

AQC GLOBAL LLC

APPLICATION FORM

F08 Issue 01
Rev 08

Date of Application	20.05.2023	
Name of the Company	Vidyasagar College for Women	
Certification Scheme	ISO 9001:2015 <input checked="" type="checkbox"/> ISO 14001:2015 <input type="checkbox"/> ISO 45001:2018 <input type="checkbox"/> ISO 22000:2005 <input type="checkbox"/> ISO 22000:2018 <input type="checkbox"/> ISO 50001:2018 <input checked="" type="checkbox"/> ISO 13484:2016 <input type="checkbox"/> ISO 50001:2011 <input type="checkbox"/> FSSC 22000 V 5.1 <input checked="" type="checkbox"/> GDP <input type="checkbox"/> GMP <input type="checkbox"/>	
No of Sites	1	
Site Address	No of shift	Total No of employees
1.	1	94
2.		
Employees Status		
Applicable to only 9001, 14001 & 50001	No of Employees Full Time Different job : 85 No of Employees performing same type of Job: 85 No of Part time Employees: 6 No of Temporary Workers: No of Unskilled workers: 3	
Applicable to only ISO 27001 & ISO 20000-1	Total Number of Employees working in all Shift with in the ISMS/ITSMS Scope :	
Name of Concerned Person	Dr. Shreepama Ghosal	
Position / Designation	Principal-Teacher-in-Charge	
Mobile Number, Website, E-mail	+91 33 2241 8889, www.vcfw.org , office.vcfw@gmail.com ,	
Legal Status	Company : Private <input type="checkbox"/> Public <input type="checkbox"/> Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Govt Undertaken <input type="checkbox"/> PSU <input type="checkbox"/> NGO <input type="checkbox"/>	
Statutory and Regulatory Requirement	UGC affiliation copy	
Outsourced Process, if any	<ul style="list-style-type: none"> Housekeeping and Security Services Specialized project Internal Audit (Ms. Champa Mandal, Management System Consultancy, UMA Apartment, Rishi Arobindo Road, Madhyamgram, Kolkata-700130) 	
Scope of Certification	Teaching, Learning and Evaluation processes relating to awarding of Bachelor Degrees in Arts and Science considering Environment friendly and Energy efficiency manner in College Green Campus.	
Key Process Involved	Teaching, Learning and Evaluation, Capacity Building, Skill Enhancement, Institutional Social Responsibility	
Accreditation	EGAC <input checked="" type="checkbox"/> Compliance <input type="checkbox"/>	
Non Applicability of clause, if any	Cl au se	Justification
	8. 3	It's a leaning governmental organization. Course module and others requirements as per UGC norms. (No applicability of Design and development)
No of Effective Employees for EnMS	No of personnel shall be who materially impact to EnMS and includes Top Management, MR	10
	No of Team member Energy Management Team	10
	No of Persons responsible for major changes affecting energy performance	4
	No of Persons responsible for developing, implementing or maintaining energy performance, improvements including objectives, targets and action plans	10
	No of Persons responsible for significant energy uses	4


 Teacher-in-Charge
 Vidyasagar College for Women

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	Total Number of Effective Employees for EnMS	10
Certification Program Required	Initial <input checked="" type="checkbox"/> <input type="checkbox"/>	Surveillance <input type="checkbox"/> Recertification <input type="checkbox"/> Transfer <input type="checkbox"/>
Do you have a specific Programme/Timescale for achieving Registration	Yes <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
Is Consultants Involved? If yes Specify the Name of Consultant	Yes <input checked="" type="checkbox"/> NO <input type="checkbox"/> (Champa Mandal of Management System Consultancy)	
Combined Audit	In the case of several certification programmes, would you like the audits to be Combined or carried out separately? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If the answer is yes, please specify which combination :	
Is Already Certified for any Standard	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Answer is Yes Mention Name of the Standard:	
Additional Information Required		
EMS	How many Sites the company is Managing at the same time? (One Site) Do you have Register of Significant Environment aspect? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Do you have An Environmental Management Manual? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Do you have An Internal Environmental Audit Programme? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the Internal Environmental Audit Programme been implemented? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
FSMS/FSSC	HACCP Implementation or Study Conducted : <input type="checkbox"/> Yes <input type="checkbox"/> No No of HACCP Studies : No of Sites: No of Process Lines : Processing is Seasonal <input type="checkbox"/> Continuous <input type="checkbox"/>	
OHSMS	Explain the Hazards identified : Detail any OHS Risk Associated with process : Material Used in Hazardous Process : Legal Obligation arising from OHS Legislation:	
EnMS	Annual Energy Consumption (TJ) : 0.7 TJ No Of Energy Sources: 134 nos. Number of significant energy uses (SEUs): 8 nos.	
ISMS/ITSMS	Do you have confidentiality information that would be excluded during onsite audit (Give In detail) Additional Information Required (Tick one in each box) Critical business sectors are sector that may affect critical public services that will cause risk to health, security, economy, image and governmental ability to function that may have a very large negative impact to country	
Business and organization Complexity		
Types of Business and regulatory Requirement	1. Organisation work in non critical business sector and non regulated sector <input checked="" type="checkbox"/> 2. Organisation has customer in critical business sector. <input type="checkbox"/> 3. Organisation works in critical business sector. <input type="checkbox"/>	
Process and Task	1. Standard Process with standard and repetitive task i.e lots of persons doing work under the organization's control carrying out the same tasks, few product or services <input checked="" type="checkbox"/>	

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	2. Standard but not repetitive process with high number of products or services <input type="checkbox"/> 3. Complex Process, High number of products and services, many business units included in scope of certification <input type="checkbox"/>				
Level of establishment of the Management System	1. ISMS is already well established and/or other management system are in place. <input type="checkbox"/> 2. Some elements of other Management system are implemented, others not <input checked="" type="checkbox"/> 3. No other Management system implemented at all, ISMS is new and not established. <input type="checkbox"/>				
IT Environment Complexity					
IT Infrastructure Complexity	1. Few or highly standardized IT platforms, servers, operating system, database, networks etc <input type="checkbox"/> 2. Several different IT platforms, servers, operating system, database, networks etc <input type="checkbox"/> 3. Many different IT platforms, servers, operating system, database, networks etc <input type="checkbox"/>				
Dependency on outsourcing and suppliers including cloud services	1. Little or no dependency on outsourcing <input checked="" type="checkbox"/> 2. Some dependency on outsourcing or suppliers, related to some but not all important business activities. <input type="checkbox"/> 3. High dependencies on outsourcing or supplier, large impact on important business activities. <input type="checkbox"/>				
Information System Development	1. Non or very limited in house system/application development <input checked="" type="checkbox"/> 2. Some in house or outsourced system/application development for some important business purpose. <input type="checkbox"/> 3. Extension in house or outsourced system/application development for important business purpose. <input type="checkbox"/>				
ITSMS	Is any ITSMS records cannot be made available for review by the audit team because they contain confidential or sensitive information and to provide the corresponding justification. Kindly provide list of such information.				
DECLARATION: The above information is true to the best of my knowledge and belief and I am authorized to provide such information on behalf of the company					
Name	SHREEJANA GOSAL	Designation	Teacher-in-Charge	Signature	S. Ghosal 15/5/23
AQC Official Use Can the Application Proceed for Application Review : <input type="checkbox"/> Yes <input type="checkbox"/> No					
Name of Officer		Name of Application reviewer		Date	

Teacher-in-Charge
Vidyasagar College for Women

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

AND

Name of Client Company Vidyasagar College for Women having its office at 39 Sankar Ghosh Lane, Kolkata - 700 006, West Bengal, India (hereinafter called as Second Party)

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

1. General Conditions

- 1.1 Certification Audit of Client's management system shall be performed on the basis of the requirements of applicable standards.
- 1.2 The Certification audit shall include a two-stage initial audit, surveillance audits in the first and second years, and a recertification audit in the third year prior to expiration of certificate.
- 1.3 Client shall make provisions to accommodate the presence of observers (e.g. accreditation assessor or trainee auditors or witness).
- 1.4 Client shall comply with certification requirements and make all necessary arrangements for the conduct of the audits, including provision for examining documentation and the access to all processes and areas, records and personnel for the purposes of initial certification, surveillance, recertification and resolution of complaints.
- 1.5 Client Organization shall provide to the AQC all documents, information and facilities at sites as required, to enable AQC to provide its services under this Agreement and sites will be audited as per the sample plan prepared by AQC. The AQC can select any accredited client for witness audit.
- 1.6 The client shall permit and cooperate for the witness audit and allow the accreditation body or FSSC Foundation assessor's to assess the competency of the AQC auditor. There shall be no additional charges for witness audit and all the expenses shall be borne by AQC.
- 1.7 AQC shall not be liable for any loss or damage due to any failure or delay in performance of this agreement resulting from any cause beyond our reasonable control, compliance with applicable regulations or directive of national, state or local governments is the responsibility of the client.
- 1.8 After the signing of agreement, if the applicant wishes to cancel it, the advance or any other charges paid shall not be refundable. Liability of AQC is limited to a maximum of amount equivalent to the fees paid by the client. The offer given in agreement is valid for 30 days from the date of issuance.
- 1.9 The client shall agree allow and give access to Auditors and /or Certification personnel or observer to carry out any auditing activity, inspection or investigation against any complaint.
- 1.10 The Organization hereby warrants the completeness and accuracy of all documents and accuracy of all information supplied to AQC for the purposes of this Agreement, not to make or permit any misleading statement regarding its certification.
- 1.11 clients are agreed to release ISO 13485 audit report information to regulators that recognize ISO 13485.

