PROCEDURE: OAP 01

PROCEDURE FOR DOCUMENT CONTROL

Objective & Scope:

This procedure describes the numbering of procedures, Work instructions, Forms, records and plans used by the Institution and to describe the method adopted to review and approve documents to amend, distribute and recall such documents pertaining to the Quality system.

HOD's (functional)				
Activities				
 Controlling Stamping "CONTROLLED COPY" on the amendments are entered in the amendment. Stamping "CONTROLLED COPY "on the entered in the amendment sheet. The stamp shall be any colour other than be the stamp shall be the stamp shall be any colour other than be the stamp shall be any colour other than the stamp shall be the stamp shall be any colour other than the stamp shall be the stamp sha	at sheet. The content page of the procedure manual are plack.			
Numbering				
 Quality Manual ➤ Chapters in the manual are identified by two letters "QM" followed by numbers. ➤ There are 6 main sections in the manual and thus numbered from "QM" 0 to "QM" 6 ➤ The individual explanations are given in the "QM" 0.1 tables of contents. 				
Procedures ➤ Each procedure is denoted by letters "QA" ➤ The numbers varies as per number of proc Example: QAP 1, QAP 5	· · · · · · · · · · · · · · · · · · ·			
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QAP- 01 → Procedure for document control Cont......

Responsibility: QMR

Work Instructions

- 1. Two letters W1, followed by another two numbers denote each work instruction.
- 2. The first number is the same number as the relevant procedure where the work instruction is mentioned.
- 3. The second number varies as per work instruction in that procedure. Example: WI 1/1 WI 2/4

Forms/ Plans / Lists/ Flow Charts List

1. Following letters identify as:

"F" - Form
"PL" - Plan
"L" - List
"FL" - File
"B" - Book
"CL" - Check List

- 2. The letters are followed by two numbers, first number is the same number as the relevant procedure.
- 3. The second number varies as per work instruction in that procedure. Example: FL/1/1, L/2/2, F/1/1
- 4. Master List of all documents used in the system is given in L/1/1, which also indicate the distribution.

Document Amendment

- ➤ Documents could be prepared or suggested by members of the Management Review committee.
- ➤ All documents are reviewed by the Management Representative and approved by the Principal.
- A new page is issued after 5 minor amendments. A minor amendment is a change not exceeding five words at a time.
- Manual will be re-issued after a major structural or technological change.

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QAP- 01 → **Procedure for document control Cont......**

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Minor Amendment

All relevant documents will be recalled by the Management Representative, enter the minor amendment in each document, authorize the amendment by signing and return the document to the respective document owner using F/1/1

Issuing a new page/ document

- The new page /document will be reviewed and approved by the same officers who initially reviewed and approved the original page/ document.
- ➤ The management Representative will issue a new page / document using Form F/1/2 and all obsolete pages / documents are recalled by using Form F/1/2
- The Management Representative will control all data used in the system. Reference: F/1/1, F/1/2

External Documents Process

- 1. External documents used in the system are listed in this L/1/2
- 2. Once a year all documents are scrutinize for the validity of existing documents by contracting the relevant external authorities.
- 3. If any revision has been carried out to the external document, acquire the documents.
- 4. Study the document and if required provide necessary resources and training to implement the changes.
- 5. Change the documents as per document changing procedure. Reference: L/1/2

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Procedure : L 1/1
Master List of Document

Document No	Document	Responsibility	Location	Revision No	Issue Date
QM 1	Quality Manual Original	QMR	QMR		
QM 2	Copy 1	Principal	Principal		
QM 3	Copy 2	Vice Principal	Vice Principal		
QM 4	Copy 3	Registrar	Registrar		
QM 5	Copy 4	QMA	QMA		
QM 6	Copy 5	Quality Auditor	Quality Auditor		
QM 7	Сору б	HOD Trade	HOD Trade		
QM 8	Copy 7	HOD Engineering	HOD Engineering		
QM 9	Copy 8	HOD Commerce	HOD Commerce		
QM 10	Copy 9	Librarian	Library		
QM 11	Copy 10	Carrier Guidance Officer	Carrier Guidance Section		
QM 12	Copy 11	TVEC	TVEC		
QM 13	Copy 12	HOD Diploma	HOD Diploma		
QAP 1	Procedure for Document Control	QMR	MR/P/VP/R/ HODs		
QAP 2	Procedure for Control of Records	QMR	MR/P/VP/R/ HODs		
QAP 3	Procedure for Internal Quality Audit	QMR	QA/MR		
QAP 4	Procedure for Control of Non - Conformers	QMR	P/ HODs/R		
QAP 5	Procedure for Corrective Action	QMR	P/VP/ HODs/R		
QAP 6	Procedure for Preventive Action	QMR	P/VP/ HODs/R/ All Staff		

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Procedure: L 1/1 → Master List of Document Cont.......

