

Audit Report (SA1)

Organisation Malad Kandivli Education Society's Nagindas Khandwala College Of Commerce, Arts & Managements Studies And Shantaben Nagindas Khandwala College Of Science
 The Bombay Suburban Grain Dealers' Junior College Of Commerce, Arts and Science
 Audits(ZA) MUM/AUD/25-26/0851

Master Data of Organisation			
Name of organisation	Malad Kandivli Education Society's Nagindas Khandwala College Of Commerce, Arts & Managements Studies And Shantaben Nagindas Khandwala College Of Science The Bombay Suburban Grain Dealers' Junior College Of Commerce, Arts and Science		
Name of corporate group (in case of multi site organization only)	N.A.		
Street	Bhadran Nagar, Road No. 1, Off S. V. Road, Malad West		
Postcode / Town / Country	400064 / Mumbai / India		
Contact	Dr. Moushumi Datta / Dr. Sindhu Menon		
E-Mail	principal@nkc.ac.in / sindhumenon@nkc.ac.in		
Phone	022- 28072262		
System documentation: (Revision / Issue)	Apex Manual, Issue No.01, Revision No. 00, Issue date 01/08/2023		
Shift operation	General Shift		
Language	English		
Peculiarities	None		
Multi Site Organisation			
Selection of sites to be audited by sampling procedure	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> n.a.
An adequate listing of all sites in the scope(s) including all valid and relevant information in each case is part of the audit file	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> n.a.	
Audit Profile			
Contract ID (ZE):	MUM/AUD/25-26/0851		
Standards under contract / Audit type	ISO 21001 :2018 SA1		
Audit cycle	12 months		
Audit team leader	Dr. Nilesh Gaikar (NG)		
E-Mail audit team leader	gnilesh@tuv-nord.com		
Audit team			
Technical expert	N.A		
Trainee	N.A		
Observer	N.A		

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Audited Standards	
ISO 21001:2018	SA1
Certificate ID (TP): 787 24395255 / 787 24395255 -01	Valid until: 08/07/2027
Scope: Design and Development of Curriculum and Imparting Education to Under Graduate Students in the Faculty of Commerce, Arts, IT and Computer Science and Post Graduate Students of Commerce, Arts and IT, Affiliated to the University of Mumbai. Imparting Education to Higher Secondary Students of Maharashtra State Board – Mumbai Division in the Commerce and Arts Stream.	
Industry / Sector (EA, TB, ...)	37.1
Non-applicability of chapters:	Nil
No. of considered persons:	148
Lead auditor:	Nilesh Gaikar
No. of sites (incl. HQ):	01
Audit ID (ZA):	MUM/AUD/25-26/0851
Error! Reference source not found. : Error! Reference source not found.	Error! Reference source not found.
Certificate ID (TP):	Valid until:
Scope:	
Industry / Sector (EA, TB, ...)	
Non-applicability of chapters:	
No. of considered persons:	
Lead auditor:	
No. of sites (incl. HQ):	
Audit ID (ZA):	
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Certificate ID (TP):	Valid until:
Scope:	
Industry / Sector (EA, TB, ...)	
Non-applicability of chapters:	
No. of considered persons:	
Lead auditor:	
No. of sites (incl. HQ):	
Audit ID (ZA):	
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Certificate ID (TP):	Valid until:
Scope:	
Industry / Sector (EA, TB, ...)	
Non-applicability of chapters:	
No. of considered persons:	
Lead auditor:	
No. of sites (incl. HQ):	
Audit ID (ZA):	

Definition of Unit for Duration and Time		
Applied unit	Days	One audit day covers 8 audit hours

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Audit Details	
Sites	,Malad, Mumbai
Audit date	28/04/2025 - 29/04/2025
Audit duration	2.00 person Days on site (incl. remote locations as applicable) inclusive 0,00 person Days on site for audit stage 1 (separate report)

Application of Methods and Tools in remote Auditing			
Conducted as a remote audit	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Partly	<input type="checkbox"/> Total
Technologies used for the remote audit	<input type="checkbox"/> MS Teams	<input type="checkbox"/> Cisco WebEx	<input type="checkbox"/> Zoom
	<input type="checkbox"/> Other on request of client: In this case, client takes over the responsibility for any required activity in information security.		

