

ACADEMIC & ADMINISTRATIVE AUDIT REPORT

2019-2020



Prepared by: Internal Quality Assurance Cell

ANDHRA UNIVERSITY

VISAKHAPATNAM

530003

Andhra University is one of the oldest state universities in the state of Andhra Pradesh. Considering the merits of the University, the National Assessment and Accreditation Council of India has reaccredited at "A" Grade with a CGPA of 3.60 out of four point scale in 2016. The University got ISO 9001:2001 certification in 2006, ISO 9001:2008 upto 2017 and presently it possesses ISO 9001:2015 certification for its quality standards. It is the 1st general University in the country to have ISO certification.

Andhra University conducts internal and external academic and administrative audits annually. The office of IQAC conducts academic and administrative audits through its 20 trained internal auditors. The external audits are done annually by TUV SUD.

Academic and Administrative Audit enhances quality and continuous improvement leading to one of the best practices of Andhra University. The audits aim to identify any drawbacks or weakness in any department or section based on the observation of the trained internal auditors. They are reviewed by the Top Management regularly and the audit findings help the administration in implementing the necessary steps for quality enhancement.

1.Scope of the Internal AAA:

The audit process strictly adhered to a proforma structured by the IQAC for the evaluation based on NAAC criteria's as given:

- Curricular Aspects: Curriculum design, development, BOS, framing of COs, POs,
 PEOs, PSOs for each course and programs, Curriculum enrichment, feedback
- **ii. Teaching-Learning & Evaluation:** Student mentoring, student assessment, student diversity, Teaching learning process, usage of ICT enabled tools, evaluation process and reforms, Faculty profiles, Student learning outcomes
- iii. Research, innovation & extension: Research facilities, papers published, patents, research projects
- iv. Feedback system
- v. Research
- vi. Infrastructure
- vii. Department Administration
- viii. Other academic-oriented activities

PERIOD OF ASSESSMENT : 2019-20

DATE(s) OF AUDIT: 31st August 2020 to 15th September 2020

(Due to COVID-19 the audit schedule has been delayed)

2. The list of trained internal auditors and the departments to be audited are as follows:

The Internal Audit Committee and departments to audit by the auditors:

Team	Name of the Internal auditor	Principal office / Department/ Others	
Α	Prof.G.Girija Sankar	Top Management	
	Prof. D.LalithaBhaskari		
В	Prof.G.GirijaSankar Prof.K.RamaSudha	IQAC Office	
С	Prof.P.K.Ratna Kumar 9848806706	Anthropology Statistics Applied Mathematics Mathematics	
	Dr.G.Naga Raja 8466902549	Marine Engineering, AUCE(A) Microbiology Biochemistry Engineering Chemistry Mechanical Engineering, AUCE(A)	
D	Prof.N.V.E.S.Murthy 9440702314	Directorate of Admissions Human Resources Management Physics, Biotechnology Nuclear Physics	
	Prof. M.VijayaSanthi 9989012529	Geo-Engineering, AUCE(A) Electrical Engineering, AUCE(A) Philosophy	
E	Prof. V.GirijaSastry 9866771724	Journalism and Mass Communication Library Information Science University Library History & Archaeology	
	Prof. K.Basavaiah 9908036203 7675079052	Meteorology & Oceanography Instrument Technology, AUCE(A) Humanities and Social Sciences, AUCE(A)	
	Prof. K.SrinivasaRao 9866037087	Principal office, College of Pharmaceutical Science Psychology & Parapsychology Metallurgical Engineering, AUCE(A)	
F	Prof. Balarampadal 9441586593	Mechanical Engineering, A.U. Engineering College for Women Organic Chemistry Chemical Engineering, AUCE(A) Computer Science & System Engineering,	
		AUCE(A) Sanskrit Architecture, AUCE(A)	
		Examination section	

	Prof.G.GirijaSankar	Electronics & Communication Engineering, A.U. Engineering College for Women	
		Electronics & Communication Engineering,	
G	9866937957	AUCE(A)	
H	2000227227	Fine Arts	
		Social Work	
	Dr. P.YedukondalaRao	Sociology	
	9490132294	Principal, College of Arts & Commerce	
		Engineering Mathematics	
	Prof. M.S. Anuradha	Environmental Sciences	
	9441209464	Geography	
	7441207404	Principal, College of Law	
н		^ U	
11		Engineering Physics	
	Prof.P.Suneetha	Engineering College for Women(Principal office)	
	9848250429	/	
	>01020012>	Electrical Engineering & Civil Engineering A.U. Engineering College for Women	
		Computer Science & System Engineering	
		A.U. Engineering College for Women	
	Prof.N.KishoreBabu	School of Economics	
т	9848112219	Music	
1	Dr. T.Anuja	Telugu	
		Education	
		Zoology	
	8639349308		
		Systems Design Marine Living Resources	
		College Development Council	
	Prof.T.V.K.BhanuPrakash		
	9440973800	Principal office, College of Science & Technology	
	775000	Civil Engineering, AUCE(A)	
	Prof.V.Sridevi	Geo-Physics	
	9848961427	Geology	
	70+0701+27	Hindi	
		English	
		Principal office, A.U.College of Engineering	
	Prof.P.Vasudeva Reddy	(A)	
	9885000274	Politics and Public Administration	
к	9885000274	Human Genetics	
K	Dr. K. SitaManikyam	Botany	
	9440084024		
	717000024	Commerce & Management studies Physical Education	
		Physical Education	
		Physical and Nuclear Chemistry	
		Inorganic & Analytical Chemistry	

Prof.D.Lalitha Bhaskari Dept.of Computer Science & Systems Engineering & Coordinator, IQAC

3. General Observations:

- 1. The University has been recognized as category 1 institute by MHRD, GoI
- 2. The University is accredited by NAAC with a CGPA of 3.60 in 2016 valid upto 7 years (cycle 3)
- Progressive vision of the Top Management with a definite plan of action following a decentralised and participative management.
- 4. Qualified and committed faculty members with rich experience
- 5. Most of the departments are funded by government agencies like DST, DBT, AICTE,
 - DRDO, TEQIP, NSTL and other funding agencies
- 6. The University is RUSA funded
- 7. The University is ISO 9001:2015 certified
- 8. Departments function in alignment with the University Quality policies
- 9. A total of 241 programs are offered among which UG Programmes-21; PG Programmes-