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CL 01	Procedure Checklist	QMR	P/VP/	
	for Student		HODs/R/Relevant	
	Enrolment		Officers	
CL 02	Procedure Checklist	QMR	P/VP/	
	for Training Delivery		HODs/Academic	
	Process		Staff	
CL 03	Procedure Checklist	QMR	P/HODs/R/	
	for Training		Relevant Staff /	
	Equipment		PS	
	Maintenance			
CL 04	Procedure Checklist	QMR	P/R/PS	
	for Environment			
	Infrastructure			
	Maintenance			
CL 05	Procedure Checklist	QMR	P/VP/	
	for Academic Staff		HODs/Academic	
	Concerns		Staff	
CL 06	Procedure Checklist	MR	P/R	
	for Financial			
	Management			
CL 07	Procedure Checklist	MR	P/VP/HODs/	
	for Student Final		Academic Staff/	
	Exams & Continuous		R/Relevant	
	Assessment		Officers/MIS	
CL 08	Procedure Checklist	MR	P/VP/HODs/	
	Update NCS &		Academic Staff	
	Curricula			
CL 09	Procedure Checklist	MR	P/VP/HODs/R/	
	for Customer		All Staff	
	Satisfaction			

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Procedure: L 1/2
Title: List of External Document

##	Document No	Document	Source of Docume nt	Responsibility	Location	Revision Date/ Check Validation
01	ISO 9001:2008	Quality Management System Requirements	SLSI	QMR	QMR	December every year
02	SLS IWA 2:2007	Guidelines for the application of ISO 9000: 2000 in Education	SLSI	QMR	QMR	Same
03	Accreditation Manual	NVO Level 1-4 (Skill Standards Curriculum Outline Trainer Guides) Motor Mechanic Aluminum Welding Electrical Electronic Machine Plumber Air Condition	TVEC	HOD Trade HOD Trade HOD Trade HOD Trade HOD Trade HOD Trade HOD Trade HOD Trade	Relevant Academic Staff	Same
04	Final result Sheet	Result Sheet (Final)		Registrar	Record Room	Nil
05	Curriculum NCECP	Curriculum Automotive Electrical Welding Carpentry Aluminum Masonry Fitter Machines Plumbing		HOD	Library	Nil
06	Curriculum NCECP	Supporting Subjects Mathematics Science Mechanical Drawing Communicatio n Skills English Computer Literacy		HOD	Library	Nil

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Procedure : L 1/2

Title: List of External Document

07	Curriculum for Diploma courses - in Technology	Curriculum Ouantity Surveying Telecommunicati on Technology Mechatronic Technology Electronic Technology Electronic Technology CNC Technology Automobile Technology Pneumatic & Hydraulic Technology		HOD Diploma	Library	Nil
07	Curriculum for other Certificate courses - in Technology	Curriculum Draughtsman ship Quantity Surveying (Full Time)		HOD	Library	Nil
08	Curriculum for other Certificate courses –in commerce	Curriculum NCE NCAT Typing & Shorthand Secretarial Practice		HOD	Library	Nil
09	Financial Regulation	Financial Regulations	Ministry of public Administration, Other Govt. Org. &	Registrar	Registrar	Nil
10	Circulars	Circulars	Ministry of public Administration, Other Govt. Org. & 	Registrar	Registrar	Nil

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PROCEDURE: OAP 2 PROCEDURE FOR CONTROL OF RECORDS

Objective &Scope:

This procedure describes the method used by the institute to control quality records for filing, maintaining, and retention of such records.

Responsibility: Management Representative- Over all HODs – Functional

Process:

- \triangleright HOD's in consultation with the management representative identify necessary quality records. (Given in list L/2/1)
- > It is the responsibility of individual persons to control their identified quality records.
- A file will opened for each record, and the file will have a unique identity code/number.
- > The records will be collected on to the file.
- ➤ When a new file is opened, it will have the same identity code / number as the old file.(The old file be dealt according to paragraph 6)
- ➤ Retention period of the file will be decided by the relevant head of department and will be mentioned in the list L/2/1
- > Records, which are required to be kept more than one year will be kept at an identified record storage area.
- > These records are preserved by storing them in a manner to prevent losses and damages.
- These records are stored at a designated place which would be easily retrieved.
- After specified retention period the records are disposed of by suitable means.

Controlling of electronic data

- (i) The entering, changing, erasing and retrieving of electronic data and records are controlled by passwords are known to the individual who uses the data and special data pass words are with individual and to the principal.
- (ii) Back up data and records are maintained on a weekly basis and maintained at a secure location.
- (iii) Retention period of electronic data and records are one year or dependent upon contractual requirement.