2. Terms of Payment:

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

3. Rights and Duties of Client Organization

- 3.1 Client Organization shall comply with the requirements of AQC when making reference to its certification status in communication media such as the Internet, brochures or advertising or other documents.
 - 3.2 The Organization agrees to comply with relevant provisions of the provision of the standard requirement for which the certificate is applied, with the requirements for certification-granting, maintaining, reducing, extending, suspending, withdrawing certification and recertification if the organization has multiple sites the agreement shall cover all the sites covered by the scope of the certification.
 - 3.3 Client will agree to ensure that the auditors/ assessors are properly briefed about health, safety and other necessary safety hazards that they may encounter during the audits. Client will be responsible for providing them with the personnel protective / safety equipment during the audits.
 - 3.4 Client Organization shall not use or present the use of certification document in a misleading manner or make such statements.
 - 3.5 Upon withdrawal of its certification, discontinues its use of all advertising matter that contains a reference to certification as directed by the certification body.
 - 3.6 Client Organization shall amend all advertising matter when the sector and scope of certification has been reduced.
 - 3.7 Client organization shall not allow reference to its management system certification to be used in such a way as to imply that the certification body certifies a product (including service) or process; and not imply that the certification applies to activities and sites that are outside the scope of certification.
 - 3.8 not use its certification in such a manner that would bring the certification body and/or certification system into dispute and lose public trust.
 - 3.9 The client shall agree to inform AQC any changes with respect to Management System, Organizational change including Legal, Commercial, Organisational status, ownership, Changes in personnel like managerial, decision making and Technical staff, change of location or address or site, changes in the certified scope and any major changes in management system and processes including additional or deletion of processes / activities, fatal incidents, serious injuries, occupational disease or legal action by a regulatory authority. Any such issues related OHS finding by any third party shall be brought into notice of AQC during Surveillance or Recertification Audit.
- FSSC clients shall inform the AQC with in 3 days the following situations
- i. any significant changes that affect the compliance with the Scheme requirements and obtain advice of the CB in cases where there is doubt over the significance of a change;
 - ii. serious events that impact the FSMS or FSQMS, legality and/or the integrity of the certification which include legal proceedings, prosecutions, situations which pose major threats to food safety, quality or certification integrity as a result of natural or man-made disasters (e.g. war, strike, terrorism, crime, flood, earthquake, malicious computer hacking, etc.);
 - iii. public food safety events (such as e.g. public recalls, calamities, food safety outbreaks, etc.);
 - iv. changes to organization name, contact address and site details;
 - v. changes to organization (e.g. legal, commercial, organizational status or ownership) and management (e.g. key managerial, decision-making or technical staff);
 - vi. changes to the management system, scope of operations and product categories covered by the certified management system;
 - vii. any other change that renders the information on the certificate inaccurate.
- 3.10 The Client organization shall ensure that the information provided to AQC by the organization, relevant to its management system is kept updated and it shall promptly notify AQC of any intended change in its Management system which would significantly affect the effective implementation of its management system. Changes such as contact address and sites, legal status, scope of Certification, organizational structural changes needs to be communicated to the AQC
 - 3.11 Certified Client Organisation informs to AQC without delay, of matters that may affect the capability of the management system to

S. Ghosal 15/5/23
Teacher-in-Charge
Vidyasagar College for Women

continue to fulfill the requirements of the standard used for certification. These include, for example, changes relating to the legal, commercial, organizational status or ownership, organization and management (e.g. key managerial, decision-making or technical staff), contact address and sites, scope of operations under the certified management system, and major changes to the management system and processes. AQC shall review the changes and may conduct the audit to verify the changes.

- 3.12 Allow the Accreditation Board Assessors with or without AQC Audit Team to verify the relevant documents and records maintained for particular Management System Certification, the information about the audit will be provided well in advance.
- 3.13 AQC may at any time, refuse to issue a certificate or suspend or withdrawn such certificate in circumstances where, in AQC's opinion, compliance with the specified standard/ specification (including not meeting the regulatory requirements) is not maintained on continuous basis or conditions of this contract are not met. In case of withdrawal, the customer's name shall be removed from the register of certified companies and such information may be available to public. In case of the FSSC 22000, AQC shall suspend the certificate with the immediate effects if any critical non conformity is identified or client is having unwillingness to comply with the scheme requirements.
- 3.14 The Client organization shall declare in advance that any of its employee does not have any conflict of interest with the AQC.
- 3.15 This the client responsibility to accept and facilitate accreditation Board IAS/DAC from which seeking accreditation for its Management System without any or with limited time notice
- 3.16 In case of OHSMS, the certified client informs the AQC, without delay, of the occurrence of a serious incident or breach of regulation necessitating the involvement of the competent regulatory authority.
- 3.17 Information on incidents such as a serious accident, or a serious breach of regulation necessitating the involvement of the competent regulatory authority, provided by the certified client or directly gathered by the audit team during the special audit, shall provide grounds for the AQC to decide on the actions to be taken, including a suspension or withdrawal of the certification, in cases where it can be demonstrated that the system seriously failed to meet the OHSMS certification requirements.

4. Rights and Duties of AQC

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

5. Procedure for Non Conformity Management for FSSC : (For more detail kindly visit at www.aqcworld.com)

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

✓ S. Ghosal 15/5/23
Teacher-in-Charge
Vidyasagar College for Women

6. Procedure for Complaints & Appeal

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

7. Liability:

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

8. Termination of the Contract:

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

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

9. Force Majeure:

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

10. Disputes:

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

<p>FOR & ONBEHALF OF AQC Global LLC</p> <p>Name of Signatory: Designation: Date:</p>	<p>FOR & ONBEHALF OF Name of Company Institution Vidyasagar College For Women</p> <p>Name of Signatory: <u>SAREEPARNA GHOSH</u> Designation: <u>Teacher-in-charge</u> Date: <u>15/5/23</u></p>
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Teacher-in-Charge
Vidyasagar College for Women

AQC GLOBAL LLC

ATTENDANCE SHEET

F22A Issue 01
Rev 02

Date of audit : 30.05.2023
 Name of the Company : Vidyasagar College for Women
 Standard : ISO 9001:2015, ISO 14001:2015 and ISO 50001:2018
 Audit type : Stage-I Audit

S.N.	NAME	Position	Department	Sign.	
				Opening Meeting	Closing Meeting
1.	Analesh Kr. Mandal	Lead Auditor	AQC	<i>Analesh Kr. Mandal</i>	<i>Analesh Kr. Mandal</i>
2.	MONROE PARNA GHOSAL	Teacher-in-Charge	Vidyasagar College for Women	<i>S. Ghosal</i>	<i>S. Ghosal</i>
3.	BAGAKHAI ROY Gouripur Green Club	Asst. Professor	Vidyasagar College for Women	<i>SR</i>	<i>SR</i>
4.	DR. SUKANTA KR. PATRA	Librarian	"	<i>SR</i>	<i>SR</i>
5.	Dr. Benjam Sinha	Asst- Prof.	Vidyasagar College for Women	<i>SR</i>	<i>SR</i>
6.	Dr. Malay Ghosh	Associate Prof	Vidyasagar College for Women	<i>M Ghosh</i>	<i>M Ghosh</i>
7.	Dr. RANU TAMANG	Asst. Prof	Zhejiang, China	<i>R. Tamang</i>	<i>R. Tamang</i>
8.	Dr. Shyamal Bha	Asst. Prof.	Physics, VCU	<i>SR</i>	<i>SR</i>
9.	Dr. Pradyota Mishra	Associate Prof	Biology, VCU	<i>SR</i>	<i>SR</i>
10.	Dr. Atri Saha	Asst-Prof	Vidyasagar College for Women	<i>A. Saha</i>	<i>SR</i>

Teacher-in-Charge
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AQC GLOBAL LLC

F22A Issue 01
Rev 02

ATTENDENCE SHEET

Date of audit : 30.06.2023
 Name of the Company : Vidyasagar College for Women
 Standard : ISO 9001:2015, ISO 14001:2015 and ISO 50001:2018
 Audit type : Stage-2 Audit

S.N.	NAME	Position	Department	Sign.	
				Opening Meeting	Closing Meeting
1.	Amalesh Kr. Mandal	Lead Auditor	AQC	<i>Amalesh Kr. Mandal</i>	<i>Amalesh Kr. Mandal</i>
2.	DR. SUTAPA RAY	PRINCIPAL	VIDYASAGAR COLLEGE FOR WOMEN	<i>Sutapa Ray</i>	<i>Sutapa Ray</i>
3.	BAISAKHI ROY CONVENOR, GREEN CLUB	Asst. Profess.	Vidyasagar College for Women	<i>Be</i>	<i>Be</i>
4.	DR. SUKANTA KR. PATRA	LIBRARIAN	"	<i>Sp</i>	<i>Sp</i>
5.	Dr. Sujan Sinha	Asst. Prof.	Vidyasagar College for Women	<i>Sw</i>	<i>Sw</i>
6.	Dr. Molly Ghosh	Associate Prof	- do -	<i>M Ghosh</i>	<i>M Ghosh</i>
7.	Dr. Ranju Samant	Asst. Prof	Biology, VCFW	<i>R. Samant</i>	<i>R. Samant</i>
8.	Dr. Shyamal Bhar	Asst. Prof.	Physics, VCFW	<i>Shyamal</i>	<i>Shyamal</i>
9.	Dr. Pradipta Mukherjee	Asso. Prof.	English, VCFW	<i>Pm</i>	<i>Pm</i>
10.	Dr. Atri Saha	ASST. Prof	PA-SC, VCFW	A. Saha	<i>AS</i>

