Faculty Strength 88 nos. Student faculty 17:1, Non teaching Staff - 20
8.1 Operational planning and control	Class room – 17 & Laboratories – 14 nos.
8.5.1 Control of production and service provision	Syllabus for 2016-17 maintained.
8.5.2 Identification and traceability	Result Analysis available 2015 62/64.8 & 2017 – 84/69/61.6%
8.5.3 Property belonging to customers or external providers	Attendance register is maintained.. Staff attendance register is also maintained
8.5.4 Preservation	BOS Approval available
8.5.5 Post-delivery activities	Review frequency in the department after C1 – 2weeks C2 – 2 weeks – Result Analysis
8.5.6 Control of changes	Workshop – 5-may-17 & 6-May-17 – Python for data base
8.7 Control of nonconforming outputs	Conference on Advance in Computing and IT – 6 <sup>th</sup> May 2017 & 7 <sup>th</sup> May 2017.
10.2 Nonconformity and corrective action	W?s – 10T and cloud using around and AZURE – 22 <sup>nd</sup> & 23 <sup>rd</sup> April 2017.
Please add any other audit trail as planned	2014-16 - Publishing in international journals – 11
Please use Blank B030 in case if need more space to note such Audit Evidences	Int. Conf 70 done E-77% & Least 86% 85%. Action plan made Mentor list V/s Student review done. Mentoring book available Sample student data reviewed – Parthiban- 64% attendance , Prajeela – 85% . Monthly /adaption – Parent meeting done on 17 <sup>th</sup> April 2017. Staff area wise specialization listed. Regd 36 nos. Nos Requd -35 nos. Area of research – Primary/Secondary / Future areas. Orange book samples reviewed – Maheshkumar -20/40; S. Bharathi – 20/40. University syllabus is also maintained. Profile of Faculty members maintained Lesson Plans are evidenced. Time table for the Semester available They have online feedback system for all the faculty members. Feedback is taken from all the students . Internal assessment ( Orange book maintained) Faculty Course file, personnel file, Publication details with Impact factor evidenced. Mentor-Mentee system is established which is very effective in achieving the target results. Result analysis evidenced, Consolidated result. Depart meeting samples reviewed for 1-Apr-2017, 4-Mar-17, 15-may-17. Improvement done in documentation, Result Analysis, Department meeting regularized.

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## SURVEILLANCE ASSESSMENT REPORT – QMS

CPN : **BN15391** ARN: **RVUY/SA/05/17** Team Leader: **Anil Patil** Date: **18.05.2017**

### ASSESSMENT OF PRODUCTION AND SERVICE PROVISION. TEACHING, LEARNING AND EVALUATION OF IT Department Date : 18.05.2017

**Auditee Name: Mr. Dhanajaya Murthy – System Administrator**

REQUIREMENTS	Assessor's Notes of Objective Evidences / Finding Reference
<p>Please use the Plan – Do – Check – Act approach and cover the process approach including the Inputs, activities, resources, outputs, verification and improvements</p> <p>6.2 Quality objectives related to functions</p> <p>7.1.2 People</p> <p>7.1.3 Infrastructure</p> <p>7.1.4 Environment for the operation of processes</p> <p>7.1.5 Monitoring and measuring resources (Random Verification)</p> <p>7.1.6 Organizational knowledge</p> <p>7.3 Awareness</p> <p>7.5.3 Control of documented information</p> <p>8.1 Operational planning and control</p> <p>8.5.2 Identification and traceability</p> <p>8.5.4 Preservation</p> <p>8.5.6 Control of changes</p> <p>8.7 Control of nonconforming outputs</p> <p>10.2 Nonconformity and corrective action</p> <p>Please add any other audit trail as planned</p> <p>Please use Blank B030 in case if need more space to note such Audit Evidences</p>	<p>Documents are controlled and relevant documents are made available at the point of use.</p> <p>Records are legible and retrievable completely filled.</p> <p>Quality policy along with Vision &amp; Mission evidenced. Staff are well aware of the Quality Policy.</p> <p>Infrastructure with adequate department evidenced.</p> <p>Organization chart indicates the availability &amp; roles.</p> <p>Staff strengths – seven persons. ( one asst. 2 desktop experts, two servers, one IT Manager )</p> <p>Inventory list is maintained for entire campus. Total 2313 nos. Desktop – 1643, Laptop – 13nos, Printer – 93 nos, Projector – 39 nos, Server – 21nos, Switches – 29 Nos, Thin client - 470 nos, Photocopying – 5 nos, No segregation of RU &amp; VTU.</p> <p>Ticketing System for requests followed. Total 1239 tickets , open 5 nos, Overdue -1 .</p> <p>All departments tracked</p> <p>Status of Open issues maintained . Assigned to is also to be entered.</p> <p>Risk analysis done SWOT/SWOC . Training plan for the faculties to be structured</p> <p>Competency profile for each administrative</p> <p>Server utilization – 11 servers</p> <p>Backup – Daily taken at 7 pm</p> <p>ESX1 320 GB – used 66.2 GB only.</p> <p>Total usage is 10TB out of which 2 TB is free ( cluster)</p> <p>Fire wall – SophoX3 – CR2500IN6-HP. Updation done on 17 May 2017</p> <p>Sample tickets reviewed- 292112 closed yesterday from Accounts</p> <p>Anti virus – K7 Enterprise Security . Total 1900 licenses Valid till 6<sup>th</sup> July 2021. Out of which 666 used</p> <p>Analysis reports are available. Charts are prepared &amp; displayed</p> <p>Software license list – Inventory list</p> <p>Data Centre visited &amp; House keeping satisfactory. To avoid storage in data center</p> <p>Adobe 50 licenses – Microsoft college campus . Internal audit conducted</p> <p>Material movement register can be structured to track the incoming &amp; out going materials</p> <p>Recommendations listed action plan is in progress.</p>