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Procedure : L 2/1

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Title: List of Quality Records

Record Number	Responsibility	Location	Filling Identification	Retention Period
L/1/1	QMR	QMR	Master List of Document	5 Year
L/1/2	QMR	QMR	List of External Document	3 Year
F/1/1	QMR	QMR	Form for Minor Amendments	3 Year
F/1/2	QMR	QMR	Form for Major Amendments	3 Year
L/2/1	QMR	QMR	List of Quality Records	3 Year
L/3/1	Principal	Office	List of Audit Team	3 Year
F/3/1	QMR/QA	QMR/QA	Audit Matrix	5 Year
PL/3/1	QA	QMR/QA	Annual Audit Plan	3 Year
F/3/2	QA	QMR/QA	Audit Notification	3 Year
F/3/3	QA	QMR/QA	Audit Report	3 Year
F/3/4	QA	QMR/QA	NCR Report	3 Year
F/4/1	R	Exam Unit	Internal Exam Application Form	3 Year
F/4/2	R	Exam Unit	Final Exam Application Form	3 Year
GP/C/4	R	Exam Unit	Internal & Final Exam File	3 Year
F/5/1	AD	AD	Course Committee Decision	2 Year
F/5/2	D/AD/R/HOD	QMR	Corrective Action Report	3 Year
F/6/1	D/AD/R/HOD	QMR	Preventive Action Report	3 Year
GP/C/3/2/1	D/AD/R	Student Affair Unit	Student Enrolment Interview & Registration	5 Year
GP/C/3/2/2	D/AD/R	Student Affair Unit	Course & Student Details	5 Year
GP/C/3/2/6	D/AD/R	Student Affair Unit	Appointment of Interview Panel	3 Year
GP/C/3/2/7/G S7	D/AD/R	Student Affair Unit	Request Form For Start Courses	3 Year
GP/C/3/2/3	D/R	Student Affair Unit	Conform Certificate for Training	3 Year
GP/C/3/2/5	D/AD/R	Student Affair Unit	Student Discipline	3 Year
GP/C/3/RGN	D/R	Student Affair Unit	Student Personal File	5 Year
GP/C/5/1	AD/HOD	AD/HOD	Master, Class, Personal Time Table	5 Year
GP/C/5/2	HOD/ACS	AD/HOD	Year Plan, Semester Plan, Course Plan, Curriculum	5 Year
GP/C/5/3	HOD/ACS	HOD/ACS	Scheme of Work & Lesson Plan	3 Year
GP/C/5/4	HOD/ACS	HOD/ACS/ Exam Unit	Assessment Plan, Marks & Question Papers	3 Year

Procedure : L 2/1 ⇒ List of Quality Records Cont......

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Record Number	Responsibility	Location	Filling Identification	Retentio n Period
L/3/1	R/ACS	Office/Work Shop	Equipment List	10 Year
F/3/1	R/ACS	Work Shop	History Card	10 Year
PL/3/1	R/ACS	Office/ Work Shop	Machines Service Plan	10 Year
GP/C/5/3/SS	R/OM	R	Service Schedule	5 Year
PL/4/1	R	R/PS	Annual Training Plan	3 Year
R/4/1	PS	PS	Damages Report	3 Year
L/4/1	D	Office	List of Fire Fighters	5 Year
FL/5/2	D/AD	Office	Performance Appraisal Forms	5 Year
ATP/5/1	D/AD	Office	Annual Training Plan	3 Year
FL/5/2	D/AD	Office	Staff Training Evaluation Records	3 Year
FL/5/3	D/AD/HOD	AD	Visiting Staff Evaluation Forms	3 Year
PL/6/1	D/R	Office	Annual Budget Plan	3 Year
FL/6/2/PI	D/R	Office	Purchase Item	5 Year
GP/C/7 (Decision)	QMR	QMR	MR Meeting Decisions	3 Year

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PROCEDURE: OAP 3

PROCEDURE INTERNAL QUALITY AUDITING

Objective & Scope:

This procedure describes the method used by thefor procedure for internal auditing.

Responsibility: Audit coordinator

Process:

- ➤ Audit coordinator prepare annual audit plan using important of each sections and previous audit report.
- ➤ The annual audit plan shall indicate the month and the corresponding sections and obtain the approval of the Principal.
- Prior to each audit the Principal shall select the audit team.
- ➤ The team members shall not be from the relevant department audit.
- ➤ The scope will be identified from the and to audit at least once a year all relevant elements in the department.
- ➤ The audit coordinator will inform the audit team and audit the scope and dates of audits.
- ➤ The auditors shall study the following documents,
 - Quality manual
 - Review Procedures
 - Review work instructions
 - Review Forms and records
 - Previous NCR's
- The team shall prepare an audit trail to allocate responsibilities and conduct the audit.
- ➤ The auditor shall prepare the audit report F/15/3 along with the NCR's form and the internal audit or write to the section head about the proposed corrective actions and the date of completion of such actions.
- > The audit coordinator shall forward a summary audit reports and NCR's to the management review committee.
- The audit coordinator shall schedule follow up audits based on the importance of the activity and the status of NCR's.
- > During the follow up audit effectiveness of the corrective action is determined the NCR shall be reviewed by the management review committee.