Principal
 Vidyasagar College for Women
 Kolkata-700008



TEST REPORT

Name & Address Of the Customer : M/s. VIDYASAGAR COLLEGE FOR WOMEN 39, Sankar Ghosh Lane, Kolkata -700006	Report No.	: QLS/MR/23-24/C/239
	Date	: 15.07.2023
	Sample No.	: QLS/MR/23-24/239
	Sample Description	: Waste Water
	Sampling Location	: Drain Water
	Sample Submitted On	: 11.07.2023
	Date of Performance	: 11.07.2023 - 15.07.2023
	Ref No. Date	: Mail Confirmation

Analysis Result

Sl. No.	Parameter	TEST METHOD	Result	Limit as per CPCB for discharge of effluents	
				Inland Surface Water	Public Sewers
1	Chemical Oxygen Demand (as COD) mg/l	APHA 24 th Edition-2023, 5220B	92	250	---
2	Biochemical Oxygen Demand (as BOD) mg/l	IS 3025 (Part 44)-1993, RA:2019	25	30	350

Report Prepared By :

for Qualissure Laboratory Services
Reviewed & Authorized By

Bishnupriya Banerjee, Chemist
(Authorized Signatory)



—End of the Report—

- The results relate only to the item(s) tested.
- This Test Report shall not be reproduced without the permission of Qualissure Laboratory Services.
- The reserved part of sample(s), except perishable sample(s), shall be retained for 30 days from the date of issue of the Test Report.

AQC GLOBAL LLC

ISO 9001:2015

Stage 1 Audit Report

F13
Issue 01
Rev 05

Name of the Organization	Vidyasagar College for Women	
Address	39, Sankar Ghosh Lane, Kolkata - 700 006, West Bengal, India	
Site Address (If any)		
No. of Employees	Teaching = 85, Non-teaching = 6, House-keeping =2, Security =1, Total = 94 nos.	
No. Of Shift	1	
E mail id	office.vcfw@gmail.com,	
Contact Person	Dr. Shreeparna Ghosal	
Telephone/Fax	+91 33 2241 8887, +91 33 2241 8889	
Scope	Teaching, Learning and Evaluation processes relating to awarding of Bachelor 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	
Exclusions	Design and development	
Audit Team	Lead Auditor: Amallesh Kumar Mandal Auditor: Technical Expert	Audit duration Man day(s): Technical Expert
Starting date of Audit	30.05.2023	
End Date of Audit	30.05.2023	
Brief about the organization	<p>Vidyasagar College for Women as a full fledged separate college affiliated to the University of Calcutta was founded in 1960. However, its history went back to 1931 when a separate womens' section of the Vidyasagar College was started to cater to the educational requirements of the women folk of Kolkata. Its classes were held in the morning. The womens' section was temporarily brought to a stop during the second world war. Since 1947, however, expansion in all branches of its activities took place steadily and regularly. New subjects were introduced and a group of dedicated teachers inspired confidence among the students who enrolled in large numbers. Since its foundation in 1960, Vidyasagar College for Women committed itself to carry forward the ideals and principles of Pundit Iswar Chandra Vidyasagar, the great educationist and social reformer of the 19th century. At present the college consists of three campuses.</p> <p>All the three campuses of Vidyasagar College for Women are located at the heart of North Kolkata, the central zone of the Bengal Renaissance movement with the Calcutta University, Presidency College, Sanskrit College, Scottish Church College, Bethune College, the City group of colleges and Victoria College associated with Brahma associations close by. The residential places of the Thakurs, Rammohan Roy, Vivekananda and many other luminaries are within very short distance from our college.</p>	

AQC GLOBAL LLC

ISO 9001:2015

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Audit Objective	To evaluate the client's documented system, location & site-specific conditions and gather other details through discussions with the client's personnel to determine the organization's readiness for the Stage 2 Audit for Certification
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CHANGE DETAIL

Audit Duration for Stage 1	
Are quoted man-days adequate?	Yes
Any change in employee detail?	None
Any Change in Scope?	None
Any additional Information:	None

ATTENDANCE SHEET:

NAME OF PERSON	DESIGNATION
<i>Amalath K. M. M. M.</i>	Lead Auditor

SUMMARY OF AUDIT

AREA OF IMPROVEMET	
(Areas of Improvement Which May be Identified as Non Conformities During Stage 2 Audit)	
1	Communication/Display of policy
2	Communication/Display of Objectives

Non Conformities Raised

0 Minor/Major Non conformance identified in the Stage 1 audit, details of Non Conformance in F50.

Please respond by using your own corrective action form and include the root cause analysis with systemic corrective action. Failure to include root cause analysis with systemic corrective action will result in your responses being rejected by Lead Auditor

Team Leader Declaration (Tick or cross Each Column as per applicability)	
√	Auditing is based on a sampling process of the available information
√	Audit is combined, joint or integrated;
√	The effectiveness of corrective actions taken regarding previously identified
√	nonconformities has verified
√	outcomes are effective and complying.
√	The internal audit and management review process are effective and complying with the requirements.
√	The scope of certification is appropriate.
√	The capability of the management system to meet applicable requirements and expected
√	The audit objectives has been fulfilled and achieved.
RECOMMENDATION	
√	Recommended Proceeding With Stage 2 (within 60 days from this audit date)
×	Recommend not proceeding to stage 2 until audit evidence has been submitted to AQC showing that the concerns raised by the auditor (s) have been rectified. A date for stage 2 will then be agreed.
×	Recommend not proceeding without a further stage 1 Audit due to the severity of the concerns raised by the audit team

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Sign Off : Date 30.05.2023

AQC Report Submission

Client Acceptance for Report

Name of Auditor: Amalesh Kumar Mandal

Name: Dr. Shreeparna Ghosal

Signature: *Amalesh Kumar Mandal*Sign *S. Ghosal*Designation: *Teacher-in-Charge*Teacher-in-Charge
Vidyasagar College for Women**AUDIT CHECKLIST**

REQUIREMENTS	COMMENTS	Status C/NC/O
Is the Information is documented as required as per the ISO 9001:2015?	Manual and other documented information available.	C
Has the discussion held with personnel of the Client company for readiness for stage-2?	Yes	C
Has the Client site specific conditions are evaluated?	Yes	C
Has the company identified key performance, Process, Objectives and operation of Management System?	Established and implemented	C
Has the client having understanding with the ISO 9001:2015 Standard requirement?	Yes	C

AQC GLOBAL LLC

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Is the scope is having boundaries and specific to client organization?	Yes	C
Is client having Multisite then level of control is established.	Not applicable	C
Is process and Equipment used are adequate?	Yes	C
Has client identified Legal and Statutory Requirements applicable to Product and Organization?	Yes	C
Is the resource are adequate for stage 2 audit?	Yes	C
Is Internal Audit planned and performed and effective?	Yes	C
Is MRM planned and performed and Effective?	Yes	C
Are Internal audits conducted as planned? Date of Last Internal Audit?	Yes/ 03.12.2022 to 04.12.2022	C
Are Management reviews conducted as planned? Date of Last MRM?	Yes/ 15.12.2022	C

END OF REPORT

Name of the Organization	Vidyasagar College for Women	
Address	39, Sankar Ghosh Lane, Kolkata - 700 006, West Bengal, India	
Site Address (If any)		
No. of Employees	Teaching = 85, Non-teaching = 6, House-keeping =2, Security =1, Total = 94 nos.	
No. of Shift	1	
E mail id	office.vcfw@gmail.com,	
Contact Person	Dr. Sutapa Ray	
Telephone/Fax	+91 33 2241 8887, +91 33 2241 8889	
Scope	Teaching, Learning and Evaluation processes relating to awarding of Bachelor 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	
Audit Team	Lead Auditor: Amalesh Kr. Mandal Auditor: Technical Expert	No of Mandays: 1
Starting date of Audit	30.06.2023	
End date of Audit	30.06.2023	
Brief about the organization	<p>Vidyasagar College for Women as a full fledged separate college affiliated to the University of Calcutta was founded in 1960. However, its history went back to 1931 when a separate womens' section of the Vidyasagar College was started to cater to the educational requirements of the women folk of Kolkata. Its classes were held in the morning. The womens' section was temporarily brought to a stop during the second world war. Since 1947, however, expansion in all branches of its activities took place steadily and regularly. New subjects were introduced and a group of dedicated teachers inspired confidence among the students who enrolled in large numbers. Since its foundation in 1960, Vidyasagar College for Women committed itself to carry forward the ideals and principles of Pundit Iswar Chandra Vidyasagar, the great educationist and social reformer of the 19th century. At present the college consists of three campuses.</p> <p>All the three campuses of Vidyasagar College for Women are located at the heart of North Kolkata, the central zone of the Bengal Renaissance movement with the Calcutta University, Presidency College, Sanskrit College, Scottish Church College, Bethune College, the City group of colleges and Victoria College associated with Brahma associations close by. The residential places of the Thakurs, Rammohan Roy, Vivekananda and many other luminaries are within very short distance from our college.</p>	
Purpose of Audit	To verify the implementation of the Quality Management System as per the ISO 9001:2015 Standards Requirement, verification of records for the conformity of the implementation.	