### ASSESSMENT OF PERFORMANCE EVALUATION / MONITORING AND MEASURING RESOURCES

Date: 18.05.2017

**Auditee Name: Dr. Ramachandra**

REQUIREMENTS	Assessor's Notes of Objective Evidences / Finding Reference
<p>Please use the Plan – Do – Check – Act approach and cover the process approach including the Inputs, activities, resources, outputs, verification and improvements</p> <p>6.1 Actions to address risks and opportunities</p> <p>6.2 Quality objectives and planning to achieve them</p> <p>7.1.3 Infrastructure</p> <p>7.1.4 Environment for the operation of processes</p> <p>7.1.5.1 General (Check complete system)</p> <p>7.1.5.2 Measurement traceability</p> <p>7.1.6 Organizational knowledge</p>	<p>Documented information controlled and available at place of use.</p> <p>Quality policy is well communicated and understood within the University and displayed at all prominent places</p> <p>All the faculty members are competent on the basis of training and experience</p> <p>Mr. Jagadeeshwaran is Ph. D holder with a teaching experience of 11yrs.</p> <p>Applicable and required infrastructure is provided.</p> <p>Suitable work environment is available.</p> <p>Company follows "Quality" is not an act but it is a habit. Quality</p> <p>Assurance is in hands of most expert &amp; experienced people in which top management is</p>

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## SURVEILLANCE ASSESSMENT REPORT – QMS

CPN : **BN15391** ARN: **RVUY/SA/05/17** Team Leader: **Anil Patil** Date: **18.05.2017**

<p>7.2 Competence 7.5.3 Control of documented information 8.5.2 Identification and traceability 8.5.5 Post-delivery activities 8.5.6 Control of changes 8.6 Release of products and services 8.7 Control of nonconforming outputs 9.1.1 General 9.1.3 (a) Analysis and evaluation related to conformity of products and services 10.2 Nonconformity and corrective action</p> <p>Please add any other audit trail as planned Please use Blank B030 in case if need more space to note such Audit Evidences</p>	<p>included.</p> <p>Entrance test, Comed K, CET is being conducted and students are filtered during admission.</p> <p>Grading system is very effective and curriculum design is very robust compared to all other university keeping in mind students future and career.</p> <p>Examination is conducted in a very transparent manner involving all BOE members</p>
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### ASSESSMENT OF HR RELATED PROCESSES