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PROCEDURE: OAP 04 CONTROL OF NON- CONFORMANCE

Objective & Scope:

This	procedure	describes	the c	ontrol (of	nonconformances	which	occur	as	results	of	learner	assessmen	ıt.
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Responsibility: Principal, Registrar, HODs, QMR

Process:

- > Student can apply for re-correction by using form.
- > Send the re-correction applications to thefor final exam.
- > Student fails any subject/ subjects for internal examination which conduct by the should apply by form & re-set for repeat exam.
- ➤ Those who fail more than three subjects should exam hole exam by form & should sit for whole subjects.
- > Student should complete exam within three consecutive exams.
- > Student sat for final examination which conducted by the examination branch in & fail any subject should re-sit in following year session examination. Apply by application.
- ➤ Those who failed more than three subjects should apply and sit for the whole examination following year.
- > Application form which for internal exam are kept in file No. FL/04/1
- Final exam forms are sent to the examination branch of the
- > Student who not competent in relevant qualification package can either re assess and if request a record of achievement in issued, listing the competency units achieved. (For NVQ).

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PROCEDURE : OAP 5

PROCEDURE FOR CORRECTIVE ACTION

Objective & Scope:

This procedure describes the method used by the for make the corrective action.

Responsibility: Principal, Vice Principal, Registrar, HODs, QMR

- 1. Corrective actions needed to eliminate the non-conformities can be identified through,
 - (i.) Reports forwarded by the staff of the institute.
 - (ii.) Customer complaints and customer feed backs.
 - (iii.) Analysis of data.
 - (iv.) Non conformity report forwarded by the internal auditor.
- 2. The corrective actions will be discussed in the Management Review Meeting held in every three months
 - ➤ The MR meeting scheduled in a certain day under an agenda by Management Representative
 - ➤ The members of the MR meeting panel are Principal, Vice Principal, Registrar, QMR, QA, QMA, HODs.
 - The meeting minutes are recorded and distributed by MR, will be kept in GP/C/7/MRM Minutes.

Corrective action needed for non-conformities found in internal audits will be dealt according to the documented audit procedure.

- 3. In all other situations corrective actions report (F/5/1) will be filled by Vice Principal & collected by QMR.
- 4. QMR in consultation with relative HODs analyze the non-conformity to decide on an Action plan with identified responsibility to eliminate the root causes of the non Conformity.
- 5. After recording the actions decided with target dates and responsible officers for Implementing in form F/5/1, Principal approval is obtained.
- 6. The approved corrective action report (F/5/1) is then forwarded to the relevant Officers for implementations.
- 7. QMR will review the effectiveness of the implementation of the corrective actions and will forward report of the status of the corrective actions to the Management Review Meeting.

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PROCEDURE : OAP 6 PROCEDURE FOR PREVENTIVE ACTION

Objective	&	sco	pe:
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This procedure describes the method used by the for Procedure for Preventive action by academic staff to ensure the root causes of potential non-conformities are identified and eliminated in order to prevent their occurrence in all processes.

Responsibility: Principal, Vice Principal, Registrar, HODs, QMR

Process:

1. Collect following data and analyze once in a term/Three month by following officers to identify future adverse conditions and needed improvements in the institute performance.

Student's performance
 Lecturer's performance
 Customer complaints and customer feedback report
 Internal & External audit report
 Suggestion box
 Relevant HOD
 QMR
 Principal

- 2. Relevant officers should analyse the above data/information and identified any trends.
- 3. For the identified trends forward a preventive action report to the Management Representative using Form F/19/1.
- 4. Management Representative in consultation with relevant departmental heads will identify suitable preventive actions to eliminate potential non-conformities and record in F/19/2.
- 5. Director and Management Representative allocate responsibilities with target dates for completion of the preventive actions to the relevant personnel for implementation.
- 6. Director and Management Representative will review the effectiveness of implementation of preventive actions.
- 7. Management Representative will forward a report of status of the preventive actions to Management review meeting.

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PROCEDURE CHECK LIST 1 STUDENT ENROLMENT

Objective & scope:

Responsibility: Principal, Vice Principal, Registrar, HODs, QMR, Officer - Student Affairs, Officer - MIS.

Activities for Checklist

Serial No.	Activity	Yes No		Remarks
)		
01.	Check whether the Principal has received the courses	Yes	No	
	which able to conduct from the head of sections.	res	No	
02.	Check whether the director has reported those courses to			
	the and kept the copy in file GP/C/3	Yes	No	
03.	Check whether the government gazette nonfiction			
	regarding student enrolment for coming year and news			
	papers & filling a copy of the government gazette	Yes	No	
	notification in career guidance office.			
04.	Check whether received applications are entered into the	T 7	•	
	MIS.	Yes	No	
05.	Check whether entered applications into MIS directly			
	send to the Student Affairs unit to make separate files	Yes	No	
	course wise.			
06.	Check whether applicant list creates using MIS by each			
	course and handover to HODs along with Applications to	Yes	No	
	Qualify for the Interview / Test.			