114, Integrated programs - 5, Ph.D-57, M.Phil - 42, PG Diploma- 2

- 10. Faculty members 538
- 11. 95% faculty members are with PhD
- 12. Being a reputed Government funded state university, the demand ratio is very high and student enrolment is always high.
- 13. A total of 11076 students are studying in the campus and 2836 outgoing students during 2019-2020.
- 14. Total Research and Academic centres 16

Research Centres :

- (1) Agro Economic Research Center
- (2) Dr. Durgabhai Deshmukh Centre for Women studies
- (3) Delta Studies Institute

- (4) Population Research Centre
- (5) Centre for Studies on Bay of Bengal
- (6) Centre for study of Social Exclusion and Inclusive Policy(CSSEIP)
- (7) Centre for Environment, Sustainable development and climate change(CESCC)
- (8) NMR Research Centre
- (9) Centre for Nano-Technology

• Academic Centres :

- (10) The Japanese Information and study centre
- (11) Prof.K.Satchidananda Murthy Centre for Religion studies
- (12) Centre for Defense studies
- (13) Centre for Gandhian Studies
- (14) Centre for Cyber security and Data Analytics
- (15) Dr.B.R.Ambedkar Study centre.
- (16) Alluri Seeta Ramraju History and tribal studies
- 15. JRFs, SRFs, Post Doctoral Fellows, Research Associates and other research

fellows enrolled in the institution : 380

4. NCRs:

The Non conformities (NCRs) of all the departments are attached here



ANDHRA UNIVERSITY

AUDIT NON-CONFORMITY REPORT

VISAKHAPATNAM ANDHRA PRADESH



ANDHRA UNIVERSITY VISAKHAPATNAM

AUF-06

AUDIT NON-CONFORMANCE REPORT (NCR)

NCRN0.: 2020 09 1 mi
Dept./Function: Top Management Responsibility: audit at TM office
Date of Audit : 21 09 2020
DETAILS OF NONCONFORMAITY (To be filled by Auditor)
SO 9001 Clause : Reference Document(s) :
Ionconformity :
uditor Name : Prof. Labetta Bheston' Signature & Date Haltte Bright Anim
uditor Name : Prof. Lalitha Bheston Signature & Date.
CORRECTIVE ACTION REPORT (To be filled by Auditee)
roposed correction : NIL
coot Cause Analysis : Nしし
roposed Corrective Action :
roposed Completion Date :
uditee Name : VC Signature & Date VICE-CHANCELLOF
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Visekhapatnam
tatus: Open / Closed. Auditor Name :
Signature & Date :
erification of effectiveness of corrective action (To be filled by auditor during next internal audit)
uditor Name / Signature
ate:



ANDHRA UNIVERSITY VISAKHAPATNAM

AUF-06

AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNo .: 2020 09 TM2

Dept./Function: Top Management Responsibility: Audit at TM office
RECTOR'S office
Audit No. : Date of Audit : 21/1/2020
DETAILS OF NONCONFORMAITY (To be filled by Auditor)
ISO 9001 Clause : Reference Document(s) :
Nonconformity :
Auditor Name: Pri D. Lalitta Bheshan Signature & Date . CORRECTIVE ACTION REPORT (To be filled by Auditor)
CONDECTIVE ACTION REFORT (10 be filled by Audilee)
Proposed correction : NIL
Root Cause Analysis : NIL Proposed Corrective Action :
Proposed Completion Date :
Auditee Name : Reeton Signature & Date : 2/9/2020
Verification of corrective actions (To be filled by Auditor at the time of closure)
Andhra University (out)
Status: Open / Closed. Auditor Name WALTAIR
Signature & Date :
Verification of effectiveness of corrective action (To be filled by auditor during next internal audit)
Auditor Name / Signature Date:



ANDHRA UNIVERSITY VISAKHAPATNAM

AUF-06

AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNo.:	2020	09	TM3
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Dept./Function: Top management	Responsibility :	audit at	TNA Office
Dept./Function: Top Management Registrer office	Responsionity.		11-(-11102
Audit No. :	Date of Audit :	21/9/2020	
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	ence Document(s) :		
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Nonconformity :			R1-91 21/09/10
Prof. G. Qinia Should	er	`^ O	Gr. B
Auditor Name : Proj. Lalite Bhade	Signature & Dat	A titles	219/22
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		be fined by Addi	
19			
Root Cause Analysis : N	IC		
Proposed Corrective Action :			
Proposed Completion Date :	-G.1	V. Ravindran	adh Ball
Auditee Name : Prof. G. V. Ranuchano Verification of corrective actions (To be	the balm of		alloglappe
Auditee Name Pastac	filled by Auditor at	the time of allows	-1011
verification of corrective actions (10 be	Autor at		
Status: - Open/Closed. Au	ditor Name 🛛 🕄		ANDHRA UNIVERSITY
	nature & Date :	-+	SAKHAPATNAM-530 003
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		a by addition during h	iext internal audit)
Auditor Name / Signature			
Date:			
Date.			