CHANGE DETAIL:

Audit Duration for Stage 2

Are quoted man-days
adequate?

Yes

Any change in
employee detail?

None

Any Change in Scope?

None

Any additional
Information:

None

ATTENDANCE SHEET:

NAME OF PERSON	DESIGNATION
<i>Anandakrishnan S. Srinivasan</i>	Lead Auditor

SUMMARY OF AUDIT

AREA OF IMPROVEMENTS

1	No such improvement points identified in current period.
2	Actual data control system observed

Non Conformities Raised

0 Minor/Major Non-conformance identified in the Stage 2 audit, details of Non Conformance in F50

Please respond by using your own corrective action form and include the root cause analysis with systemic corrective action. Failure to include root cause analysis with systemic corrective action will result in your responses being rejected by Lead Auditor

Team Leader Declaration (Tick or cross Each Column as per applicability)

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

Recommendation:

√	The quality system complies with the requirements of the reference standard: Congratulations, on the basis of the above summary, Lead Auditor is pleased to put forward a recommendation for Issuance of Certificate. The organization can use the AQC Mark
×	The quality system complies with the requirements of the reference standard with exception of minor NC: Congratulations, Team Leader is pleased to put forward a recommendation for Issuance of the certificate of Organization upon off-site verification of closure of all minor NC within 60 days from the date of Stage 2 audit. Responses to the non-conformances should be submitted to AQC and must include supporting evidence of closure to allow for off-site verification. In responding to the non-conformances, the organization should consider the root cause of the non-conformance and the potential for related issues in other parts of system. If all non-conformances are not closed within 60 days, a full reassessment may be required.
×	Evidence of major non conformities: Organization is not recommended for Issuance of Certificate and at this time. Follow-up audit will be scheduled to allow for on-site verification and closure of all issues within 60 days from the date of Stage 2. Once all non-conformances are closed, the recommendation for Issuance of certification may recommended. If all non-conformances are not closed within 60 days, a full reassessment may be required.
×	Not Recommended: Organization is not recommended for Issuance of certificate at this time. Full Stage 2 audit is required as the organisation has not implemented the system and process at pace. .
<i>Proposed Audit Date for 1st Surveillance Audit 29.06.2024 (mm/dd/yy)</i>	
Sign Off: (Date) 30.06.2023	
AQC Report Submission	Client Acceptance for Report
Name of Team Leader: Amalash Kr. Mandal	Name: DR. SUTAPA RAY
Signature: <i>Amalash Kr. Mandal</i>	Sign <i>Sutapa Ray</i>
	Designation: PRINCIPAL
	<i>Principal</i> Vidyasagar College for Women Kolkata-700008

AUDIT CHECKLIST**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
4.1 understanding the organization and its context (Determination of external and Internal Issues)	C	Identified and included in Manual. (VCW/QMS/LEVEL/01)
4.2 Understanding the needs and expectations of interested parties (Determination, Monitor & Review of the Interested Parties)	C	Identified and included in Manual. (VCW/QMS/LEVEL/01)
4.3 Determining the scope of the quality management system (Boundaries and Type of Product and Services and any requirement not applicable)	C	Scope established and included in Manual. (Under 4.3, Page. No.13)
4.4 Quality management system and its processes (Established, Implement and maintained, process and Interaction of Process)	C	Process Flow found established.
5.1.1 Leadership & Commitment (Statement of ensurity)	C	Interviewed with Top Management. Respective project files found available.
5.1.2 Customer focus (statement of conformity)	C	Interviewed with Top Management. Their course delivery as per plan and guideline.
5.2 Quality policy (Establish, Implement, Maintain, communicated and understood)	C	Quality Policy established (Under clause no. 5.2.1 in Quality manual, page no. 15)
5.3 Organizational roles, responsibilities and authorities	C	Defined in Manual
6.0 Planning	C	
6.1 Actions to address risks and opportunities (Risk Assessment has done with prevention of undesirable effects)	C	Risk Register found maintain. (VCW/QMS/FRM/03)
6.2 Quality objectives and planning to achieve them (Documented, Measurable, Monitored and communicated)	C	Quality Objectives found established and planned to achieve action(MAP)- Doc. Ref. no. VCW/QMS/FRM/001
6.3 Planning of changes (As per 4.4) and Purpose, resource availability and allocation	C	Found available, as per committee decision and minutes.

7.1 Resources (Need of External resources, People, Infrastructure, Environment, Calibration records, Organisational Knowledge)	C	Environment monitoring: Monitoring/testing data from external body Qualissure Laboratory Services (NABL accredited) found available. Monitoring done on Ambient Air, Waste Water, Noise Monitoring, Soil, Drinking Water. Test result under control as per IS requirements.
7.2 Competence (Employee records & Competence skill matrix)	C	Related training records found available
7.3 Awareness (Quality Policy, Objectives & Effectiveness of QMS)	C	Done through training and display.
7.4 Communication (what, who, when, whom, how)	C	Done through display, mail, meeting minutes.
7.5 Documented information (External Origin, Creation, Updation, Distribution, Preservation, version control, Retention and disposition)	C	Control of documented information procedure established.
8.1 Operational planning and control (Plan, Implement and control of process, documented information for process carried out as planned and Conformity of product or services)	C	Operational procedures established supported with work instructions and related records.
8.2.1 Customer communication (Enquiries, Contract, order, feedback, complaints)	C	Feedback and complaint register available
8.2.2 Determining of Requirements for products and services (Objective evidence for record of contract review and approval, Record verification of Statutory & Regulatory shall be referred here, record for communication of changes, legal requirements need to be re-verified if any concerns identified in Stage 1 audit or any new product added)	C	Maintain as per UGC guidelines.
8.2.3 Review of the requirements for products and services (Documented Information for Result of review and any new requirements for product or services)	C	Review methodology available.
8.2.4 Changes to requirements for products and services (the changed documents is aware and approved by relevant person)	C	Maintain
8.3 Design and Development (D&D)	C	Not Applicable
8.3.1 General Establish, Maintain and Implement the D&D Process	C	Not Applicable

8.3.2 D&D Planning (Record reference)	C	Not Applicable
7.3.3 D&D Inputs (Record reference for the inputs)		
8.3.4 D&D Controls (Record reference & Approval)		
8.3.5 D&D Outputs (Record reference for outputs)		
8.3.6 D&D Changes (Record reference for changes, approved, validated & verified before implementation & actions as necessary)		
8.4.1 Control of externally provided processes, products and services (documented Information for criteria for the evaluation, selection, monitoring of performance and re-evaluation)	C	Tendering process, Vendor enrolment and evaluation records found available.
8.4.2 Type and extent of control (Control Verification)	C	Evaluation records found available.
8.4.3 Information for external providers (Competence and qualification of external provider)	C	Available with user departments
8.5.1 Control of production and service provision (Records verified work instructions for the processing including delivery and post-delivery activities, characteristic of product, equipments use and availability for monitoring and measurement)	C	Work instructions/Specifications found available followed by relevant records.
8.5.2 Identification and Traceability (Records verified for identification batch no or serial no in process as well as final result)	C	Traceability maintained through online.
8.5.3 Property belonging to customers or external providers (Documented Information of Lost or damaged property)	C	Not applicable
8.5.4 Preservation of output (objective evidence for meeting the defined storage conditions for handling, packaging, storage and protection)	C	Maintained in Laboratory materials
8.5.5 Post-delivery activities (Result outcome)	C	Maintained.
8.5.6 Control of changes (Documented Information change review result, person who is authorized to changes)	C	Change control format found available.
8.6 Release of final outcome services (Planned Arrangement documented information for acceptance criteria and authorized person traceability)	C	Maintained through online

8.7 Control of nonconforming outputs (Documented Information for Non conformity, action taken, concession, authority deciding action)	C	Methods/Action plan found available
9.1.1 Monitoring, Measurement analysis and evaluation	C	Monitoring done against set criteria.
9.1.2 Customer Satisfaction (Analysis of Customer Satisfaction)	C	Customer satisfaction analysis process found available
9.1.3 Analysis and Evaluation	C	Done
9.2 Internal Audit (Frequency and Documented Information for Implementation of Audit Program and the audit result)	C	Six monthly frequency and Internal Audit plan/records found available (Last done from 03.12.2022 to 04.12.2022)
9.3 Management Review (Frequency, Input, Output, Documented Information for MRM Results)	C	MRM agenda and minutes found available. (Last done on 15.12.2022)
10.1 Improvement – General	C	Done and included in MRM
10.2 Nonconformity and Corrective action (Documented Information for nature of NC and result of action taken)	C	Procedure established.
10.3 Continual improvement	C	Objective and monitoring data found available.

