

EP. PERUMAL MANIMEKALAI
COLLEGE OF ENGINEERING
ACCREDITED BY NAAC WITH 'A' GRADE
Koneripalli, HOSUR - 635 117.



Name of the Auditee: D. S. D. Kerpureshmy & S. Reshma **AUDIT CHECKLIST**

Name of the Auditor: D. J. VIJAYKUMAR

Function: CIVIL/ENGR.

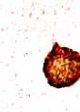
S.No.	Description	Condition (Satisfactory / Not)	Auditor comments
1	Show me your department related procedures / department manual	✓	
2	Show me your regulatory requirements and status of compliance	✓	
3	Show me your list of records	✓	
4	Whether records are stored and preserved properly up to its retention time. Records should not be dumped should be produced within min. time. Should look neat	✓	
5	List one record and ask auditee to produce (Subject allotment sheet, action plan, Attendance, Log book, academic calendar, faculty notes)	NC	
6	Records of faculty performance assessment in terms capabilities (Class control, presentation, communication and fluency, voice clarity, subject knowledge..... Is not evident.	✓	
7	Check whether record has the record legibility and signature at appropriate places for review and approval by HOD's	✓	
8	Check whether record has the record name and record code in the front page.	✓	
9	Awareness on ISO, quality policy, process measures and objectives. Contribution of the staffs to achieve the policy.	✓	
10	Trend charts on objectives and process measures.	✓	
11	Action plan for the objectives.	✓	
12	Continual improvement program.	✓	
13	Check for the departmental review meetings	✓	
14	Check the awareness level on roles and responsibility.	✓	
15	Analysis on data- result analysis (Subject wise, semester wise, Year wise, department wise, faculty wise)	✓	
16	Check for the Improvements made in the department in the passed one year	✓	
17	Analysis on student / feedback from (Parameter wise analysis)	✓	
18	Review of suggestions / complaints received in the feedback forms and action taken against the same	✓	

19	Review of disciplinary actions taken against the staffs.						
20	Motivation of the staffs / Students and support provided by HOD's						
21	Training need Identification for the staffs by the departmental HOD's						
22	Faculty profile - compliance to regularly requirements to be checked.						
23	CAPA reports in case of any problem observed in the departments and corrective actions initiated.						
24	Internal communication records like circulars.						
25	Incase if records are maintained in computers, backup of data to be ensured.						
26	Review of syllabus completion as per the plan. Completion of courses as per the time frame recommended by						
27	Method of selection of question papers (unit test and midterm tests)						
28	Preservation of previous year university exam question papers.						
29	List of formats used in the department and is that controlled.						
30	Review of Infrastructure requirements within the department at defined Internals and provision of the same is not evident. Reference: student answers sheets/ projects/ records are stored in the floor due to lack of subboards in the department.						
31	Housekeeping maintain within the departments.						
32	Identification of equipments						
33	Calibration of equipments. (Internal / external calibration records)						
34	Preventive maintenance of equipments where appropriate.						
35	Adequate no. of Fire Extinguishers in the area.						
36	First aid kits stuffed with necessary Antidotes						
37	Safety gears provided for the students operating equipments.						
38	Start and shut down instructions where appropriate.						
39	Sign boards in the laboratory.						
40	Display of quality policy.						
41	List of consumables used in the Laboratory and maintenance of sufficient stock.						
42	Non conforming materials to be identified quarantined.						
43	Horizontal deployment initiatives						
44	Change made in the system considering Improvements / Improving process performance.						
45	Relevant process charts can be displayed in the laboratory.						