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AUDIT NON-CONFORMANCE REPORT (NCR)

NCR NO .: 2020 09 MRO

	Dept./Function: IQAC, AU Responsibility:	1
	Audit No. Date of Audit : 9992020	
	DETAILS OF NONCONFORMITY (To be filled by Auditor)	
	ISO 9001 Clause : Reference Document(s) :	
	Nonconformity :	
	Auditor Name MG. Ginje Sharlen Signature & Date: 999/2020	3/19/2/20
	CORRECTIVE ACTION REPORT (To be filled by Auditee)	
	Proposed correction : NIL	
	Root Cause Analysis : NIL	
1	Proposed Corrective Action : N/L	
	Proposed Completion Date:	
	Auditee Name : Co Malinelo Juac Signature & Date :	
F	Verification of corrective actions (To be filled by Auditor at the time of closure)	
	Status: Open / Closed. Auditor Name All 4.9 31902	arear 122
	(to be filled by auditor during next internal audit)	
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A C	Auditor Name / Sign. Sugncer A. A. 19/2 June	
	9/9/25	

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AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNO .: 2020 109/PI

Dept./Function: PRINCIPAL OFFICE Responsibility: COLLEGE OF A RTS AND COMMERCE Date of Audit : 08 09 2020 Audit No. DETAILS OF NONCONFORMAITY (To be filled by Auditor) Reference Document(s) : ISO 9001 Clause : AUF-09,12,13, 14, 15, 17, 8, 38 12 be updated Nonconformity : CORRECTIVE ACTION REPORT (To be filled by Auditee) ection : The aforesaid documents of " Auditor Name: Prot - P. yed Uxond al Signature & Date : The aforesaid documents shall be updated **Proposed correction** Root Cause Analysis : Owing to Covid-19 Pandemic certain gaps are not filled in the records. Proposed Corrective Action: 90 involve personnel of performent records to fill the gaps. 10.09.2020 annarca Proposed Completion Date : Auditee Name : Prof. Rajendra Karmarka Signature & Date : PRINCIPAL Verification of corrective actions (To be filled by Auditer at the Signate Sectors) orce Muditor Name Igilm Andhre University Signature & Date : Status: Open / Closed. yodvikas atalin 1019/22 Verification of effectiveness of corrective action (To be filled by auditor during next internal audit) Auditor Name / Signature Date:



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AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNo.: 2020/09/ DI

Dept./Function: AnthropologyResponsibility:
Audit No. : $Date of Audit : 5 9 2020$
DETAILS OF NONCONFORMAITY (To be filled by Auditor)
ISO 9001 Clause : Reference Document(s) :
Nonconformity: Port. P.K. Routna Kound. Auditor Name: Port G. Nagaragn. Signature & Date:
Auditor Name : Vour 9. 8 Signature & Date :
CORRECTIVE ACTION REPORT (To be filled by Auditee)
Proposed correction :
Root Cause Analysis :
Proposed Corrective Action 1
Proposed Corrective Action :
Proposed Completion Date : 2 (2) (2)
Auditee Name : Dr. D Ramelly Signature & Datesnature University
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Status: Open / Closed. Auditor Name :
Signature & Date: Ing. G. Nogalago, May
Verification of effectiveness of corrective action (To be filled by auditor during next internal audit)
Auditor Name / Signature M. I.K. Rather Kunay. Date: Mr.J. G. Napon Many
Date: Prof. G. Naying May
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AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNo.: 2020/09/D2

Dept./Function: Dept of ConnerbResponsibility: and Management
and management
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Audit No. : Date of Audit : Date of Audit : : : : DETAILS OF NONCONFORMAITY (To be filled by Auditor) : : :
ISO 9001 Clause: Reference Documentor 1. Hop signatures in Activity Dairy
1. HOD Signatures in 13
Non-conformity :
Auditor Name : P. J. K. STTA MANUKYA Signature & Date : Jegy 2 - Vity CORRECTIVE ACTION REPORT (To be filled by Auditee)
Auditor Name : P. K. STA MANIEYA Signature & Date .
Auditor Name : P 2. K. 3 TF MANULY A OSIGNATURE & Date of the filled by Auditee) CORRECTIVE ACTION REPORT (To be filled by Auditee)
Proposed correction : fecommented to uplate the yeards
Root Cause Analysis : Due to lack 2 time
Root Cause Analysis : Due to lack 2 line
Proposed Corrective Action :
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Proposed Completion Date: 2) - 9 - 2020-
AO A CONCENTRATION
Signature & Date :
Auditee Name : Verification of corrective actions (To be filled by Auditor at the time of cleaver)
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Signature & Date
Signature & Date : 127 Verification of effectiveness of corrective action (To be filled by auditor during next internal audit)
Auditor Name / Signature
Date: . Jery 2. Key



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AUDIT NON-CONFORMANCE REPORT (NCR)

NCRN0.:2020 09 D3

Dept./Function: Department Responsibility:
Audit No. : G Date of Audit : 05,09,2020
* DETAILS OF NONCONFORMAITY (To be filled by Auditor)
ISO 9001 Clause : Reference Document(s) :
AUF 18, 28, 33, 35, 08, 31, 38 to be updated.
Nonconformity :
Auditor Name : Prof. N. Kishore Boku Auditor Name : Prof. Anuja Tippe Signature & Date : 05.09.2000. CORRECTIVE ACTION REPORT (To be filled by Audite)
CORRECTIVE ACTION REPORT (To be filled by Auditee)
Proposed correction : It will be updated
Root Cause Analysis :
Proposed Corrective Action :
Proposed Completion Date :
Auditee Name: Prof. M. Prach Ras Signature & Date: M. Prasado (2020)
Verification of corrective actions (To be filled by Auditor at the time of closure) OF ECONOMICS
Status: Open / Closed. Auditor Name : Prof. N. KISHNRE 341444-531200
Signature & Date: Prol. ANUJA TIGGA Annia Richa
Verification of effectiveness of corrective action (To be filled by auditor during-next internal audit)
Auditor Name / Signature
Date:



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AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNo.: 2020 09 04

Dept./Function: Department of Educa Responsibility:			
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Audit No. : 5 Date of Audit : 09,2020			
DETAILS OF NONCONFORMAITY (To be filled by Auditor)			
ISO 9001 Clause : Reference Document(s) :			
Nonconformity: No NCR.			
Auditor Name: Prof. Anija (1000. Signature & Date: Anija (1000 OS: 09.2020 CORRECTIVE ACTION REPORT (To be filled by Additee)			
Proposed correction : NIL, Updated			
Root Cause Analysis :			
Proposed Corrective Action :			
Proposed Completion Date: $5 9 2022$			
Auditee Name: Prf. R. R. ANGANATIM Signature & Date: Humb 5/9/2022			
Verification of corrective actions (To be filled by Auditor at the time of closure)			
Status: Open / Closed. Auditor Name : Andrea University Signature & Date : Wisekhapetnam			
Verification of effectiveness of corrective action (To be filled by auditor during next internal audit)			
Auditor Name / Signature Date:			