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Serial No.	Activity	Yes No(-	Remarks
07.	Check whether HODs select the students for the Interview / Test	Yes	No	
08.	Check whether Interview list and Interview Informing Letters to be created by MIS and handover to the Student Affairs Unit	Yes	No	
09.	Check whether appoint Interview panels by Principal.	Yes	No	
10.	Check whether conduct interview and select students.	Yes	No	
11.	Check whether the selected student list handed over to the student affairs unit after the approval of Principal.	Yes	No	
12.	Check whether the selected students are informed for the Registration (Registration calling letters are created by MIS).	Yes	No	
13.	Check whether a file is opened for each student as file No. GP/C/3/ (Registration No) and kept details in Registration book. (after being registered in MIS)	Yes	No	
14.	Check whether the students are being issued ID and Record book.	Yes	No	
15.	Check weather students are informed to report for studies.	Yes	No	

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PROCEDURE CHECK LIST 02 TRAINING DELIVERY PROCESS

Obi	ective	&	SCO	pe:

This procedure describes the method used by the for training delivery process.

Responsibility:

Principal, Vice Principal, HODs, Lectures, Instructors and Demonstrator

Activities for Checklist

Serial No.	Activity		s / (\$	Remarks
01.	Check whether Vice Principal prepare Master Time			
	Table, Class & Personal Time Table , with the help of HOD's.	Yes	No	
02.	Check whether the above time table available at the or the beginning of the programme kept that records in GP/C/5/1	Yes	No	
03.	Check whether resources /class rooms allocated according to time table.	Yes	No	
04.	Check whether year plan/ course plan or curriculum for NVQ/ and kept that record in file No GP/C/5/2 (Plan/ Semester Plan/Course Plan/ Curriculum)	Yes	No	
05.	Check whether scheme of work available T1 & lesson plan available T2 (Theory & Practical) kept that records in File No.GP/C/5/3	Yes	No	
06.	Check whether copy of above document has been kept with section head.	Yes	No	
07.	Check whether teaching aids are prepared.	Yes	No	

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Procedure check list 02- Training Delivery Process continued....

Serial No.	Activity		s /	Remarks	
08.	Check whether teaching aids and machines are sufficient as per curriculum.	Yes	No		
09.	Check whether consumable item have been ordered on time using requisition Note.	Yes	No		
10.	Check whether maintain teachers record books / student record books & attendant registers by staff members	Yes	No		
11.	Check whether curriculum has been properly followed.	Yes	No		
12.	Check whether monitor teachers record book & reviewed by Vice Principal/HOD.	Yes	No		
13.	Check whether continuous assessments plan, assessment criteria for practical question papers prepared by academic members for every subject & kept that record in file No. GP/C/5/4	Yes	No		
14.	Check whether continues assessment conducted and marks are recorded in CA1 and kept in file no. GP/C/5/4	Yes	No		
15.	Check whether original mark sheet (CA1) sent to the section head for signature then handover to the examination unit.	Yes	No		

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PROCEDURE CHECK LIST 03 TRAINING EQUIPMENT MAINTENANCE

Objective & Scope:

This procedure describes the preventive and breakdown maintenance of laboratory and workshop equipment.

Responsibility:

Principal, Registrar, HOD's and Relevant Academic Officers, Officer - Maintenance

Activities for Checklist

Seri al No.	Activity	Yes No(Remarks
01.	Has the institute determined and identified laboratory equipment and workshop equipment needed to support the teaching learning process.	Yes	No	
02.	Are the equipment listed in L/3/1 (inventory) and located as specified in the list	Yes	No	
03.	Is history cards opened as specified in the F/3/1	Yes	No	
04.	Is the prevention and breakdown maintenance system of laboratory equipment and workshop equipment determined and established	Yes	No	
05.	Check whether prepared machine servicing plan (Pl/3/1) using past experience and the machine manufactures recommendation by relevant academic staff officer	Yes	No	
06.	Are services been done as per the instructions given in the plan (PL/3/1)	Yes	No	
07.	Check whether the services done entered in the history card.	Yes	No	
08.	Check whether inform break down to principal /Vice Principal through maintenance officer by academic staff officer.	Yes	No	
09.	Has the maintenance officer informed when an equipment of machine broken down or services to be done.	Yes	No	
10.	Has the maintenance officer maintained a service schedule & repairing schedule and kept it file no. GP/C/5/3/SS	Yes	No	
11.	Check whether the technical committee is appointed by the Principal.			

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Procedure Check list 03 – Training Equipment Maintenance Continued...

Serial No.	Activity	Yes / No(s)		Remarks
12.	Check whether the committee makes recommendation to the Principal whether repair can be done by the College or as to be given tofor repairs.	Yes	No	
13.	Check whether the maintenance officer prepared an ordering and purchasing plan for purchasing of equipment part according to the recommendation of technical committee.	Yes	No	
14.	Check whether the plan is implemented and performance and details of services carried in the equipment history card. F/3/1	Yes	No	

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PROCEDURE CHECKLIST 04 ENVIRONMENT/INFRASTRUCTURE MAINTENANCE

Objective & Scope :

This procedure describes the house keeping activities of the Institute Premises, the maintenance of the buildings and safety.