Details about the remote Audit (if applicable)
<p>The audit was performed applying technology for information and communication ("remote") at 0%.</p> <p>Effectiveness and efficiency of the remote-part was ensured by</p> <ul style="list-style-type: none"> <input type="checkbox"/> experienced application of engaged technology; <input type="checkbox"/> the consecutive processing of the single sessions with the individual units; <input type="checkbox"/> the online interviews with different people from diverse units and various hierarchical levels; <input type="checkbox"/> the separation of the audit team in individual online sessions; <input type="checkbox"/> reviewing an adequate sample of documented processes and/or information; <input type="checkbox"/> the discussion of appropriate charts, diagrams, slides or any other relevant information; <input type="checkbox"/> the presentation and discussion of photos, videos and audios of issues, being prepared on detailed guidance and governance of the audit team. <p>Details about reviewed information or documents, interviewed persons, content of videos & photos etc. are recorded in the report or (handwritten) notes.</p> <p>If the audit was performed partly remote, the corresponding sessions are identified unambiguously in the audit plan.</p>

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Distribution/Confidentiality/Rights of Ownership/Limitations/Responsibilities

This report is sent to the certification body or bodies, the members of the audit team and the audit representative of the organisation. All documents (such as this report) regarding the certification procedure are treated confidentially by the audit team and the certification body. This audit report remains the property of the certification body.

An audit is a procedure based on the principle of random sampling and cannot cover each detail of the management system. Therefore nonconformities of weaknesses may still exist which were not expressly mentioned by the auditors in the final meeting or in the audit report.

The responsibility for continuous effective operation of the management system always rests solely with the audited and certified organisation.

Salvo clause:

The audit report will be left to the organisation at the end of the audit - subject to approval by the certification body. The independent veto process may cause modifications or additions. In these cases a modified revision will be sent to the audited organisation.

Annex/Enclosures

Annex/
corresponding audit documentation

- ☐ Questionnaire(s) / Checklist(s)
☐ Additional annexes, number

Audit Results							
ISO 21001:2108		Error! Reference source not found. : Error! Reference source not found.		Error! Reference source not found. : Error! Reference source not found.		Error! Reference source not found. : Error! Reference source not found.	
Clause	Rslt.*	Clause	Rslt.*	Clause	Rslt.*	Clause	Rslt.*
4.1	2						
4.2	2						
4.3	1						
4.4	1						
5.1	1						
5.2	1						
5.3	2						
6.1	2						
6.2	1						
6.3	2						
7.1	1						
7.2	1						
7.3	1						
7.4	1						
7.5	2						
8.1	2						
8.2	1						
8.3	1						
8.4	1						
8.5	1						
8.6	1						
8.7	1						
9.1	1						
9.2	2						
9.3	1						
10.1	1						
10.2	1						
10.3	1						
Addition of climate change consideration to management system standards							Rslt.*
▪ consideration of climate change issues (clauses 4.1 and 4.2) – mandatory, if applicable							2
Additional requirements in accordance to ISO 17021:2015							Rslt.*
▪ internal audits and management review							2
▪ review of actions taken on nonconformities identified in previous audit NC – Nil, OFI -06 Number and CM -03, Actions on OFI and CM verified, status- closed.							1
▪ responsiveness to complaints							1
▪ effectiveness of the management system with regard to fulfilment of objectives							1
▪ progress of planned activities aimed at continual improvement							1
▪ the client's management system ability and its performance regarding meeting of applicable requirements							1
▪ operational control of the client's processes							2
▪ review of any changes including the management system documentation							1
▪ use of marks and/or any other reference to certification Use of TUV logo- Not used. It was not evident on Letter Head, Envelope, Visting card							1