Signature of the Auditee



Signature of the Auditor



Report No:

Function: CIVIL/ENGA

Date: 16/8/22

Auditee: Dr. D. Venkatesh
S. RESHMA

Auditor: Mr. J. Vijayakumar

NON CONFORMANCE

<p>Course information sheet was missing during auditing</p> <p><i>J. Vijayakumar</i></p>	<p><i>[Signature]</i></p> <p>AUD:</p>
AUDITOR:	Std Clause / Doc. Ref:

ROOT CAUSE

S.No.	Potential Root Cause for the Non-Conformance
1.	Course information sheet was available as a soft copy

CORRECTION / CORRECTIVE ACTION:

S.No.	ACTION DESCRIPTION	Respon.	T.Date	Sts. Corr
1.	print out copy of course information sheet is updated in the course file	Faculty	Immediate	close

PREVENTIVE ACTION:

S.No.	ACTION DESCRIPTION	Respon.	T.Date	Sts. Com
1.	Course information sheet need to be updated initially in course file before the commencement of the class.	Faculty	Immediate	close

Resource Requirements if any :

Effectiveness of the corrective action taken :

Verified by and closed on :

Verified

[Signature]

Report No:

Function:

Date: 16/8/2022

Auditor: Dr. J. V. Jayakumar

Auditee: Dr. D. Zeal
S. Reema

NON CONFORMANCE

Content beyond syllabus - Not attached the description in the course file.

AUDITOR: J. V. Jayakumar

Std Clause / Doc. Ref:

AUDI

ROOT CAUSE

S.No.	Potential Root Cause for the Non-Conformance
1.	Soft copy of the content beyond syllabus is available

CORRECTION / CORRECTIVE ACTION:

S.No.	ACTION DESCRIPTION	Respon.	T.Date	Sts. Corr
1.	Hard copy of the content beyond syllabus attached immediately to the course file and verified by HOD.	Faculty	Immediate	closed

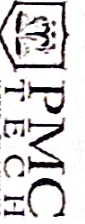
PREVENTIVE ACTION:

S.No.	ACTION DESCRIPTION	Respon.	T.Date	Sts. Com
1.	Content beyond the syllabus need to attached and mandatory before the commencement of the class.	Faculty	Immediate	closed

Resource Requirements if any :

Effectiveness of the corrective action taken :

Verified by and closed on :



PERUMAL MANIMEKALAI
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 Kovilpatti, TIOSUR - 635 117.



Name of the Auditee: **Dr. K. Kalaiselvan,**
Dr. S. Mahendran,

Name of the Auditor: **Mrs. M. Dukitha**

AUDIT CHECKLIST

Function: **EEE/Engg.**

S.No.	Description	Condition (Satisfactory / Not)	Auditor comments
1	Show me your department related procedures / department manual	✓	
2	Show me your regulatory requirements and status of compliance	✓	
3	Show me your list of records	✓	
4	Whether records are stored and preserved properly up to its retention time. Records should not be dumped should be produced within min. time. Should look neat	✓	
5	List one record and ask auditee to produce (Subject allotment sheet, action plan, Attendance, Log book, academic calendar, faculty notes)	NC	
6	Records of faculty performance assessment in terms capabilities (Class control, presentation, communication and fluency, voice clarity, subject knowledge..... Is not evident.	✓	
7	Check whether record has the record legibility and signature at appropriate places for review and approval by HOD's	✓	
8	Check whether record has the record name and record code in the front page.	✓	
9	Awareness on ISO, quality policy, process measures and objectives. Contribution of the staffs to achieve the policy.	✓	
10	Trend charts on objectives and process measures.	✓	
11	Action plan for the objectives.	✓	
12	Continual improvement program.	✓	
13	Check for the departmental review meetings	✓	
14	Check the awareness level on roles and responsibility.	✓	
15	Analysis on data- result analysis (Subject wise, semester wise, Year wise, department wise, faculty wise)	✓	
16	Check for the improvements made in the department in the passed one year	✓	
17	Analysis on student / feedback from (Parameter wise analysis)	✓	
18	Review of suggestions / complaints received in the feedback forms and action taken against the same	✓	