Date: **18.05.2017**

Auditee Name: **Co. Nataraj**

REQUIREMENTS	Assessor's Notes of Objective Evidences / Finding Reference
<p>Please use the Plan – Do – Check – Act approach and cover the process approach including the Inputs, activities, resources, outputs, verification and improvements</p> <p>6.2 Quality objectives and planning to achieve them 7.1.2 People 7.1.6 Organizational knowledge 7.2 Competence 7.3 Awareness 7.5.3 Control of documented information 10.2 Nonconformity and corrective action</p> <p>Please add any other audit trail as planned Please use Blank B030 in case if need more space to note such Audit Evidences</p>	<p>Documents are controlled and relevant documents are made available at the point of use. Records are legible and retrievable completely filled. Quality policy along with Vision &amp; Mission is displayed. Staff are well aware of the Quality Policy. The education, skills and experience of the teaching staff members is as per the Reva Technological University Norms. Selection criteria for the teaching staffs are defined. Competency Matrix for teaching staffs is been maintained but not for the non-teaching staffs. Annual Training Calendar has been evidenced. All HR department staff are well qualified and experienced. List of teaching and non teaching staff available. Faculty Development plan for teaching staff for 2016-17 available. Workshops and seminars attended by faculties evidenced. Faculty Dr. M. Subramanyam has attended various software programs.</p>

### Logo / Marks/ CAP / CAT / Others

REQUIREMENTS	Assessor's Notes of Objective Evidences / Finding Reference
<p>i) Review of Previous NCR, its Corrective Action Plan and verification of the effectiveness of Corrective Actions Taken. (Please note NCR reference wise).</p>	<p>Nil</p>



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## SURVEILLANCE ASSESSMENT REPORT – QMS

CPN : **BN15391** ARN: **RVUY/SA/05/17** Team Leader: **Anil Patil** Date: **18.05.2017**

<p><b>ii) Closure of Previous Observations and Opportunities for Further Improvement</b></p> <p>ii) Use of BSCIC Logo as per its B26 page 1</p> <p>iii) Use of Accreditation Marks if any as per B26 Page 2</p> <p>iv) Use of NABCB Mark as per B55</p> <p>v) Use of JASANZ Mark as per B56</p> <p>vi) Please verify the website / newsletter if applicable for information related certification</p> <p>vii) Any other relevant information (e.g. public information, comments on the audit report from the client)</p> <p>viii) Any significant change that affect the management system of the client since the last audit took place</p> <p>ix) Any other matter assessed</p> <p>x) Any other matter unresolved</p> <p>Please use PDCA approach for any verification</p> <p>Use additional sheet or backside or blank B30 if required</p>	
<p><b><u>Verify the effectiveness of the management system with regard to achieving the client's objectives and the intended results of the management system</u></b></p>	

### ASSESSMENT COMMENTARY

<p>Positive Issues:</p> <ul style="list-style-type: none"><li>• Documentation is good.</li><li>• Management commitment towards stake holders is very good.</li><li>• Very good Infrastructure and well maintained.</li><li>• Student and Teacher relationship found to be very congenial for learning.</li></ul> <p>Opportunities for Further Improvement:</p> <ul style="list-style-type: none"><li>• Competency matrix to be made more specific to proficiency in Languages Viz, English, Kannada</li><li>• Purchase process needs more systematic approach.</li></ul> <p>Observations: Nil</p>
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**(Write NA if this sheet is not applicable)**

### NONCONFORMITY REPORT

**Client Representative:**

NCR Reference	Details of nonconformity	Management Standard Reference
	Nil	

\*Add more rows if required

### CONFIRMATION

# BSCIC

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## SURVEILLANCE ASSESSMENT REPORT – QMS

CPN : **BN15391** ARN: **RVUY/SA/05/17** Team Leader: **Anil Patil** Date: **18.05.2017**

<b><u>Provide confirmation on accomplishment of Audit Objective</u></b>	<b>Implementation of the Quality Management System is inline with the requirement of the Standard ISO 9001:2015.</b>
-------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------

### RECOMMENDATION FOR CONTINUATION OF CERTIFICATION

Congratulations, we are pleased to recommend continuation of your certification for the scope detailed in Assessment Report:

(Write NA if this sheet if not applicable)

**“This is subject to the receipt of a satisfactory Corrective Action Plan with reference to the nonconformities raised this visit. The plan and evidences should be addressed to Chief Executive and should reach BSCIC office in 7 Working Days”. NA**

Subsequently this Assessment Report Pack along with your satisfactory Corrective Action Plan and objective evidences (if applicable) shall be reviewed independently with in BSCIC.

**Only to be used for Extension of Scope cases. (Please Write NA if this sheet is not applicable)**

<b>Congratulations, we are pleased to recommend extension to your scope of registration as detailed in Assessment Report- -----</b>
-----------------------------------------------------------------------------------------------------------------------------------------

BSCIC believes in value added partnership with its clients, and we will be pleased to revisit your company for the Surveillance Assessments for a visit every Year for 03 mandays per visit.