Audit Results							
ISO 21001:2108		Error! Reference source not found. : Error! Reference source not found.		Error! Reference source not found. : Error! Reference source not found.		Error! Reference source not found. : Error! Reference source not found.	
Clause	Rslt.*	Clause	Rslt.*	Clause	Rslt.*	Clause	Rslt.*
Rslt.* (Result): 0 = not audited; 1 = fulfilled; 2 = basically fulfilled/ potential for improvement; 3 = not fulfilled/ nonconformity; - = not applicable/ excluded. Details: see section „Audit findings“							

Mandatory Elements from A00VA02		
Temporary sites		
a) Are temporary sites (i.e. installation sites, project locations etc.) available?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b) If yes: which one are visited?		
Objective evidences		
In any regular audit the audit team shall see and review the following objective evidences. To confirm, the corresponding revision information is registered in column „Edition“ That can become applicable as well for some or all the listed objectives in special audits, e.g. for extensions or after transferring sites. At least in initial/recertification or extension audits (or when necessary) these objective evidences/documents are attached adequately to the audit file and uploaded into the release workflow. In any other audit it is accepted to record the revision information only.		
Title/content	Edition	Attached
Entry in professional or commercial register (or comparable evidence) - if applicable		<input type="checkbox"/>
Organization chart/evidence of organization		<input type="checkbox"/>
Company policy for audited management systems		<input type="checkbox"/>
Overview of management system documentation (e.g. table of contents or presentation of the structure of the management system documentation, process map)		<input type="checkbox"/>
Result of management review (e.g. cover sheet or table of contents with date and signature)		<input type="checkbox"/>
Current annual planning of internal audits		<input type="checkbox"/>
Evidence of internal audit report(s) (e.g.: cover sheet with date and signature)		<input type="checkbox"/>
Standard-specific evidence, as applicable ISO 14001: extract of environmental permit register; ISO 27001: statement of applicability; ISO 45001: accident statistics; ISO 50001: energy report as cover sheet with date and signature Others:		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Confidential information in the attached evidences may be blacked.		

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Standard specific Results

- ☐ Additional standard specific audit results and/or information are recorded in corresponding „Supplemental audit reports“ (e.g. for ISO 27001 or ISO 50001).

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ORGANISATION PROFILE

COMPANIES PROFILE CONTAINING FOLLOWING INFORMATION

Nagindas Khandwala College (Empowered Autonomous) was established on 21st July 1983 by the visionary Malad Kandivli Education Society. It offers degree and post graduate degree courses in the faculty of arts, commerce, B. Sc. (IT) and Computer Science (CS) and for higher secondary education in the faculty of arts and commerce.

- INFORMATION IF MULTI-SITE SCHEME IS APPLIED : *N.A*
- IF YES, LIST OF AUDITED SITES (E.G. IN AUDIT PROGRAM) : *N.A*
AND LIST OF CERTIFIED SITES BY THIS AUDIT AS ENCLOSURES
- NUMBER OF EMPLOYEES (NUMBER OF EFFECTIVE EMPLOYEES) INCLUDING LOANED EMPLOYEES AND SUBCONTRACTORS (FULL TIME EQUIVALENTS) AS PER EACH LOCATION : *148 No's*
- RANGE OF PRODUCTS : *Degree Programs offered in Faculty of Commerce, Arts, IT and Computer Science and and Post Graduate Programs of Commerce, Arts and IT, Affiliated to the University of Mumbai. Higher secondary students of Maharashtra State Board in the commerce and arts stream*
- CLIENTS / TOP CLIENTS / MAJOR CLIENTS : *Students enrolled in the college for the various courses.*
- IMPORTANT PROCESSES : *Teaching Learning Process, Student's Admission Process, Examination Process, Placement, Library, HR/training, System documentation*
- IMPORTANT ENVIRONMENTAL ASPECTS (ISO 14001) : *N.A*
- IMPORTANT OCCUPATIONAL HEALTH & SAFETY RISKS : *N.A*
- CERTIFIED SINCE ? : *2024*