END OF REPORT

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Stage 1 Audit Report	

Name of the Organization	Vidyasagar College for Women	
Address	39, Sankar Ghosh Lane, Kolkata - 700 006, West Bengal, India	
Site Address (If any)		
No. of Employees	Teaching = 85, Non-teaching = 6, House-keeping =2, Security =1, Total = 94 nos.	
E mail id	office.vcfw@gmail.com,	
Contact Person	Dr. Shreeparna Ghosal	
Telephone/Fax	+91 33 2241 8887, +91 33 2241 8889	
Scope	Teaching, Learning and Evaluation processes relating to awarding of Bachelor 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	
Exclusions	None	
Audit Team	Lead Auditor: Amalesh Kr. Mandal Auditor: Technical Expert:	Audit duration Man day(s):
Start date of Audit	30.05.2023	
End Date of Audit	30.05.2023	
Brief about the organization	<p>Vidyasagar College for Women as a full fledged separate college affiliated to the University of Calcutta was founded in 1960. However, its history went back to 1931 when a separate womens' section of the Vidyasagar College was started to cater to the educational requirements of the women folk of Kolkata. Its classes were held in the morning. The womens' section was temporarily brought to a stop during the second world war. Since 1947, however, expansion in all branches of its activities took place steadily and regularly. New subjects were introduced and a group of dedicated teachers inspired confidence among the students who enrolled in large numbers. Since its foundation in 1960, Vidyasagar College for Women committed itself to carry forward the ideals and principles of Pundit Iswar Chandra Vidyasagar, the great educationist and social reformer of the 19th century. At present the college consists of three campuses.</p> <p>All the three campuses of Vidyasagar College for Women are located at the heart of North Kolkata, the central zone of the Bengal Renaissance movement with the Calcutta University, Presidency College, Sanskrit College, Scottish Church College, Bethune College, the City group of colleges and Victoria College associated with Brahma associations close by. The residential places of the Thakurs, Rammohan Roy, Vivekananda and many other luminaries are within very short distance from our college.</p>	
Audit Objective	To evaluate the client's documented system, location & site-specific	

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Stage 1 Audit Report	

	conditions and gather other details through discussions with the client's personnel to determine the organization's readiness for the Stage 2 Audit for Certification.
--	--

CHANGE DETAIL

Audit Duration for Stage 1	
Are quoted man-days adequate?	Yes
Any change in employee detail?	None
Any Change in Scope?	None
Any additional Information:	None

ATTENDANCE SHEET:

NAME OF PERSON	DESIGNATION
<i>Amalath K. S. Prasad</i>	Lead auditor

SUMMARY OF AUDIT

AREA OF IMPROVEMNET

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Stage 1 Audit Report	

(Areas Of Improvement Which May Be Identified As Non Conformities During Stage 2 Audit)	
1	Communication/Display of policy
2	Communication/Display of Objectives

Non Conformities Raised

0 Minor/Major Non-conformance identified in the Stage 1 audit, details of Non Conformance in F50

Please respond by using your own corrective action form and include the root cause analysis with systemic corrective action. Failure to include root cause analysis with systemic corrective action will result in your responses being rejected by Lead Auditor

Team Leader Declaration (Tick or cross Each Column as per applicability)	
√	Auditing is based on a sampling process of the available information
√	Audit is combined, joint or integrated;
√	The effectiveness of corrective actions taken regarding previously identified
√	nonconformities has verified
√	outcomes are effective and complying.
√	The internal audit and management review process are effective and complying with the requirements.
√	The scope of certification is appropriate.
√	The capability of the management system to meet applicable requirements and expected
√	The audit objectives has been fulfilled and achieved.
RECOMMENDATION	
√	Recommended Proceeding With Stage 2 (within 60 days from this audit date)
×	Recommend not proceeding to stage 2 until audit evidence has been submitted to AQC showing that the concerns raised by the auditor (s) have been rectified. A date for stage 2 will then be agreed.
×	Recommend not proceeding without a further stage 1 Audit due to the severity of the concerns raised by the audit team

Sign Off : Date 30.05.2023	
AQC Report Submission	Client Acceptance for Report
Name of Auditor: Amallesh Kumar Mandal	Name: SHREEPARNA GHOSAL
Signature: Amallesh Kumar Mandal	Signature: S. Ghosal
	Designation: Teacher-in-Charge

Teacher-in-Charge
Vidyasagar College for Women

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AUDIT CHECKLIST

REQUIREMENTS	COMMENTS	Status C/NC/O
Is the Information is documented as required as per the ISO 14001:2015?	Manual (EMS/001 dtd. 06.06.2023) and other documented information available.	C
Has the discussion held with personnel of the Client company for readiness for stage-2?	Yes. Within this month the Stage-2 need to be completed.	C
Are Process and support processes identified and determined?	Yes	C
Has the Client site specific conditions are evaluated?	Established and implemented	C
Has the company identified key performance, Process, Objectives, Impact and Aspect analysis and operation of Management System?	Yes. Environment related objectives and programs are found set and Environmental aspect/impact analysis found established.	C
Has the client having understanding with the ISO 14001:2015 Standard requirement?	Yes. They have hired external consultant for that too. Awareness done.	C
Is the scope is having boundaries and specific to client organization?	Yes	C
Is client having Multisite then level of control is established.	Not applicable	C
Is process and Equipment used are adequate?	Yes	C
Has client identified Legal and Statutory Requirements applicable to Product and Organization?	Yes as per UGC guidelines.	C

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Is the resource are adequate for stage 2 audit?	Yes	C
Is Internal Audit planned and performed and effective?	Last done on 10.03.2023 covering ISO 14001:2015 standards.	C
Is MRM planned and performed and Effective?	Yes last done on 22.03.2023, minutes are available.	C

END OF REPORT

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Stage 2 Audit Report

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Name of the Organization	Vidyasagar College for Women	
Address	39, Sankar Ghosh Lane, Kolkata - 700 006, West Bengal, India	
Site Address (If any)		
No. of Employees	Teaching = 85, Non-teaching = 6, House-keeping = 2, Security = 1, Total = 94 nos.	
NO. of Shift	1	
E mail id	office.vcfw@gmail.com,	
Contact Person	Dr. Sutapa Ray	
Telephone/Fax	+91 33 2241 8887, +91 33 2241 8839	
Scope	Teaching, Learning and Evaluation processes relating to awarding of Bachelor 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	
Exclusion	None	
Audit Team	Lead Auditor: Amalesh Kumar Mandal Auditor: Technical Expert:	No of Mandays : 1
Starting Date of Audit	30.06.2023	
End Date of Audit	30.06.2023	
Brief about the organization	<p>Vidyasagar College for Women as a full fledged separate college affiliated to the University of Calcutta was founded in 1960. However, its history went back to 1931 when a separate womens' section of the Vidyasagar College was started to cater to the educational requirements of the women folk of Kolkata. Its classes were held in the morning. The womens' section was temporarily brought to a stop during the second world war. Since 1947, however, expansion in all branches of its activities took place steadily and regularly. New subjects were introduced and a group of dedicated teachers inspired confidence among the students who enrolled in large numbers. Since its foundation in 1960, Vidyasagar College for Women committed itself to carry forward the ideals and principles of Pundit Iswar Chandra Vidyasagar, the great educationist and social reformer of the 19th century. At present the college consists of three campuses.</p> <p>All the three campuses of Vidyasagar College for Women are located at the heart of North Kolkata, the central zone of the Bengal Renaissance movement with the Calcutta University, Presidency College, Sanskrit College, Scottish Church College, Bethune College, the City group of colleges and Victoria College associated with Brahma associations close by. The residential places of the Thakurs, Rammohan Roy, Vivekananda and many other luminaries are within very short distance from our college.</p>	
Purpose of Audit	To verify the implementation of the Environmental Management System as per the Standards Requirement, verification of records for the conformity of the implementation.	

CHANGE DETAIL:

Audit Duration for Stage 2	
Are quoted man-days adequate?	Yes
Any change in employee detail?	None
Any Change in Scope?	None
Any additional Information:	None

ATTENDANCE SHEET:

NAME OF PERSON	DESIGNATION
<i>Amalath K S Manoj</i>	

SUMMARY OF AUDIT

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

Non Conformities Raised

0 Minor/Major Non-conformance identified in the Stage 2 audit, details of Non Conformance in F50

Please respond by using your own corrective action form and include the root cause analysis with systemic corrective action. Failure to include root cause analysis with systemic corrective action will result in your responses being rejected by Lead Auditor

Team Leader Declaration (Tick or cross Each Column as per applicability)

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

Recommendation:

√	The EMS complies with the requirements of the reference standard: Congratulations, on the basis of the above summary, Lead Auditor is pleased to put forward a recommendation for Issuance of Certificate. The organization can use the AQC Mark
×	The EMS complies with the requirements of the reference standard with exception of minor NC: Congratulations, Team Leader is pleased to put forward a recommendation for Issuance of the certificate of Organization upon off-site verification of closure of all minor NC within 60 days from the date of Stage 2 audit. Responses to the non-conformances should be submitted to AQC and must include supporting evidence of closure to allow for off-site verification. In responding to the non-conformances, the organization should consider the root cause of the non-conformance and the potential for related issues in other parts of system. If all non-conformances are not closed within 60 days, a full reassessment may be required.
×	Evidence of major non conformities: Organization is not recommended for Issuance of Certificate and at this time. Follow-up audit will be scheduled to allow for on-site verification and closure of all issues within 60 days from the date of Stage 2. Once all non-conformances are closed, the recommendation for Issuance of certification may recommended. If all non-conformances are not closed within 60 days, a full reassessment may be required.
×	Not Recommended: Organization is not recommended for Issuance of certificate at this time. Full Stage 2 audit is required as the organisation has not implemented the system and process at pace. .