Responsibility:

Principal, Registrar, Premises Supervisor

Activities for Checklist

Serial No.	Activity	Activity Yes / No()		Remarks
01.	Check whether the Registrar prepared Annual Cleaning Plan (PL/4/1) with the help of premises officer.	Yes	No	
02.	Check whether the registrar issued duty list to Field Attendance	Yes	No	
03.	Has the floor being swept daily, Toilets, bathrooms, wash basins cleaned daily using detergents	Yes	No	
04.	Has Bins are kept at relevant places	Yes	No	
05.	Has Garden, roadway, e cleaned daily and Watering of plants daily	Yes	No	
06.	Has Grass is trimmed weekly and Watering of plants daily	Yes	No	
07.	Has Ceiling, fans, windows, window panels and walls cleaned monthly	Yes	No	
08.	Has an electrical appliances line, swihes e checked and reported monthly to Principal by premises officer.	Yes	No	
09.	Check whether the premises officer once in three months the building facilities inspected	Yes	No	
10.	For any damages and enters in the register R/4/1	Yes	No	
11.	Check whether the premises officer prepared report about damages then forward technical committee through Principal.	Yes	No	
12.	Check whether technical committee took necessary action for above matters.	Yes	No	

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13.	Has the institution identified type of fire extinguishers, required and their location	Yes	No	
14.	Are the fire extinguishers inspected & maintained.	Yes	No	
15.	Has the fire evacuation drills are conducted once a year.	Yes	No	

Procedure Check list 04 - Environment/Infrastructure Maintenance Continued.....

Serial	Activity	Yes	s /	Remarks		
No.		No(No(
)				
16.	Has a team being trained as fire fighters and listed out	Yes	No			
	them L/4/1					
17.	Has safety rules and guidance given to students.	Yes	No			
18.	Has the health and safety plan prepared as PL/4/1	Yes	No			
19.	Has the plan being implemented.	Yes	No			

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PROCEDURE CHECKLIST 05 ACADEMIC STAFF CONCERNS

Objective & Scope

This describes the way how to improve the quality of academic process by enhancing academic staff performances.

Responsibility: Principal, Vice Principal, HODs, Lectures, Instructors and Demonstrator

Activities for Checklist

Serial No.	Activity	Yes No		Remarks
01.	Has the Principal /Vice Principal determined the necessary competency of academic staff.	Yes	No	
02.	Has the appraisal process being done as per instructions.	Yes	No	
03.	Have the Principal /Vice Principal identified the training needs using performance appraisal & other relevant sources.	Yes	No	
04.	Check whether performance appraisal form is available.	Yes	No	
05.	Check whether the Principal conduct performance appraisal of academic staff using appraisal system once a year	Yes	No	
06.	Check whether the appraisals are recorded in the file No FL/5/1	Yes	No	
07.	Check whether the evaluation particulars with recommendations are available with the Principal.	Yes	No	
08.	Check whether the Principal has informed to the staff members about their weaknesses	Yes	No	
09.	Has the annual training needs forwarded to Principal (Research &Development) and record in format No. ATP/05/1	Yes	No	
10.	Has whether the training planned being received from Principal R & D.	Yes	No	
11.	Has whether training plan being implemented.	Yes	No	

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12.	Check whether staff training programmes of more than	Yes	No	
	two days will be evaluated and record in FL/05/2			

Procedure Check list 05 - Academic Staff Concerns Continued..

Serial No.	Activity	Yes No(-	Remarks
13.	Does academic staff keep and check following documents. • Assignments / tutorials • Practical Report • Daily diaries /Record Book • Project report • Technical Drawings • Models and CD/Floppy disc • Attendance Registers	Yes	No	
14.	Does advertise in gazette calling for visiting staff	Yes	No	
15.	Check whether after applications received from pending visiting applicants, recruit them according to the rules and regulations of interviewing their qualifications	Yes	No	
16.	Check whether the Principal /Vice Principal conduct evaluation system for evaluates visiting staff.	Yes	No	
17.	Check whether the evaluation forms is available & kept it FL/05/3	Yes	No	
18.	Check whether the evaluation forms are being used.	Yes	No	
19.	Has Vice Principal and relevant HODs done the evaluation.	Yes	No	
20.	Check whether finding of evaluation forwarded by Vice Principal to Principal.	Yes	No	

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PROCEDURE CHECKLIST 06 FINANCIAL MANAGEMENT

Objective& Scope

This procedure describes the method used by the to do the necessary Finance Management