SUMMARY OF RESULTS

- **ASPECTS OF THE COMPANY AND/OR THE AUDIT TO BE HIGHLIGHTED :**
- **ISO 9001 / ISO 14001 – STATEMENT ON THE IMPLEMENTATION OF THE STANDARD REQUIREMENTS**
 - STRATEGICAL DIRECTION OF THE ORGANISATION (CONTEXT, STAKEHOLDER ANALYSIS) :
 - *Internal & external issues are identified (DI/F:CO/B/00)*
 - *Internal issues – Values, Culture, Knowledge, Performance of institute and others*
 - *External issues – Legal, Technological, Competition, Market, Environment and others*
 - *Interested parties and their need & expectations are documented (DI/F:NE/00)*
 - *Interested parties – Management, Employees (Teaching & Non-teaching Staff), Students, Parents, Statutory Bodies, External service providers and others*
 - *Students – N-Good infrastructure facility, competent faculties and others*
 - *E- Facilitate overall growth of students, Arrangement for placements*
 - RISK-BASED APPROACH (ANALYSIS OF RISKS AND OPPORTUNITIES) :

Risk & Opportunities process is documented (NHC/QSP/R&O/04). Criteria of severity and probability is defined to determine risk level. Risk and opportunities register is documented (DI/F-RO/00) Increase number of books- space scarcity- e-resources and access to end users. Opportunities- Increase in e-resource and awareness program on same.
 - CONTROL OF EXTERNALLY PROVIDED PROCESSES :

Different types of vendor are identified for outsource process. Vendor selection and evaluation criteria are documented. Vendor details for procurement of books, periodicals and others were verified. Supplier evaluation and feedback form verified (F:AS/00/SE) Details verified for AO enterprises and Newspaper insert as a vendor for Library.
 - SYSTEMATICAL KNOWLEDGE MANAGEMENT :

Procedure for organizational knowledge is defined (NKC/QSP/OK/07). Respective HOD responsible for vetting knowledge before it is rolled out. Need to Know Basis and based on position, authority of principal is mentioned for sharing organization knowledge.
 - FULFILMENT OF COMPLIANCE OBLIGATIONS /LEGAL AND OTHER OBLIGATIONS:

Legal/statutory requirements verified and fulfilment is evident. UGC letter dated 06July 2023 with reference NO F2- 10/2023 for period 2022-23 to 2031-32 is evident. Maharashtra Shasan approval letter for start of college dated 22/06/1983 with Ref.No 3582/7022 is documented. UOM letter dated 08th April 2025 with reference No. AFF/ICD/2025-26/58 is evident.
 - CONSIDERING THE LIFE CYCLE PERSPECTIVE WHEN DETERMINING THE SIGNIFICANT ENVIRONMENTAL ASPECTS : *N.A.*
 - MEASUREMENT AND CONTINUAL IMPROVEMENT OF THE ENVIRONMENTAL PERFORMANCE : *N.A.*

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• ~~ISO 45001 STATEMENT~~

~~INDICATING THE IMPLEMENTATION OF THE STANDARD REQUIREMENTS :~~

~~(PLEASE STRIKE OFF IF NOT APPLICABLE):~~

- ~~○ STRATEGICAL DIRECTION OF THE ORGANISATION (CONTEXT, UNDERSTANDING THE NEEDS AND EXPECTATIONS OF WORKERS AND OTHER INTERESTED PARTIES):~~
- ~~○ CONSULTATION AND PARTICIPATION OF WORKERS :~~
- ~~○ HAZARD IDENTIFICATION AND ASSESSMENT OF RISKS AND OPPORTUNITIES :~~
- ~~○ PLANNING, ACTIONS TO ADDRESS RISKS AND OPPORTUNITIES :~~
- ~~○ MANAGEMENT OF CHANGE :~~
- ~~○ CONTRACTORS, OUTSOURCING :~~
- ~~○ CONTINUAL IMPROVEMENT OF OH&S PERFORMANCE :~~
- ~~○ CAPABILITY OF THE OH&SMS TO MEET ITS COMPLIANCE OBLIGATIONS:~~