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AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNO .: 2020/09/DG

Dept./Function: FINE ARTS Responsibility:	
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Audit No. : Date of Audit : $11 09 2020$	
DETAILS OF NONCONFORMAITY (To be filled by Auditor)	
ISO 9001 Clause : Reference Document(s) :)
Nonconformity: AVF-18, 23, 26, 27, 28, 29, 30, 35, 36, 8, 81, 38, 39	
Auditor Name: prof. p. yed or cod al C. Stghature & Date:	1/29/2000
CORRECTIVE ACTION REPORT (To be filled by Auditee)	
Proposed correction : The above domiter to the updated	3
Auditor Name: prof. P. yod 10 & ord @ C. Signature & Date: <u>CORRECTIVE ACTION REPORT (To be filled by Auditee)</u> , 10 91222 Proposed correction : The above duriture & be updated Drue Covid-19, pandink Root Cause Analysis :	
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Proposed Corrective Action : $1 + 4 - 9 - 2020$	
Proposed Completion Date: Auditee Name: D. Srmhachapm Signature & Date: 1/9/2020 A and A	S Pre
Auditee Name: D. Srmhachapon Signature & Date: 11/9 / 2020	
Verification of corrective actions (To be filled by Auditor at the time of closure)	
Status: Open / Closed. Auditor Name : Signature & Date :	
Verification of effectiveness of corrective action (To be filled by auditor during next internal audit)	
Auditor Name / Signature	
Date:	



ANDHRA UNIVERSITY VISAKHAPATNAM

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AUDIT NON-CONFORMANCE REPORT (NCR)

NCR No .:

Dept./Function: Dept. of Hindi	Responsibility :
	Date of Audit : 63.09.2020
Audit No.	
DETAILS OF NONCONF	ORMITY (To be filled by Auditor)
ISO 9001 Clause : Reference	e Document(s) :
Nonconformity :	
Noncomonity :	
Prof. T. V. K. Dhempahah	l plaid.
Prof. T. V. K. Bhenn Pruh Drof. V. Sviden- Auditor Name:	Signature & Date :
	REPORT (To be filled by Auditee)
Proposed correction :	
Root Cause Analysis :	
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Proposed Corrective Action :	
Development Completion Date:	
Proposed Completion Date:	SUPPORT E DEPARTMENT
Auditee Name : Head of de Dept	SIGNATIONENT OF HINDI
Verification of corrective actions (To be filled	by AuditoPathanting of closure)
Vermouson et en	
Charles Open / Closed	Auditor Name
Status: Open / Closed.	Signature & Date :
Verification of effectiveness of corrective act	
(to be filled by auditor during next internal audit)	
Auditor Name / Sign.	
Date :	

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AUDIT NON-CONFORMANCE REPORT (NCR)

NCR NO .: 2020 09/07

Dept./ Function : HINON Days & English	Responsibility :
Audit No. :	Date of Audit : 09-09-2020
DETAILS OF NONCON	FORMITY (To be filled by Auditor)
ISO 9001 Clause : Reference	e Document(s) :
Nonconformity: 1 TVK Bhonuprobach M Auditor Name: 2. V. Sviden: Cerd	ni k
Auditor Name: 2. V. Sriden Led	2. Signature & Date : 02-09-2020
	REPORT (To be filled by Auditee)
Proposed correction :	2
Root Cause Analysis :	D PEDA RAJU Head of the Department Head of the Department
Proposed Corrective Action :	
Proposed Completion Date:	Department University Andhra University Visakhapatnam-535 003
Auditee Name	Signature & Date :
Verification of corrective actions (To be filled	by Auditor at the time of closure)
Status: Open / Closed.	Auditor Name : Signature & Date :
Verification of effectiveness of corrective ac (to be filled by auditor during next internal audit	tion)
Auditor Name / Sign. Date :	

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AUDIT	NON-CONFORMANCE	REPORT (NCR)
		NCRNO.: 2020 09 58
Dept./Function: Dept: and Archeolog	Date of Audit	11/9/2020
DETAIL	S OF NONCONFORMAITY (7 Reference Document(s)	To be filled by Auditor)
Nonconformity :		SASTRY] 2. B-Savar A ate: (DeoF-le. BAJAN
Proposed correction	:	
Root Cause Analysis	:	
Proposed Corrective A	ction :	
Proposed Completion D V - Dhawroy Auditee Name : Verification of correcti	Signature & D	Date: ILAN Archacsion University, Vistochacsion
Status: Open / Closed.	Auditor Name : Signature & Date :	lled by auditor during next internal audito
Verification of effectiv	eness of corrective action (10 00 fr	
Auditor Name / Signatu Date:	re 1. V. Grain Sho	y). (PROF. K. BASA 1014

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AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNo .: 2020/09/D9

Dept./Function: Dept. of Human Responsibility: Resources Management.
Audit No. : Date of Audit :
DETAILS OF NONCONFORMAITY (To be filled by Auditor)
ISO 9001 Clause : Reference Document(s) :
Nonconformity : None.
1. Prof. N.V.E.S. Murthy 212 M. Santha Auditor Name: 2. Prof. M.V. Sauth, Signature & Date:
CORRECTIVE ACTION REPORT (To be filled by Auditee)
Proposed correction :
Root Cause Analysis :
Proposed Corrective Action :
Proposed Completion Date :
Auditee Name: Pr J. K. JOHN Signature & Datenddement 20) 8
Verification of corrective actions (Poble filled by Auditor at the time of closure)
Status: Open / Closed / None. VIAnditor Name : Signature & Date :
Verification of effectiveness of corrective action (To be filled by auditor during next internal audit)
Auditor Name / Signature Date:



ANDHRA UNIVERSITY VISAKHAPATNAM

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AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNo .: 2020/09/DIO

Dept./Function: Journalism and mark comprunication	Responsibility :
Audit No. :	Date of Audit: $7 - 9 - 2020$.
DETAILS OF NON	CONFORMAITY (To be filled by Auditor)
	eference Document(s) :
Nonconformity : - Mit	(Prof. K. BASAVAIAH
Auditor Name :	Signature & Date: (PROF- K. BASAVAIAH
CORRECTIVE AC	CTION REPORT (To be filled by Auditee)
Proposed correction :	
Root Cause Analysis :	
Proposed Corrective Action :	
Proposed Completion Date :	Prof. Peeta BOBBY VARDHAN, Ph.D. Head of the Department Journalisam & Mass Communication Andhra University Signature & Date : VISAKHAPATNAM-530 003
Verification of corrective actions (T	o be filled by Auditor at the time of closure)
Status: Open / Closed.	Auditor Name : Signature & Date :
Verification of effectiveness of corre	etive action (To be filled by auditor during next internal aution
Auditor Name / Signature 1. Date:	1. V. Giripi So CPril VGIRI STASTRY) 2. Benverich
	(PEOF. L. BASAVAIAH)



AUF-06

AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNO .: 2020/19/011

	Dept./Function : Dept: of Library Swarkesponsibility:
	Audit No. : Date of Audit : 11-9-2020.
	DETAILS OF NONCONFORMAITY (To be filled by Auditor)
	ISO 9001 Clause : Reference Document(s) :
	Nonconformity = NEL-
	Auditor Name: 1. LPrf v GIRUSTASASTPY Signature & Date: (PROF. K. BASA VAIBH/ CORRECTIVE ACTION REPORT (To be filled by Auditee)
	Proposed correction :
	Root Cause Analysis :
	Proposed Corrective Action :
	Proposed Completion Date:
	Auditee Name : Signature DHANA RAJU, Ph.D.
	Verification of corrective actions (10 be filled by Auditor hteade time of closure) Dept. of Library and Information Science
	Dept. of Library and Information Science Status: Open / Closed. Auditor Name Andhra University Signature & Date : Signature & Date :
	Verification of effectiveness of corrective action (To be filled by auditor during next internal audit)
	Auditor Name Signature Date: Prof. V. Gizyjn Sha 2. Braven A (PROF. L. BASAVAIDA) Al grevords are bell meinteined.
Note:	All grevords are ben mennemed.



AUF-06

AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNo .: 2020 09/012

Dept./Function: Department of Responsibility:
Audit No. : 3 Date of Audit : 02,09.2020
DETAILS OF NONCONFORMAITY (To be filled by Auditor)
ISO 9001 Clause : Reference Document(s) :
No Non conformity
Nonconformity :
Prof. N. Kiehore Balan Ngan
Auditor Name: Prof. Amija Tige Signature & Date: Amija Tige
CORRECTIVE ACTION REPORT (To be filled by Auditee)
Proposed correction : NIL
Root Cause Analysis :
Proposed Corrective Action :
Proposed Completion Date :
Auditee Name: A. ANURADIA Signature & Date: K. Ann- R. 02/21'20
Auditee Name: A. ANURADHA Signature & Date: K. Ann R. 62/2/20 Verification of corrective actions (To be filled by Auditor at the time of closure) the Department
Period Music & Lunce
Status: Open / Closed. Auditor Name : Prof. N. KISHORE MIREV niv Nigar O
Signature & Date: Mr. ANUJA Maguna licce
Verification of effectiveness of corrective action (To be filled by auditor during next internal audit)
t - l'ter Nome / Signature
Auditor Name / Signature
Date:



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ANDHRA UNIVERSITY VISAKHAPATNAM

AUF-06

AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNo.: 2020 /09/ D13

Dept./Function : Phile	Sophy Responsibility : -
Audit No. :	C Date of Audit :
DETAIL	S OF NONCONFORMAITY (To be filled by Auditor)
ISO 9001 Clause :	Reference Document(s) :
Nonconformity :	
NVE Auditor Name : M. Vi	5 Murthy Jaya San Thi Signature & Date: 4/1/20. WSaube CTIVE ACTION REPORT (To be filled by Auditee)
CORRE	CTIVE ACTION REPORT (To be filled by Auditee)
Proposed correction	: Not able to visit The department due to the Head being COVID-19 positive.
	the Head being COVID-19 positive.
Root Cause Analysis	:
Proposed Corrective A	ction :
Proposed Completion Da	ate :
Auditee Name : D.J.	B. Ravibabu, Signature & Date :
Verification of corrective	ve actions (To be filled by Auditor at the time of closure)
Status: Open / Closed.	Auditor Name : Signature & Date :
Verification of effective	mess of corrective action (To be filled by auditor during next internal audit)
Auditor Name / Signatur Date:	e



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ANDHRA UNIVERSITY VISAKHAPATNAM

AUF-06

AUDIT NON-CONFORMANCE REPORT (NCR)
NCRNo.: 2020 (09) DIY
Dept./Function: Dept of political Cresponsibility: and Public Admiration
Audit No. : Date of Audit Detrails OF NONCONFORMAITY (To be filled by Auditor) ISO 0001 (N) : Iso numerat(s) :
Nonconformity: <u>Reference Documentor</u> . Nonconformity: AUF 18, AUF 28, 29, 30 are to be updated Seperte AUF 28, 29, 30 are to be updated Prof P. Yashlum Rids Auditor Nome Die 16 End Markel Signature & Date: 1. Dany 2-Key
CORRECTIVE ACTION REPORT (To be filled by Auditee)
Proposed correction : Recommended & upd. t. AUF 18, 28, 29, 30,
Root Cause Analysis : Due to lack of time and m Proposed Corrective Action :
Proposed Completion Date: 22/9/2020 Dr. P. Petet- Preman andow Auditee Name: Signature & Date Difference Sources
Status: Open/Closed. Auditor Name : pof · P· Var Var Maganam-Beauv Signature & Date : A Visakhapanam-Beauv
Verification of effectiveness of corrective action (To be filled by auditor during next internal audit)
Auditor Name / Signature Date: 1. Dem
L. Von