Details of Additional Locations and Activities for certification (If applicable) : NA

Location 1	
Activity	

\*Add Rows for more

(Write NA if this sheet if not applicable) NA

Recommendation for Supplementary /Re-assessment NA

1.The following have been considered as major concerns during this assessment visit: NA
2. This assessment is based on random samples therefore nonconformities may exist which have not been identified. NA
For Registration Assessments: 3. A recommendation for certification cannot be made until the nonconformities have been cleared, following the corrective action plan being submitted and a limited/full reassessment being satisfactorily completed.

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## SURVEILLANCE ASSESSMENT REPORT – QMS

CPN : **BN15391** ARN: **RVUY/SA/05/17** Team Leader: **Anil Patil** Date: **18.05.2017**

Scope Assessed: NA
4. The non-conformities identified indicate a breakdown in the management system to effectively control the activities for which it was intended. Immediate action is required to investigate the underlying cause of these non-conformities and implement effective, corrective and preventive action. A plan to determine actions, time scales and responsibilities must be prepared and submitted to Chief Executive for review, no later than ----/----/----- . NA
5. Team recommends a Limited Supplementary Assessment for --- manday(s) or a full Re-assessment for ----- manday(s). The same could be conducted by ----/----/-----, upon satisfactory corrective action plan submitted by client to BSCIC's Chief Executive. NA
6. Client to inform their readiness to BSCIC's Chief Executive for the further assessment as in 4 above so that the same could be satisfactorily planned & conducted. NA

**(Write NA if this sheet if not applicable)**

### SURVEILLANCE ASSESSMENT(SA) PROGRAMME

**(Write NA if any Area is not applicable. Please do not DELETE any ROW)**

SA. Frequency                      1 year

S.A. Conduct Number	SA1	SA2	REA Re Assess.			
Man day(s)	3	3	5.5			
MM / YYYY	05/17	05/18	03/19			
<b>Functions/ Areas / Site</b>						
Leadership	√	√	√			
A resource assigned by top management, the responsibility and authority for 5.3 (a) to (e)	√	√	√			
Planning / Risks and Opportunities	√	√	√			
Requirements for products and services	√		√			
Design & development of products and services	√	√	√			
Control of externally provided processes, products and services		√	√			
Production and Service provision	√	√	√			
Performance Evaluation / Monitoring and Measuring resources	√	√	√			
HR related processes	√		√			
Management Review	√	√	√			
QMS Documented Information & Changes	√	√	√			
Internal Audits	√	√	√			
Complaints Management	√	√	√			

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## SURVEILLANCE ASSESSMENT REPORT – QMS

CPN : **BN15391** ARN: **RVUY/SA/05/17** Team Leader: **Anil Patil** Date: **18.05.2017**

Previous NCR & Corrective Actions	√	√	√			
Use of BSCIC Logo & Marks	√	√	√			
Re-assessment (Tick √)			√			
Legal (EMS & OHSAS specific)						

Notice: 1. Fill the areas as per the client activities and processes. Mandatory fields are already mentioned.

2. Assessor to Pl. √ in boxes indicating a full plan. This is required to be updated upon each Surveillance Assessment.

### DECLARATION OF NON-CONFLICT OF INTEREST

I confirm that I have no consultancy or other commercial association with **M/s. REVA UNIVERSITY** during the last two years other than activities conducted under the direction of BSCIC.

### BSCIC Surveillance Assessment Report Acceptance

The onsite Surveillance Assessment of **M/s. REVA UNIVERSITY** was completed.

BSCIC through its Team Leader / Lead Auditor confirms the Confidentiality of the information received, Observed and Reported by the Team BSCIC.

Team Leader / Lead Auditor by signing this sheet confirm the Non Conflict of Interests with the Organisation.

This report and its full contents are completely understood and accepted.

Please sign below confirming acceptance of the assessment report's contents

(Assessment Report Number): **RVUY/SA/05/17**

---

Signed for & on behalf of BSCIC

Name: Mr. Anil Patil Kulkarni

Date: 18.05.2017

---

Signed for on behalf of the client

Name: Dr. P.S. Venkataramu

Date: 18.05.2017

Please complete the Sheet numbers in Footer



# Thank You

# BSCIC

## **BSCIC Certifications Pvt. Ltd.**

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