STATEMENT ON THE REQUIREMENTS OF IAF MD 22 CLAUSE G 9.4.4.2 (MANDATORY DETAILS TO BE FILLED AS BELOW) —

PERSON RESPONSIBLE FOR MONITORING EMPLOYEES' HEALTH	NAME :	
	FUNCTION :	
	<input checked="" type="checkbox"/>	HAS BEEN INTERVIEWED IN THE AUDIT, JUSTIFICATION IN CASE INTERVIEWED REMOTELY - _____
	<input type="checkbox"/>	HAS ATTENDED THE CLOSING MEETING
	<input type="checkbox"/>	HAS NOT ATTENDED THE CLOSING MEETING; JUSTIFICATION, IN CASE NOT ATTENDED THE CLOSING MEETING : _____

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PERSON RESPONSIBLE WITH LEGAL RESPONSIBILITY FOR OCCUPATIONAL HEALTH AND SAFETY	NAME :-	
	FUNCTION :-	
	<input type="checkbox"/>	HAS BEEN INTERVIEWED IN THE AUDIT; JUSTIFICATION IN CASE INTERVIEWED REMOTELY - _____
	<input type="checkbox"/>	HAS ATTENDED THE CLOSING MEETING
	<input type="checkbox"/>	HAS NOT ATTENDED THE CLOSING MEETING; JUSTIFICATION, IN CASE NOT ATTENDED THE CLOSING MEETING : _____

EMPLOYEES REPRESENTATIVE WITH RESPONSIBILITY FOR OCCUPATIONAL HEALTH AND SAFETY	NAME :-	
	FUNCTION :-	
	<input type="checkbox"/>	HAS BEEN INTERVIEWED IN THE AUDIT; JUSTIFICATION IN CASE INTERVIEWED REMOTELY - _____
	<input type="checkbox"/>	HAS ATTENDED THE CLOSING MEETING
	<input type="checkbox"/>	HAS NOT ATTENDED THE CLOSING MEETING; JUSTIFICATION, IN CASE NOT ATTENDED THE CLOSING MEETING : _____
	-	

A) SUMMARY OF INTERVIEW HAD WITH THE MANAGEMENT LEGALLY RESPONSIBLE FOR OCCUPATIONAL HEALTH AND SAFETY : (KINDLY INDICATE THE OUTCOME OF THE DISCUSSION)

B) SUMMARY OF INTERVIEW HAD WITH THE PERSONNEL RESPONSIBLE FOR MONITORING EMPLOYEES' HEALTH : KINDLY INDICATE THE OUTCOME OF THE DISCUSSION

C) SUMMARY OF INTERVIEW HAD WITH THE EMPLOYEES' REPRESENTATIVE(S) WITH RESPONSIBILITY FOR OCCUPATIONAL HEALTH AND SAFETY; IF NECESSARY; DOCUMENTATION OF JUSTIFICATION IN CASE OF ABSENCE OF SINGLE AUDIT PARTICIPANTS DURING CLOSING MEETING : KINDLY INDICATE THE OUTCOME OF THE DISCUSSION

Conclusion

Taking into account the audit findings documented below, the organisation's size and structure, objectives, scope of the management system, processes and results achieved, the organisation has demonstrated that it operates its management system to ensure conformity with its own requirements, the requirements of interested parties, applicable legal requirements and appropriate requirements from the management system standards.