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ANDHRA UNIVERSITY VISAKHAPATNAM

AUF-06

AUDIT NON-CONFORMANCE REPORT (NCR) NCRNO .: 2020 09 015 Dept./Function : SOCIAL WORK Responsibility : Date of Audit : 07/09/220 A.U. Audit No. DETAILS OF NONCONFORMAITY (To be filled by Auditor) ISO 9001 Clause : Reference Document(s): Nonconformity: AUF 09,18,20,21,23,24,28,29,30,33,3636,39 Updowed 1, M M.9 1. 109)2020 Auditor Name: Prof. Pryodux and algo Signature & Date: CORRECTIVE ACTION REPORT (To be filled by Auditee) **Proposed correction** : The above documents to be updated. Due to carid-19 pandamic. **Root Cause Analysis** : Proposed Corrective Action: upgrade the abure dowments Proposed Completion Date : 10 - 9 - 2020 Auditee Name: Dr. S. Harence Signature & Date: 1. Hurenot 7/9/2020. Verification of corrective actions (To be filled by Auditor at the time of closure) Auditor Namel Prob G. Girija Sonka Signature & Date: Prob Pryodukowda) G Res J Status: Open / Closed. Verification of effectiveness of corrective action (To be filled by auditor during next internal audit) 10/09/1000 Auditor Name / Signature Date:



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ANDHRA UNIVERSITY VISAKHAPATNAM

AUF-06

AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNo .: 20 20 09 016

Dept./Function: (October Provide life)	
Dept./Function: SOCIOLOGY, Av. Responsibility:	
Audit No.	
DETAILS OF NONCONFORMAITY (To be filled by Auditor)	
ISO 9001 Clause : Reference Document(s) :	\sim
<u>ISO 9001 Clause</u> : <u>Reference Document(s)</u> : Up dated Nonconformity: AVF-8 24 27 28 3026 2638 (5 be tobad plagfor (7	
Nonconformity: AUF-8, 24, 27, 28, 30,35,36,38 (5 be truck for and	12-22
Phil. G. Girjosconkor	and let
Auditor Name: PWE. P. Yedu Kondala New Signature & Date: 22- 67/09/2020	
CORRECTIVE ACTION REPORT (To be filled by Auditee)	
Proposed correction : Joing to be up date all the above dominus;	
Root Cause Analysis : owning to Covid-19. Pandenvic	
Proposed Corrective Action: To fill up the gaps and update the baid readab.	
Proposed Completion Date: 09.09.2020	
Auditee Name : Dr. V. Sreemannarayana MunkSignature & Date : Dew 26 Neully 04/09/2020	
Verification of corrective actions (To be filled by Auditor at the time of closure)	())
antifular first a source of the	9/9/20
Status: Open / Closed. Auditor Name : Opt Durch and Auditor Name	
Signature & Date: 1"F. F. 4000120nd QUING we we lodg	020
Verification of effectiveness of corrective action (To be filled by auditor during next internal audit)	
Auditor Name / Signature	
Date:	

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ANDHRA UNIVERSITY VISAKHAPATNAM

AUF-06

AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNo.: 2020 09 117

Dept./Function:
Dept./Function : Department of TelerResponsibility:
Alldit No
Details of Nonconformality (To be filled by Auditor)
Nonconformity: NONCR,
Port N. KISHURE BABU
Auditor Name : Bool, Ange Gee Signature & Date : Ngh W Ngh CORRECTIVE ACTION REPORT (To be filled by Auditee) Proposed correction
CORRECTIVE ACTION REPORT (To be filled by Auditee)
Proposed correction :
Root Cause Analysis :
Proposed Corrective Action :
Proposed Completion Date :
Auditee Name & DTOF (1, App de Signature & Date : ANDHRA UNIVERSITY
Verification of corrective actions (To be filled by Auditor at the time of the shapatnam-530 003, A.P.
Signature & Date: Fool, Moush 11444 days
Verification of effectiveness of corrective action (To be filled by auditor during next internal audit
*
Auditor Name / Signature
Date:
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ANDHRA UNIVERSITY VISAKHAPATNAM

AUF-06

AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNO .: 2020/19/D18

Dept./Function: Phinical Education Responsibility:
Audit No. : Dete of Audit
Date of Audit : DETAILS OF NONCONFORMAITY (To be filled by Auditor)
Activities and a second s
Non-conformity: AUF 18, AUF, 8, 3', 38,39 1. P. Vazudeva Reddy 1. Denty Auditor Name: 2-K. Sit A MAN 1K4 AM Signature & Date: 2. K. Site M. Center Signature & Date: 3. K. Site M. Site M. Site M. Center Signature & Date: 3. K. Site M.
Auditor Name: 2- K-Sit A Maw 144 And Signature & Date: 2. 2.
CORRECTIVE ACTION DEPODT (To be filled by Audice)
Proposed correction : Jerggested to correct and update AUF 18,8, 3638,39
Root Cause Analysis : Due to lack of knowledge
Proposed Corrective Action : Carriedon
Proposed Completion Date : $21 - 9 - 2020$
Auditee Name : Signature & Date :
Verification of corrective actions (To be filled by Auditor at the time of closure)
Status: Open / Closed. Auditor Name : Signature & Date :] · Deday 2 K. Sela marsey
Verification of effectiveness of corrective action (To be filled by auditor during next internal audit)
Auditor Name / Signature 1. Derly Date: 2. K. Sila nowliger
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ANDHRA UNIVERSITY VISAKHAPATNAM

AUF-06

AUDIT NON-CONFORMANCE REPORT (NCR)