Responsibility: Principal, Registrar

Activities for Checklist

Serial No.	Activity	Yes No		Remarks
01.	Check whether annual budget committee has been appointed by the Principal.	Yes	No	
02.	Check whether the committee is headed by the Principal.	Yes	No	
03.	Check whether the committee prepared annual budget plan before starting year and decisions are recorded in the FL/6/1 & sendfor approval.	Yes	No	
04.	Check whether approval has received from	Yes	No	
05.	Check whether following financial expenditure is reported monthly & quarterly. 1. Particulars of cash book 2. Financial & performance report. 3. Expenditure report 4. Statement of confirming the balance of cash book 5. General deposit report 6. Bank reconciliation reports	Yes	No	
06.	Has the approval for petty cash being obtained from the secretary of the relevant Department.	Yes	No	
07.	Is the maximum petty cash five thousand rupees to one time.	Yes	No	
08.	Is the total petty cash amount is twenty five thousand at ones.	Yes	No	

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09.	Are the expenditures are reimbursement according to the FR.	Yes	No	
10.	Are the expenditures recorded?	Yes	No	
11.	Does HOD request for materials from Principal.	Yes	No	
12.	Does Principal review and recommend / Not recommend	Yes	No	
13.	Does purchasing officer purchase recommended items using petty cash.	Yes	No	
14.	Does the purchased items recorded in FL/06/02/PI.	Yes	No	

Procedure Check list 06 - Financial Management Continued......

Serial No.	Activity	Yes No		Remarks
15.	Does the acceptance of items from the user officer obtained and record.	Yes	No	
16.	Requests made for purchasing are filed?	Yes	No	
17.	Is there an approval from an authorized person to take actions regarding the request made in purchasing?	Yes	No	
18.	Is the quotations are called according to the circulars?	Yes	No	
19.	Check whether the following facts / documents are fulfilled before purchasing. Request with the approval Quotation call Recommendation from Technical Committee Recommendation from Procurement Committee	Yes	No	
20.	Check whether the approval has to be taken from Principal to purchasing lower than Rs. 5000 and if more than that the 3 quotation has to be called at least from 3 institutions	Yes	No	
21.	Check whether the monthly limit of purchasing that can approve from Principal been exceeded.	Yes	No	
22.	Check whether the purchased item handed over to the stores officer in correct procedure	Yes	No	
23.	Check whether the following documents are handed over to the Financial Unit for the payments • Procurement Report • Purchasing Order • Bill • Processed voucher in transaction	Yes	No	
24.	Is the received allocations noted in the Vote Ledger?	Yes	No	
25.	Check whether the vote ledger maintain according to the Vote Head?	Yes	No	

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26.	Check whether the allocations	Yes	No	
27.	Check whether the following facts / documents are fulfilled before purchasing. Request with the approval Quotation call Recommendation from Technical Committee Recommendation from Procurement Committee	Yes	No	

Procedure Check list 06 - Financial Management Continued......

Serial No.	Activity	Yes No		Remarks
28.	Check whether the approval has to be taken from Principal to purchasing lower than Rs. 5,000 and if more than that the 3 quotation has to be called at least from 3 institutions	Yes	No	
29.	Check whether the monthly limit of purchasing that can approve from Principal been exceeded.	Yes	No	
30.	Check whether the purchased item handed over to the stores officer in correct procedure	Yes	No	
31.	Check whether the following documents are handed over to the Financial Unit for the payments • Procurement Report • Purchasing Order • Bill • Processed voucher in transaction	Yes	No	

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PROCEDURE CHECK LIST 07 STUDENT FINAL EXAM AND CONTINUOUS ASSESSMENT

Objective& Scope :

This procedure describes the method used by the to held final examination and continuous assessments

Responsibility: Principal, Vice Principal, HODs, Lectures, Instructors and Demonstrator

Activities for Checklist

Serial No.	Activity	Yes No		Remarks
01.	Is informed to start the process in exam?	Yes	No	
02.	Check whether the Exam Unit of the college informed about exam and issue exam applications to HODs.	Yes	No	
03.	Is the exam notice published and informed to the repeaters who are pending for the exam to call their applications?	Yes	No	
04.	Check whether collected exam application from student handover to the exam unit by HODs	Yes	No	
05.	Check whether the applicants are complete or not complete the Continuous Assessments.	Yes	No	
06.	Check whether the time table received by, issued to HODs and published them in a notice board	Yes	No	
07.	Check whether the approved applications by Principal entered to the MIS	Yes	No	
08.	Check whether the exam schedule prepared by the MIS	Yes	No	
09.	Check whether the exam admissions are prepared by the MIS and issued by the exam unit	Yes	No	

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10.	Check whether the exam coordinator appointed by the	Yes	No	
11.	Check whether names of exam in-charge (appoint from the HODs)as per the instructions of Principal, sent to the and get the approval	Yes	No	
12.	Check whether the duty list of exam staff prepared by exam unit as per the instructions of Vice Principal	Yes	No	
13.	Check whether the appointment letters issued to the incharge and relevant officers	Yes	No	
14.	Check whether the related documents handover to the exam in-charge in the previous day	Yes	No	
15.	Check whether the exam hall is prepared according to the seating plan	Yes	No	

Procedure Check list 07 - Student Final Exam And Continuous Assessment Continued..