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<i>Proposed Audit Date for 1st Surveillance Audit 29.06.2024 (mm/dd/yy)</i>	
Sign Off : (Date) 30.06.2023	
AQC Report Submission	Client Acceptance for Report
Name of Team Leader: Amallesh Kr. Mandal	Name: DR. SUTAPA RAY
Signature: Amallesh Kumar Mandal	Sign: <i>Sutapa Ray</i>
	Designation: PRINCIPAL

Vidyasagar College for Women
Kolkata-700008

AUDIT CHECKLIST

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

Clause Number	C/N/C/O	Document Verification detail with statement of Conformity
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, Dtd. 06.06.2022)
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, Dtd. 06.06.2022)
4.3 Determine and maintained Documented Information the scope of the Environmental management system (Boundaries and Type of Product and Services and any requirement not applicable)	C	Scope established and included in Manual (Doc. Ref. No. EMS/001, Dtd. 06.06.2022), Section No. - EMS/06 Page. No. 8
4.4 Environmental management system and its processes (Established, Implement and maintained, process and Interaction of Process)	C	Process Flow found established. College operation predefined as per government norms.
5.1 Leadership & Commitment (Statement of ensurity)	C	Interviewed with Top Management (Principal) regarding Environment management system. Several Project has initiated and monitored as per plan.
5.2 Environmental policy (Documented Information, Establish, Implement, Maintain, communicated and understood)	C	Environmental Policy established (Section No. - EMS/15, Page no 15)
5.3 Organizational roles, responsibilities and authorities	C	Defined in Manual as per Governmental norms.
6.0 Planning		

6.1.1 Actions to address risks and opportunities (Risk Assessment has done with prevention of undesirable effects)	C	Risk Register found maintain and accordingly project taken.
6.1.2 Determination and maintained documented information of Environmental Aspect, associated impacts Criteria Used and significant aspects and, of the activity and Environmental Impacts	C	Aspect/Impact Register found maintain. (DOC. NO:VCW/ASPECT/01)
6.1.3 Determination of the Compliances Obligation and maintained documented information how to comply.	C	Compliance register found available and complied as per UGC and others norms.
6.1.4 Planning action for Environmental aspect, Compliance Obligation and Risk and Opportunities.	C	Planning records found available (In the form of projects)
6.2 Environmental objectives and planning to achieve them (Documented, Measurable, Monitored and communicated)	C	Environmental Objectives found established and planned to achieve action (MAP)- Doc. No. ENV/OBJ
7.1 Resources (Resource needed for Continual Improvement)	C	Found available
7.2 Competence (Employee records & Competence skill matrix)	C	Related training records found available
7.3 Awareness (Environmental Policy, Objectives & Effectiveness of EMS)	C	Done through training
7.4 Communication (what, who, when, whom, how with retained documented information)	C	Done
7.5 Documented information (External Origin, Creation, Updation, Distribution, Preservation, version control, Retention and disposition)	C	Document control done
8.1 Operational planning and control (Plan, Implement and control of process, documented information for process carried out as planned and Conformity of product or services)	C	Operational procedures established supported with work instructions and related records.
8.2 Emergency Prepared and Responses (Mitigation of Adverse Environmental Impact, Respond to Emergency situation, Periodically review and Training of the Emergency)	C	EPRP document and mock drill training given. There are no such exposure of emergency as per their work nature and campus conditions.
9.1.1 Monitoring, Measurement analysis and evaluation	C	Environment Condition monitoring done: Monitoring/testing data from external body Qualissure Laboratory Services (NABL accredited) found available. Monitoring done on Ambient Air, Waste Water, Noise Monitoring, Soil, Drinking Water, Test result under control as per IS requirements. Test reports attached with this report as a proof.

9.1.2 Evaluation Of Compliances Documented (Frequency and Action on Evaluation)	C	Compliance register found available
9.2 Internal Audit (Frequency and Documented Information for Implementation of Audit Program and the audit result)	C	Six monthly frequency and Internal Audit plan/records found available
9.3 Management Review (Frequency, Input, Output, Documented Information for MRM Results)	C	MRM agenda and minutes found available.
10.1 Improvement – General	C	Done and included in MRM
10.2 Nonconformity and corrective action (Documented Information for nature of NC and result of action taken)	C	Procedure established.
10.3 Continual improvement	C	Objective and monitoring data found available.

END OF REPORT

Name of the Organization	Vidyasagar College for Women	
Address	39, Sankar Ghosh Lane, Kolkata - 700 006, West Bengal, India	
Site Address (If any)		
No. of Employees	Teaching = 85, Non-teaching = 6, House-keeping =2, Security =1, Total = 94 nos.	
No. Of Shift	1	
E mail id	office.vcfw@gmail.com,	
Contact Person	Dr. Shreeparna Ghosal	
Telephone/Fax	+91 33 2241 8887, +91 33 2241 8889	
Scope	Teaching, Learning and Evaluation processes relating to awarding of Bachelor 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	
Audit Team	Lead Auditor: Amalesh Kr. Mandal Auditor: Technical Expert	Audit duration Man day(s): Technical Expert
Starting date of Audit	30.05.2023	
End Date of Audit	30.05.2023	
Brief about the organization	<p>Vidyasagar College for Women as a full fledged separate college affiliated to the University of Calcutta was founded in 1960. However, its history went back to 1931 when a separate womens' section of the Vidyasagar College was started to cater to the educational requirements of the women folk of Kolkata. Its classes were held in the morning. The womens' section was temporarily brought to a stop during the second world war. Since 1947, however, expansion in all branches of its activities took place steadily and regularly. New subjects were introduced and a group of dedicated teachers inspired confidence among the students who enrolled in large numbers. Since its foundation in 1960, Vidyasagar College for Women committed itself to carry forward the ideals and principles of Pundit Iswar Chandra Vidyasagar, the great educationist and social reformer of the 19th century. At present the college consists of three campuses.</p> <p>All the three campuses of Vidyasagar College for Women are located at the heart of North Kolkata, the central zone of the Bengal Renaissance movement with the Calcutta University, Presidency College, Sanskrit College, Scottish Church College, Bethune College, the City group of colleges and Victoria College associated with Brahma associations close by. The residential places of the Thakurs, Rammohan Roy, Vivekananda and many other luminaries are within very short distance from our college.</p>	
Audit Objective	To evaluate the client's documented system, location & site-specific conditions and gather other details through discussions with the	

SUMMARY OF AUDIT

AREA OF IMPROVEMET	
(Areas of Improvement Which May be Identified as Non Conformities During Stage 2 Audit)	
1	Communication/Display of policy
2	Communication/Display of Objectives

Non Conformities Raised

0 Minor/Major Non conformance identified in the Stage 1 audit, details of Non Conformance in F50.

Please respond by using your own corrective action form and include the root cause analysis with systemic corrective action. Failure to include root cause analysis with systemic corrective action will result in your responses being rejected by Lead Auditor

Team Leader Declaration (Tick or cross Each Column as per applicability)

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

AQC GLOBAL LLC

ISO 50001:2018

Stage 1 Audit Report

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RECOMMENDATION

√	Recommended Proceeding With Stage 2 (within 60 days from this audit date)
×	Recommend not proceeding to stage 2 until audit evidence has been submitted to AQC showing that the concerns raised by the auditor (s) have been rectified. A date for stage 2 will then be agreed.
×	Recommend not proceeding without a further stage 1 Audit due to the severity of the concerns raised by the audit team

Sign Off: Date 30.05.2023

AQC Report Submission

Name of Auditor: Amalsh Kr. Mandal

Signature: Amalsh Kumar Mandal

Client Acceptance for Report

Name: SHREEPARNA GHOSAL

Sign: S. Ghosal

Designation: Teacher-in-charge

Teacher-in-Charge
Vidyasagar College for Women

AUDIT CHECKLIST

REQUIREMENTS	COMMENTS	Status C/NC/O
Is the Information is documented as required as per the ISO 50001:2018?	Manual and other documented information available. (Doc. Ref. No. ENMS/L1, dtd. 06.06.2022)	C
Has the discussion held with personnel of the Client company for readiness for stage-2?	Yes	C
Has the Client site specific conditions are evaluated?	Established, implemented and the Scope has set as per Site specific. (Under clause 4.3 of ENMS/L1 Manual)	C
Has the company identified energy performance indicator, Energy baseline, Energy objectives, energy targets and energy management action plans?	Respective Energy project found taken by Authority. Like "Efficient use of Energy Resources"	C
Has the client having understanding with the ISO 50001:2018 Standard requirement?	Yes. Awareness training has conducted by external consultant.	C