19	Review of disciplinary actions taken against the staffs.			
20	Motivation of the staffs / Students and support provided by HOD's		✓	
21	Training need identification for the staffs by the departmental HOD's		✓	
22	Faculty profile - compliance to regularly requirements to be checked.		✓	
23	CAPA reports in case of any problem observed in the departments and corrective actions initiated.		✓	
24	Internal communication records like circulars.		✓	
25	Incase if records are maintained in computers, backup of data to be ensured.		✓	
26	Review of syllabus completion as per the plan. Completion of courses as per the time frame recommended by		✓	
27	Method of selection of question papers (unit test and midterm tests)		✓	
28	Preservation of previous year university exam question papers.		✓	
29	List of formats used in the department and is that controlled.		✓	
30	Review of infrastructure requirements within the department at defined Internals and provision of the same is not evident. Reference: student answers sheets/ projects/ records are stored in the floor due to lack of supboards in the department.		✓	
31	Housekeeping maintain with in the departments.		✓	
LABORATORY				
32	Identification of equipments		✓	
33	Calibration of equipments. (Internal / external calibration records)		✓	
34	Preventive maintenance of equipments where appropriate.		✓	
35	Adequate no. of fire Extinguishers in the area.		✓	
36	First aid kits stuffed with necessary Antidotes		✓	
37	Safety gears provided for the students operating equipments.		✓	
38	Start and shut down instruction where appropriate.		✓	
39	Sign boards in the laboratory.		✓	
40	Display of quality policy.		✓	
41	List of consumables used in the laboratory and maintenance of sufficient stock.		✓	
42	Non conforming materials to be identified quarantined.		✓	
43	Horizontal deployment initiatives		✓	
44	Change made in the system considering improvements / Improving process performance.		✓	
45	Relevant process charts can be displayed in the laboratory.		✓	

Signature of the Auditee

Signature of the Auditor

Report No:

Function: EEE/Engg.

Date: 18.8.2022

Auditor: Mrs. M. Dukitha

Auditee: Dr. K. Kalaiselvan
Dr. S. Meherthan

NON CONFORMANCE

Answer key not available - Mrs. S. Meenakumasi

AUDITOR: *[Signature]* Std Clause / Doc. Ref: *[Signature]*
AUD

ROOT CAUSE

S.No.	Potential Root Cause for the Non-Conformance
1.	Answer key is available in the form of soft copy.

CORRECTION / CORRECTIVE ACTION:

S.No.	ACTION DESCRIPTION	Respon.	T.Date	Sts. Corr
1.	Hard copy of answer key was updated in the course file and authenticated by HoD.	Faculty	Immediate	closed

PREVENTIVE ACTION:

S.No.	ACTION DESCRIPTION	Respon.	T.Date	Sts. Com
1.	Answer key is to be submitted along with the question paper during submission.	Faculty	Immediate	closed

Resource Requirements If any :

Effectiveness of the corrective action taken :

Verified by and closed on :

Verified
[Signature]

Report No:

Function: EEE/Engg.


Date: 18.8.2022

Auditee: Dr. K. Kalaiselvan
Dr. S. Mahendran

Auditor: Mrs. M. Dukitha

NON CONFORMANCE

Assignment marks not updated in the log book - Mrs. G. Shasikala.

AUDITOR: 

Std Clause / Doc. Ref:


AUDI

ROOT CAUSE

S.No.	Potential Root Cause for the Non-Conformance
1.	Assignments are evaluated but not updated in the log book.

CORRECTION / CORRECTIVE ACTION:

S.No.	ACTION DESCRIPTION	Respon.	T.Date	Sts. Corr
1.	Assignment marks entered in the log book and verified by HoD.	Faculty	Immediate	closed

PREVENTIVE ACTION:

S.No.	ACTION DESCRIPTION	Respon.	T.Date	Sts. Corr
1.	Assignment marks should be entered after the evaluation	Faculty	Immediate	closed

Resource Requirements if any :

Effectiveness of the corrective action taken :

Verified by and closed on :