This includes in particular: the objective evidences,

- the policies and objectives and their implementation in the organisation,
- the processes existing in the management system and their interactions,
- the resource management,
- the measuring and analysis (incl. sample of indicators),
- the continual improvement process as well as
- the recording system (p.r.n. including standard specific objective evidences).

The implementation and the effectiveness of the management system and the processes for providing services/product realisation or to realize the objectives were assessed by the audit team by means of on-site inspection and examination of documented information on a random sample basis.

02 Good point, 04 Comment point, 06 Opportunity for improvement points observed are noted on following pages of this report.

All the findings of the audit have been conveyed to all concerned auditees, MR & Top Management during audit & closing meeting held at the end of audit.

As there is no non-conformity identified, the audit team recommends for maintenance of ISO 21001:2018 certificate

Audit Findings

Notes for the findings

The evaluation of the audit findings basically follows the scheme shown below:

Stage	Classification	Meaning
NC A	Major Nonconformity (Nonconformity A "major")	Nonconformities could be classified as major in the following circumstances: <ul style="list-style-type: none"> • if there is a significant doubt that effective process control is in place, or that products or services will meet specified requirements, • a number of minor nonconformities associated with the same requirement or issue could demonstrate a systemic failure and thus constitute a major nonconformity.
NC B	Minor Nonconformity (Nonconformity B "minor")	Nonconformities could be classified as minor, if these do not affect the capability of the management system to achieve the intended results.
OFI	Opportunity for improvement	Items which would allow optimisation of the management system in relation to the requirements of the relevant standard. It is recommended that the company implements these items.
GP	Positive aspects / Good Practice	Positive aspects of the management system worthy of special mention (see also point 4.3 if applicable).
CM	Comments	Special situation and information to be traced in next audit.

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If applicable: Guidance for management of nonconformities

Identified nonconformities are each documented in a nonconformity report ("Management of a nonconformity"), which are part of this audit report as annexes.

The audit team uses the nonconformity reports after the audit to track the processing status and also documents in them the final assessment results for the nonconformities concerned.

The organization shall perform a root cause analysis for any nonconformity and define adequate corrective actions. Root cause analysis, corrective actions including action plan for implementation and - if applicable - objective evidence for performed corrections or containment actions shall be submitted electronically to nominated lead auditor in charge on time to agreed deadline (latest six weeks after last day of the audit). The lead auditor will review these documents and shall inform organisation about the result.

The auditee organisation shall implement the corrective actions as defined in the approved action plan and review the effectiveness of implemented actions.

In the case of major nonconformities (NC A) the lead auditor shall verify the complete and effective implementation of action plan until agreed date (latest three months after last day of the audit). On decision of the auditor depending on type and extent of identified nonconformity, this can be done in a follow up audit on site or in a desktop-review of submitted documentation (objective evidence).

For minor nonconformities (NC B) it can be agreed to perform the verification of effective implementation of action plan in the next regular audit.

If any nonconformity applies to more than one of the audited standards, it may be recorded in a common nonconformity report, but shall be counted in the audit report for each applicable standard. The number of nonconformity reports may therefore be less than the number of nonconformities.

Summary for nonconformities

Standard	Raised in this audit		To be verified from previous audit
	Number NC A	Number NC B	Number NC
ISO 21001:2018	0	0	0
Total	0	0	0
Total number of nonconformity-reports raised in this audit:			0
<input type="checkbox"/> At least one of the nonconformities is graded as „generic“ and is counted in more than one corresponding audited standard.			
<input type="checkbox"/> During this audit the implementation of corrective actions and effectiveness of nonconformities of previous audit was verified. The records are attached to this audit file.			