Is the scope is having boundaries and specific to client organization?	Yes scope found suitable as per client specific.	C
Is client having Multisite then level of control is established.	Not applicable	C
Is organization analyse energy used and consumption based on measurement and other data: (Identify current energy sources/evaluate past and present energy use and consumption?)	Measurement done on Bill monitoring, list of energy sources are available, significant energy sources identified.	C
Based on the analysis of energy used and consumption, Is organization identify the areas of significant energy use.(identify the facilities, equipment, systems, processes and personnel working for, or on behalf of, the organization that significantly affect energy use and consumption?)	List of energy sources are available, significant energy sources identified. Energy program found established.	C
Has organisation identified EnPIs (energy performance indicators) appropriate for monitoring and measuring your energy performance?	Energy baseline declared as last year consumption. EnPI set in the form of Energy Projects.	C
Has organisation identified, implemented and have access to the applicable legal requirements and other requirements to which organisation subscribes related to energy use, consumption and efficiency?	No such mandatory protocol applied on them. They has identified their own improvements parameters.	C
Is the resource are adequate for stage 2 audit?	Yes	C
Is Internal Audit planned and performed and effective?	Last Internal scheduled on 23.12.2022	C
Is MRM planned and performed and Effective?	Last MRM held on 05.12.2023	C

END OF REPORT

AQC GLOBAL LLC**ISO 50001:2018****Stage 2 Audit Report**

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Name of the Organization	Vidyasagar College for Women	
Address	39, Sankar Ghosh Lane, Kolkata - 700 006, West Bengal, India	
Site Address (If any)		
No. of Employees	Teaching = 54, Non-teaching = 8, House-keeping =2, Security =1, Electrician=1, Total = 66	
No. of Shift	1	
E mail id	office.vcfw@gmail.com,	
Contact Person	Dr. Sutapa Ray	
Telephone/Fax	+91 33 2241 8887, +91 33 2241 8889	
Scope	Teaching, Learning and Evaluation processes relating to awarding of Bachelor 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.	
Audit Team	Lead Auditor: Amalesh Kumar Mandal Auditor: Technical Expert	No of Mandays: 1
Starting date of Audit	30.06.2023	
End date of Audit	30.06.2023	
Brief about the organization	<p>Vidyasagar College for Women as a full fledged separate college affiliated to the University of Calcutta was founded in 1960. However, its history went back to 1931 when a separate womens' section of the Vidyasagar College was started to cater to the educational requirements of the women folk of Kolkata. Its classes were held in the morning. The womens' section was temporarily brought to a stop during the second world war. Since 1947, however, expansion in all branches of its activities took place steadily and regularly. New subjects were introduced and a group of dedicated teachers inspired confidence among the students who enrolled in large numbers. Since its foundation in 1960, Vidyasagar College for Women committed itself to carry forward the ideals and principles of Pundit Iswar Chandra Vidyasagar, the great educationist and social reformer of the 19th century. At present the college consists of three campuses.</p> <p>All the three campuses of Vidyasagar College for Women are located at the heart of North Kolkata, the central zone of the Bengal Renaissance movement with the Calcutta University, Presidency College, Sanskrit College, Scottish Church College, Bethune College, the City group of colleges and Victoria College associated with Brahma associations close by. The residential places of the Thakurs, Rammohan Roy, Vivekananda and many other luminaries are within very short distance from our college.</p>	
Purpose of Audit	To verify the implementation of the Energy Management System as per the ISO 50001:2018 Standards Requirement, verification of records for the conformity of the implementation.	

CHANGE DETAIL:

AQC GLOBAL LLC**ISO 50001:2018****Stage 2 Audit Report**

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SUMMARY OF AUDIT**AREA OF IMPROVEMENTS**

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

Non Conformities Raised

0 Minor/Major Non-conformance identified in the Stage 2 audit, details of Non Conformance in F50

Please respond by using your own corrective action form and include the root cause analysis with systemic corrective action. Failure to include root cause analysis with systemic corrective action will result in your responses being rejected by Lead Auditor

Team Leader Declaration (Tick or cross Each Column as per applicability)

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

Recommendation:

√	The quality system complies with the requirements of the reference standard: Congratulations, on the basis of the above summary, Lead Auditor is pleased to put forward a recommendation for Issuance of Certificate. The organization can use the AQC Mark
×	The quality system complies with the requirements of the reference standard with exception of minor NC: Congratulations, Team Leader is pleased to put forward a recommendation for Issuance of the certificate of Organization upon off-site verification of closure of all minor NC within 60 days from the date of Stage 2 audit. Responses to the non-conformances should be submitted to AQC and must include supporting evidence of closure to allow for off-site verification. In responding to the non-conformances, the organization should consider the root cause of the non-conformance and the potential for related issues in other parts of system. If all non-conformances are not closed within 60 days, a full reassessment may be required.
×	Evidence of major non conformities: Organization is not recommended for Issuance of Certificate and at this time. Follow-up audit will be scheduled to allow for on-site verification and closure of all issues within 60 days from the date of Stage 2. Once all non-conformances are closed, the recommendation for Issuance of certification may be recommended. If all non-conformances are not closed within 60 days, a full reassessment may be required.
×	Not Recommended: Organization is not recommended for Issuance of certificate at this time. Full Stage 2 audit is required as the organisation has not implemented the system and process at pace.
<i>Proposed Audit Date for 1st Surveillance Audit 29.06.2024 (mm/dd/yy)</i>	
Sign Off: (Date) 30.06.2023	
AQC Report Submission	Client Acceptance for Report
Name of Team Leader: Amallesh Kr. Mandal Signature: <i>Amallesh Kumar Mandal</i>	Name: <i>DR. SUGATA RAY</i> Sign: <i>Sugata Ray</i> Designation: <i>PRINCIPAL</i>

*Principal*Vidyasagar College for Women
Kolkata-700006

AUDIT CHECKLIST

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 (External and Internal Issues)	C	Identified and included in Manual. (Under clause 4.1 of Doc. Ref. No. ENMS/L1, dtd. 06.06.2022)
4.2 Understanding the needs and expectations of interested parties (Need & Expectation of Interested parties)	C	Identified and included in Manual. (Under clause 4.2 of Doc. Ref. No. ENMS/L1, dtd. 06.06.2022)
4.3 Determining the scope of the energy management system	C	Scope established and included in Manual. (Under clause 4.3 of ENMS/L1 Manual)
4.4 Energy management system	C	Process Flow found established and as per UGC norms.
5 Leadership		
5.1 Leadership and commitment (Ensure Top Management Commitment)	C	Interviewed with Top Management, found committed to communication of respective Energy Policies, Projects and implementation of Energy specific Projects.
5.2 Energy policy (Documented, communicated, availability and Review)	C	Energy Policy established and displayed in notice board. Advise them to display for others stakeholders as well as in Website.
5.3 Organization roles, responsibilities and authorities (Assigned and communicated by Top Management)	C	Defined in Manual and found as per Government protocol.
6 Planning		
6.1 Actions to address risks and opportunities	C	Risk Register found maintain (Doc. Ref. No. EnMS/POT/E-RISK/01), initially found 2 nos Energy risk identified.
6.2 Objectives, energy targets and planning to achieve them (Consistent with Energy Policy, SEU, documented, measurable, communicated and updated)	C	Energy Objectives found established and planned to achieve action(MAP), Projects taken Like "Efficient use of Energy Resources" and monitoring methodology found set to achieve the goal.
6.3 Energy review (Current type of energy use, past and current consumption, documented and updated)	C	Energy review has done based on Meter reading study and kept as documented information. Current list of Energy sources found available including Significant energy sources.
6.4 Energy performance indicators (Documented and updated)	C	Documented in the form of Energy projects.

6.5 Energy baseline (Documented and review periodically and retention)	C	Energy baseline declared as last year Power consumption, accordingly projects taken to review and reduce the Power.
6.6 Planning for collection of energy data (Accuracy and repeatable, documented and retention)	C	Electrical Energy bill statements kept available for further review.
7 Support		
7.1 Resources (Determination of resource required)	C	Found available
7.2 Competence (determine, documented and retain the competence)	C	Training planning and related training records found available. Awareness training conducted by External consultant.
7.3 Awareness (Objective, Policy, Non Conformance of EnMS)	C	Done through training and display
7.4 Communication (What, When, With Whom, How & Who)	C	Done in the form of minutes and display.
7.5 Documented information (Creation, Updating, Control, Retention, External Origin, Storage & Preservation)	C	Control of documented information procedure established.
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.
8.2 Design (Documented, Specification, design consideration)	C	Design part not included
8.3 Procurement (Establish & Implement criteria for evaluating energy performance)	C	Effectively implemented, tendering system applicable in procurement.
9 Performance evaluation		
9.1.1 General (Monitoring, measurement, analysis and evaluation of energy performance and the EnMS)	C	Criteria set against each Project mapping, to monitor the performance and effectiveness of the Energy performance. Current Status: 1.
9.1.2 Evaluation of compliance with legal requirements and other requirements	C	Compliance register found available
9.2 Internal audit (Frequency and Effectiveness)	C	Yearly frequency and Internal Audit plan/records found available, Last Internal scheduled on 23.12.2022.
9.3 Management review (Frequency and input/output)	C	MRM agenda and minutes found available. Last MRM held on 05.12.2023.
10 Improvement		
10.1 Nonconformity and corrective action	C	Procedure established and monitored through project planning.
10.2 Continual improvement	C	Objective and monitoring data found available.