Serial No.	Activity	Yes No		Remarks
16.	Check whether the exam being conducted according to the rules and regulations	Yes	No	
17.	Check whether all the documents related to exam handed over to the exam unit by exam in-charge	Yes	No	
18.	Check whether the exam attendance marked in the MIS	Yes	No	
19.	Check whether the results issued by the in exam conducted courses	Yes	No	
20.	Check whether the all exam certificates are issued to those who requested according to the result sheet checking name, index no, exam results correctly	Yes	No	
21.	Check whether the students who repeat the Internal exam applied for re-sit using form No. F/7/1	Yes	No	
22.	Check whether the repeated students complete their exams within valid period (four years)	Yes	No	
23.	Check whether the students face to the whole exam, those who didn't complete the exams within valid four years period	Yes	No	
24.	Check whether the student sat for the final exam and student failed any subject are applied for the final exam by form no F/7/2.	Yes	No	
25.	Check whether if the student applied for repeat exam, are failed more than three subjects to instruct them to apply whole exam	Yes	No	
26.	Check whether the applications forms for internal exam kept in GP/C/4 (Internal exam application forms)	Yes	No	

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Check whether the applications forms for final exam kept in GP/C/4 (Final exam application forms)	Yes	No	

Serial No.	Activity	Ye No	s/	Remarks
31.	Check whether the course coordinator done the pre- assessment, preparing the PA/01 form according to the assessment by allocating date for final assessment after a discussion with external assessors and sent to the and inform to the students (kept in file GP/C/4-I)	Yes	No	
32.	Check whether the final assessment conduct by the external assessor and check assessor complete AS/01, CBA/01, CBA/02, AA forms and sent to the (kept in file GP/C/4-I)		No	
33.	Check whether the receiving of NVQ certificates from TVEC and aware the students about certificates	Yes	No	
28.	Check whether a NVQ Assessment request form (F/7/3) sent to the and TVEC with the names of Assessors and details of students in each NVQ Level 04 course just after completion of the course to award NVQ Level 03 (kept in file GP/C/4-I)	Yes	No	
29.	Check whether a NVQ Assessment request form (F/7/3) sent to the and TVEC with the names of Assessors and details of students in each NVQ Level 03/04 course just after completion OJT to award NVQ Level 03/04 (kept in file GP/C/4-I)	Yes	No	
30.	Check whether the approval and appointment letters to assessors sent by the for relevant assessment	Yes	No	

Procedure Check list 07- Student Final Exam And Continuous Assessment Continued...

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PROCEDURE CHECK LIST 08 UPDATED NCS AND CURRICULA

Objective & Scope

This procedure describes the method used by the for do update of NCS and Curricula

Responsibility: Principal, Vice Principal, QMR, HOD, Lecturer and Instructor

Activities for Checklist

Serial	Activity	Yes	s /	Remarks
No.		No(
01.	Are the relevant NCS and Curricula available in the college library?	Yes	No	
02.	Is QMR aware about the deficiencies and make a list of them in $L/8/1$?	Yes	No	
03.	Do the relevant officers receive the NCS and Curricula?	Yes	No	
04.	Do the students aware about the NCS and Curricula?	Yes	No	
05.	Have the teaching and learning process function according to the NCS and Curricula?	Yes	No	
06.	Are the documents being updated according to the current industrial requirements and necessity in accordance with the academic staff?	Yes	No	

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07.	Does the academic staff inform the short-comings and changes needed in the curium to the Vice Principal	Yes	No	
08.	Have the Vice Principal forwarded them to curriculum unit in the department?	Yes	No	
09.	Is the revised curriculum received and handed over them to relevant officers for update their teaching process?	Yes	No	
10.	Does the QMR remove the outdated list from the obsoletes list?	Yes	No	

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PROCEDURE CHECK LIST 09 CUSTOMER SATISFACTION

Objective & Scope

This procedure describes the method used by theto maintain records and carry on good customer satisfaction environment.

Responsibility: Principal, HOD's, QMR, Academic Staff

Activities for Checklist

Serial	Activity	Yes		Remarks
No.		No(
01.	Learner makes their suggestions/ complaints to the suggestion box with his name or unanimously	Yes	No	
02.	Course committee is held once in three months and Learner makes their suggestions/ complaints to course committee	Yes	No	
03.	Learner makes their suggestions/ complaints to his/her course Instructor / HOD, Vice Principal, Principal or any Academic staff member	Yes	No	
04.	Monthly Suggestion boxes are opened by committee appointed by the Principal	Yes	No	

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05.	All suggestions/complains are recorded in document CL/9/F/1	Yes	No	
06.	Necessary decisions are taken in Management Committee and MR meeting	Yes	No	
07.	Inform committee/ decision to the Principal & record the detail in file no GP/C/7(decisions)	Yes	No	
08.	Principal informs the decision to the student & record the decision/ take action in file no GP/C/7(decisions)	Yes	No	

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