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No	OFI (Opportunity for Improvement)	Area / Process	Standard: clause
1.	Internal and External issues are documented, however communication and Climate change related issues may be elaborated in detail with impact of climate change on organization may be considered.	System Coordinator/MR	ISO 21001: 2018 Clause – 4.1
2.	Interested parties needs and expectations are documented, however coverage of all interested parties may be reviewed and improved.	System Coordinator/MR	ISO 21001: 2018 Clause – 4.2
3.	Roles and Responsibilities are defined for all key positions, however authority details may be further reviewed, improved and captured.	System Coordinator/MR	ISO 21001: 2018 Clause – 5.3
4.	Teaching and learning process is defined and analysis of result is evident, however term wise teaching plan documented or Department meeting minutes of meeting may captured details related to topics to be covered for unit test in term one and term two respectively.	Teaching and Learning Process [Jr. College]	ISO 21001: 2018 Clause – 8.1.1
5.	Design and Development process is defined, However it may be reviewed to ensure all documents are assigned document/Format number and references of same to be incorporated in the defined procedure.	Design and Development [Degree]	ISO 21001: 2018 Clause – 7.5.2
6.	Notices from examination sections and Policy for additional requirements for special needs education is evident however the details may be reviewed and captured together to align all the activities performed by the organization as per standard requirement.	Teaching and Learning Process [Degree]	ISO 21001: 2018 Clause – 8.1.3

No	GP (Good Practice)	Area / Process	Standard: clause
1.	Rank 1 position for Excellence in Academic Achievement for the year 2024-25 by Education World. In the Education World India Higher Education Ranking 2025-26, the institution was ranked 4th across Maharashtra and 5th across India under the category of private autonomous ASC colleges.	Top Management	ISO 21001: 2018 Clause – 5.1
2.	Degree college with NAAC- Accredited A grade and secured a spot in the Top 10 for the category of Diversity, Inclusion, and Equity Champion	Top Management	ISO 21001: 2018 Clause – 5.1

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No	CM (Comment)	Area / Process	Standard: clause
1.	<i>Risk and opportunities are documented with mitigation plan, however its linkage to be reviewed by considering issues (Internal/external) and interested parties needs and expectations.</i>	System Coordinator/MR	ISO 21001: 2018 Clause – 6.1
2.	<i>Planning of Changes process is addressed in manual, and format is evident however may be further reviewed to capture details related to reallocation of responsibilities and authorities, availability and readiness of external providers needed to implement the change as per standard requirement.</i>	System Coordinator/MR	ISO 21001: 2018 Clause – 6.3
3.	<i>Examination operating procedures documented however all details related to outsource process along with its control and all activities conducted in examination process to be further reviewed and documented.</i>	Examination Process	ISO 21001: 2018 Clause – 8.1.1
4.	<i>Internal audit is conducted as per defined process, however objective evidence capturing in the audit cum observation sheet may be reviewed and improved</i>	System Coordinator/MR	ISO 21001: 2018 Clause – 9.2

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Closure and Recommendations				
Closure result	ISO 21001:2018			
Fulfilled	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Open nonconformities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not fulfilled	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recommendations of audit team	ISO 21001:2018			
Grant*/ Extension*/ Renewing*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maintenance*	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Suspension	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Restoring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Refuse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Withdrawal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p>^{*)} Grant / Extension / Renewing / Maintenance in the case of open nonconformities assumes that the nonconformities will be cleared as agreed</p> <p>Explanation of the terms:</p> <p>Renewing: New issue of the certificate for the re-certification.</p> <p>Restoring: End of the temporary invalidity of certificate after the suspension or after delayed re-certification.</p>				

Comments for next Audit
<p>If applicable, the final evidence of effectiveness and implementation of corrections and corrective actions for the nonconformities from this audit will be verified in the next audit.</p> <p>The comments and opportunities for improvement will be taken up again.</p> <p>The next audit is preliminarily scheduled for: 26/04/2026</p>

Responsible for Content	
Name: Dr. Nilesh Gaikar	Date: 02/05/2025
 <p>Signature audit team leader</p>	