NCR No .: 2020 09 P2

Dept./ Function : Der in the station			
Dept./ Function: pourcipal statice Responsibility:			
Audit No. : de Science and Technolog. Date of Audit :			
DETAILS OF NONCONFORMITY (To be filled by Auditor)			
ISO 9001 Clause : Reference Document(s) :			
Nonconformity : NIL O			
Proj. T.V. K. Bhan gratals Auditor Name: Proj. V. Sviden' (Congnature & Date:			
CORRECTIVE ACTION REPORT (To be filled by Auditee)			
Proposed correction :			
Root Cause Analysis :			
Proposed Corrective Action :			
Proposed Completion Date:			
Auditee Name : Signature & Date :			
erification of corrective actions (To be filled by Auditor at the time of closure)			
Status: Open / Closed. Auditor Name : Signeture & Date :			
erification of effectiveness of corrective action o be filled by auditor during next internal audit)			
uditor Name / Sign. ate :			

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Principal AU College of Science & Technology VISAKHAPATNAM

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()	VISAKHAPATNAM			
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	AUDIT NON-CONFOR	MANCE REPORT	<u>(NCR)</u>	
			NCR NO: 2020 (09) DIG	
Dept. / Function:	APPLIED MATHEMATICS	Responsibility		
Audit No		Date of Audit:	03. 09.2020	
	ETAILS OF NONCONFOR	MAITY(To be fi	lled by Auditor)	
ISO 9001 Clause				
Nonconformity				
-		PKRhi		
	2. Dr. G. Naga Raja	Nam	Signature & Date	
- (CORRECTIVE ACTION REI	PORT (To be fil	led by Auditee)	
Proposed corre				
Root Cause An	alysis : –			
Proposed Corr	ective Action :			
Proposed Comp	letion Date :			
Auditee Name:	Dr. P. VIJAYA LAXMI		≤ 1	
	Head of the Department 9989578075	(Signature & Date	
Verification of	corrective actions (To be fille	d by Auditor at the	Hand the second	
Status: Open / 0			umar.	
	2. L	Dr. G. Naga Raja.	Nang	
Verification of	effective corrective action (T	o be filled by Aud	Signature & Øate	
Auditor Name:	I, Prof. P. K. Ratna Kumar.	2 K Rohine		

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dip		VISAKHAPA	ATNAM
			AUF – 06
	AUDIT NON-CO	NFORMANCE REPO	NRT (NCR)
			NCR No: 2020 09 020
			NCR NO: 2020 107) 120
Dept. / Function: B	IOCHEMISTRY	Responsibi	ility:
Audit No :		Date of Auc	dit: 31. 08.2020
DE	TAILS OF NONCON	FORMAITY (To be	filled by Auditor)
ISO 9001 Clause:	Referenc	e Document(s):	
Nonconformity :			
Auditor Name 1	. Prof. P. K. Ratna Kum	ar FRRhime	
	2. Dr. G. Naga Raja	Xap1/	
	jj		Signature & Date
CC	DRRECTIVE ACTION	REPORT (To be f	illed by Auditee)
Proposed correcti	on :		
Root Cause Analy	sis : –		
Proposed Correct	ive Action :		
Proposed Completi	on Date :		
Auditee Name: Dr.	P. SUBHASHINI DEVI		< Camp
	ad of the Department		Santelson
	9490489675		Signature & HetaD
Verification of corr	rective actions (To be f	filled by Auditor at the	Departmenteof Biochemistry
			Andhra University
Status: Open / Clos		. Prof. P. K. Ratna Ku	mar sakhapatnam-530 003
	2	2. Dr. G. Naga Raja.	Nant
/erification of effe	ctive corrective action	(To be filled by Audi	Signature & Date tor during next internal audit)
			and audity next internal audit)
Auditor Name: 1. Pro	of. P. K. Ratna Kumar.	P.K.R.	
2. Dr.	G. Naga Raja.	Napy	

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ANDHRA UNIVERSITY VISAKHAPATNAM

AUF-06

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AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNo .: 2020 /09 / D21

Dept./Function: Dept. of Biotechnology	
Audit No. : Date of Audit : 04 09 20.	
DETAILS OF NONCONFORMAITY (To be filled by Auditor)	
ISO 9001 Clause : Reference Document(s) :	
Nonconformity :	
1. Prot. N.V.E.S. Murthy4/9/20.	
Auditor Name: 2. Prof. M. V. E.S. Murthy V. Sauth 1/9/20. Auditor Name: 2. Prof. M. V. Catthi Signature & Date: Sauth 1/9/20	
CORRECTIVE ACTION REPORT (To be filled by Auditee)	
Proposed correction : None.	
Root Cause Analysis : —	
Proposed Corrective Action : —	
Proposed Completion Date :	
Auditee Name : V. Lakohi Signature & Date : V. Lakohi 04/09/20	020
Verification of corrective actions (To be filled by Auditor at the time of closure)	
Status: Open / Closed. Auditor Name : 1. Prof. N.V.E.S. Murrier University	
Status: Open / Closed. Auditor Name : 1. Prof. N. V. E.S. Flurthundhra University Signature & Date : 2. Prof. M. V. Sauthvisak Prof.	13
Verification of effectiveness of corrective action (To be filled by auditor during next internal audit)	The
Non e.	
Auditor Name / Signature NVES Murity MI-Vijoya Santhi	
Auditor Name / Signature NVES Murity M. Vijoya San Ki Date:	
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AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNo .: 2020 (09) D22

Dept./Function: Dept. A A A Dept.
Dept./Function: Dept. J Brtany Responsibility:
Audit No. : Date of Audit :
DETAILS OF NONCONFORMALTY (To be filled by Auditor)
ISO 9001 Clause : Reference Document(s) :
Non-conformity: All records are updated.
Auditor Name : PWF- P. Varsudure ford Signature & Date :
Auditor Name 1 DOF- D Vasia dura Redai una & Data 1. Act y 2.
CORRECTIVE ACTION REPORT (To be filled by Auditee)
Proposed correction :
Root Cause Analysis :
Proposed Corrective Action :
Branaged Completion Date :
Proposed Completion Date :
prof. (ujatha Sujatha
prof. Sujatha Signature & Date HEAD Auditee Name : Signature & Date HEAD
Verification of corrective actions (To be filled by Audhor at the time of closure)
Visakhapatnam-530 003
Status: Open / Closed. Auditor Name : J. Dary
Signature & Date.
Verification of effectiveness of corrective action (To be filled by auditor during next internal audit)
Auditor Name / Signature
Date: J. Gary 2 - Kary
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AUDIT NON-CONFORMANCE REPORT (NCR)