AQC GLOBAL LLC

ISO 50001:2018

Stage 2 Audit Report

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END OF REPORT



DOC NO : QLS/SAMP/08-A/00

TEST REPORT

Name & Address Of the Customer : M/s. VIDYASAGAR COLLEGE FOR WOMEN 39, Sankar Ghosh Lane, Kolkata -700006	Report No.	: QLS/MR/A/23-24/C/301
	Date	: 10.07.2023
	Sample No.	: QLS/MR/A/23-24/301
	Sample Description	: Ambient Air
	Date of Performance	: 03.07.2023-07.07.2023
	Ref No. Date	: Mail Confirmation

Analysis Result

Location : Garden Area		Date of sampling : 02.07.2023-03.07.2023		
Sampling Done by: B.Mondal		Sampling done as per : CPCB Guidelines (Volume-1)		
Environmental Condition : Cloudy & Rainfall				
Sl. No.	Pollutants	Result	LIMIT	METHOD OF TEST REFERENCE
1	Particulate matter (<10µm) in µg/m ³	56	100	IS: 5182 (Part-23)-2017
2	Particulate matter (<2.5µm) in µg/m ³	25	60	USEPA CFR-40,Part-50, Appendix-L
3	Sulphur dioxide (SO ₂) in µg/m ³	6.8	80	IS: 5182 (Part-2)-2001, (RA-2017)
4	Nitrogen dioxide (NO ₂) in µg/m ³	27.2	80	IS: 5182 (Part- 6)-2017
5	Carbon Monoxide (CO) in µg/m ³	664	2000	IS: 5182 (Part- 10) :1999, (RA-2014)
NOTE: Limit as per CPCB notification, New Delhi, 18th November 2009, for Ambient air quality.				

Report Prepared By:

for Qualissure Laboratory Services
Reviewed & Authorized By

Bentmahab Gorai, Chemist
(Authorized Signatory)

-----End of the Report-----

- The results relate only to the item(s) tested.
- This Test Report shall not be reproduced without the permission of Qualissure Laboratory Services.
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DOC NO : QLS/SAMP/08-C/00

TEST REPORT

Name & Address Of the Customer : M/s. VIDYASAGAR COLLEGE FOR WOMEN 39, Sankar Ghosh Lane, Kolkata -700006	Report No. : QLS/MR/A/23-24/C/302 Date : 10.07.2023 Sample No. : QLS/MR/A/23-24/302 Sample Description : Noise Monitoring Date of performance : 03.07.2023-07.07.2023 Ref No. Date : Mail Confirmation
---	---

Monitoring Result of Noise

Sampling Done by : B.Mondal					
Sampling Guideline : As per IS: 9876: 1981 (RA-2001)					
Date of Monitoring	Location	Leq dB (A) Day Time	Limit in Leq dB(A) Day time	Leq dB (A) Night Time	Limit in Leq dB(A) Night Time
02.07.2023- 03.07.2023	Garden Area	54.9	65	44.7	55

Report Prepared By:

for Qualissure Laboratory Services
Reviewed & Authorized By

Benimadhab Gorai, Chemist
(Authorized Signatory)

-----End of the Report-----

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Qualissure Laboratory Services

361, Prantik Pally, 45/361, Bose Pukur Road, Kolkata -700107
Email : qualissure@gmail.com; info@qualissure.com ; Mob.No. 98312 87086 ; 9830093976



DOC NO : QLS/SAMP/08-E/00

TEST REPORT

Name & Address of the Customer: M/s. VIDYASAGAR COLLEGE FOR WOMEN 39, Sankar Ghosh Lane, Kolkata -700006	Report No.	: QLS/MR/S/23-24/C/10
	Date	: 11.07.2023
	Sample No.	: QLS/MR/S/23-24/10
	Sample Description	: Soil
	Sample Location	: Near Garden
	Period of Analysis	: 04.07.2023-10.07.2023
	Sample Collected On	: 03.07.2023
	Ref No. Date	: Mail Confirmation

Analysis Result:

Sl.No.	Test Parameter	Test Method	Result
1.	pH at 25 °C	IS 2720 (Part 26): 1987(RA 2011)	8.60
2.	Electrical Conductivity, $\mu\text{S}/\text{cm}$ at 25 °C	IS 14767 :2000, RA 2016	51
3.	Organic Carbon, %	Soil Analysis (Soil Science society for America) Part II	0.15
4.	Moisture Content, %	IS : 2720 (Part 2) 1973 (RA 2015)	<1
5.	Texture	SOP No. TPM/QLS/E/S/MA Soil & Plant Analysis, C.S.Piper	Sand
	a) Sand, %		88
	b) Silt, %		5
	c) Clay, %		7
6.	Bulk Density, g/cm^3	IS 2720 (Part -29) 1975 RA 2005	1.39
7.	Potassium (as K), in mg/kg	Soil Analysis (Soil Science society for America) Part II	117
8.	Phosphorus (as P), in mg/kg	Soil Analysis (Soil Science society for America) Part II	28.9
9.	Available Sulphur (as S), mg/kg	IS 2720(Part-27): 1977 (RA 2015)	12.6
10.	Calcium (as Ca) in %	Methods of Soil Analysis (Soil Science society for America) Part II	0.27
11.	Magnesium (as Mg) in %	Methods of Soil Analysis (Soil Science society for America) Part II	0.08
12.	Chloride(as Cl) in mg/kg	SOP No. TPM/QLS/E/S/Cl based on Methods of Soil	318
13.	Sodium (as Na) , mg/kg	Soil Analysis (Soil Science society for America) Part II	59

Report Prepared By:

for Qualissure Laboratory Services
Reviewed & Authorized By

Bishnujeeta Banerjee, Chemist
(Authorized Signatory)

—End of the Report—

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Qualissure Laboratory Services

361, Prantick Pally, 45/361, Bose Pukur Road, Kolkata -700107
Email : qualissure@gmail.com; info@qualissure.com ; Mob.No. 98312 87086 ; 9830093976



DOC NO : QLS/SAMP/08-D/00

TEST REPORT

Name & Address Of the Customer : M/s. VIDYASAGAR COLLEGE FOR WOMEN 39, Sankar Ghosh Lane, Kolkata -700006	ULR No.	: TC627123000000905F
	Report No.	: QLS/MR/W/23-24/C/200
	Date	: 08.07.2023
	Sample No.	: QLS/MR/W/23-24/200
	Sample Description	: Drinking Water
	Date of Performance	: 04.07.2023- 08.07.2023
	Sample Drawn On	: 03.07.2023
	Sample Drawn By	: Lab Representative (Mr. J.Sahana)
	Ref No. Date	: Mail Confirmation

Analysis Result

(A) Microbiological Analysis

Sl.No.	Characteristic	Limit as per Drinking Water Standard : IS:10500, 2012Amd. 2	Test Method	Result
1.	E.coli/100ml	Not Detectable	IS 15185-2016	Not Detected
2.	Total Coliform Bacteria/100ml	Not Detectable	IS 15185-2016	Not Detected

(B) Chemical Analysis

Sl.No.	Test Parameter	Test Method	As per Drinking Water Standard: IS:10500, 2012Amd. 1 & 2		Result
			Acceptable Limit	Permissible Limit	
1.	Colour in Hazen Units	IS 3025 (Part 4): 1983 (RA 2021)	5	15	<5
2.	pH Value at 25°C	IS 3025 (Part 11)- 1984 RA: 2019	6.5-8.5	No Relaxation	7.58
3.	Turbidity in NTU	IS 3025 (Part 10)- 1984 RA: 2017	1	5	<1.0
4.	Total Dissolved Solids (TDS) in mg/l	IS 3025 (Part 16): 1984 (RA 2017)	500	2000	168
5.	Calcium(as Ca) in mg/l	IS 3025 (Part 40): 1991(RA 2019)	75	200	26.1
6.	Chloride(as Cl) in mg/l	IS 3025 (Part 32): 1988 (RA 2019)	250	1000	22.6
7.	Iron (as Fe) in mg/l	IS 3025 (Part 53): 1988(RA 2019)	1.0	No Relaxation	0.26
8.	Magnesium(as Mg) in mg/l	APHA 24 th Edition- 2023, 3500 Mg	30	100	13.8
9.	Nitrate (as NO ₃) in mg/l	IS 3025 (Part 34): 1988(RA 2019)	45	No Relaxation	<0.5
10.	Sulphate (as SO ₄) in mg/l	IS 3025 (Part 24): 1986 (RA 2022)	200	400	16.4
11.	Alkalinity (as CaCO ₃) in mg/l	IS 3025 (Part 23): 1986(RA 2019)	200	600	142.5
12.	Total Arsenic(as As) in mg/l	IS 3025 (Part 37): 1988 (RA 2019)	0.01	No Relaxation	<0.01
13.	Total Hardness (as CaCO ₃) in mg/l	IS 3025 (Part 21): 2019	200	600	122.9

Report Prepared By:

for Qualissure Laboratory Services
Reviewed & Authorized By

Soumy Chakraborty, Microbiologist
(Authorized Signatory)

for Qualissure Laboratory Services
Reviewed & Authorized By

Bishupriya Banerjee, Chemist
(Authorized Signatory)

-----End of the Report-----

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