NCR No. 2020 1091 223

Dept / Function Environmental Science Responsibility Internal Audit Audit No Date of Audit : 8/9/20-	
Audit No Date of Audit : 8/9/20 -	
DETAILS OF NONCONFORMITY (To be filled by Auditor)	
ISO 9001 Clause : Reference Document(s) :	
Nonconformity: Neil	
Auditor Name flot P. Scenttre Signature & Date: P. Scenttre japan	
CORRECTIVE ACTION REPORT (To be filled by Auditee)	
Proposed correction	
Root Cause Analysis	
Proposed Corrective Action	
Proposed Completion Date	
Auditee Name Part A.7. Signature & Date:	
the of corrective actions to be filled by Audior at the time of closure and Bayronmeater Se	COMPANIE OF
O A MEAKHAPATNAM SOA	
Status: Open / Closed. Signature & Date	
of corrective action	
Verification of effectiveness of contents (to be filled by auditor during next internal audit)	
Auditor Name / Sign	
Date	



ANDHRA UNIVERSITY VISAKHAPATNAM

AUF-06

AUDIT NON-CONFORMANCE REPORT (NCR)

NCR No .: 2020 109 1024

Dept / Function : Geoglephy Responsibility :
Responsibility:
Audit No. Date of Audit : -19200
DETAILS OF NONCONFORMITY (To be filled by Auditor)
ISO 9001 Clause : Reference Document(s) :
Nonconformity:
Moneomormity:
Peol.
DC T
Auditor Name: flogf Generative Agriculture & Date: f. Sunthe
CORRECTIVE ACTION REPORT (To be filled by Auditee)
Proposed correction : Nil
Root Cause Analysis
-
Proposed Corrective Action Nel -
Proposed Corrective Action:
Proposed Completion Date:
Auditee Name : Port. Anuja Tigga Signature & Date: Anuja Tigg. 07.09.202
tive actions (To be filled by Auditor at the time of desure)
Verification of corrective actions (To be filled by Auditor at the time of closure)
Department of Geography
Status: Open / Closed. Auditor Name : Decenteration University Signature & Date : Visakhapathant-530003
Status: Open / electric Signature & Date : Visakhapathant-530003
Verification of effectiveness of corrective action (to be filled by auditor during next internal audit)
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Auditor Name / Sign.
Date

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AUDIT NON-CONFORMANCE REPORT (NCR)

NCR No .: 2020 /09 10 25

Dept./ Function : GEOPHYSICS Por Responsibility :
Audit N
Date of Audit : 0 2 -09 - 20 20
DETAILS OF NONCONFORMITY (To be filled by Auditor)
ISO 9001 Clause : Reference Document(s) :
Nonconformity :
Auditor Name: 2 (C:d- (V:Svide) Bignature & Date:
Auditor Name: ~ (C.d. (V.Svide, Bignature & Date:
CORRECTIVE ACTION REPORT (To be filled by Auditee)
Proposed correction :
Root Cause Analysis :
Proposed Corrective Action:
Proposed Completion Date: Seberun
Auditee Name : HOD, Geophynis Signature & Date . 4 19 2020
Verification of corrective actions (To be filled by Auditor at the time of closure Andhra University
VISAKHAPATNAM
Status: Open / Closed. Auditor Name : Signeture & Date :
Verification of effectiveness of corrective action (to be filled by auditor during next internal audit)
Auditor Name / Sign.

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AUF-06

AUDIT NON-CONFORMANCE REPORT (NCR)

NCR No .: 2020 /09 1025

METEL:

Dept/Function : GeoPhySics Pon Responsibility :
Audit No. : Date of Audit : 02-09-2020
DETAILS OF NONCONFORMITY (To be filled by Auditor)
ISO 9001 Clause : Reference Document(s) :
Nonconformity: 1- TVN Rehardfreibert
Auditor Name: 2 led (V.S. de Signature & Date :
CORRECTIVE ACTION REPORT (To be filled by Auditee)
Proposed correction
Root Cause Analysis
Proposed Corrective Action
Proposed Completion Date:
Auditee Name : HOD, Geophynis Signature & Date . 419 2020
Verification of corrective actions (To be filled by Auditor at the time of closure) Andhra University
Status: Open / Closed. Auditor Name Sign: Jure & Date
Verification of effectiveness of corrective action (to be filled by auditor during next internal audit)
Auditor Name / Sign.

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ANDHRA UNIVERSITY VISAKHAPATNAM

AUF-06

AUDIT NON-CONFORMANCE REPORT (NCR)

NCR No .: 2020 091026

Dept./ Function: GEOLOGY Defa	Responsibility :
Audit No.	Date of Audit : 02-09-2020
DETAILS OF NONCONFO	ORMITY (To be filled by Auditor) ,
ISO 9001 Clause : Reference	Document(s) :
Nonconformity: + TVK Blampubash Auditor Name: 2 V. Sviden	Signature & Date :
CORRECTIVE ACTION R	EPORT (To be filled by Auditee)
Proposed correction :	
Root Cause Analysis :	\cap
Proposed Corrective Action :	ksleder.
Proposed Completion Date:	Head of the Department
Auditee Name :	Signature & Date : Andhra University
Verification of corrective actions (To be filled	
Status: Open / Closed.	Auditor Name Signature & Date
Verification of effectiveness of corrective act (to be filled by auditor during next internal audit)	
Auditor Name / Sign. Date :	

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AUF-06

AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNo.: 2020/19/027

Dept/Function: Dept of Inangane Responsibility: & Amplied Chemistry Audit No. Date of Audit : DETAILS OF NONCONFORMAITY (To be filled by Auditor) ISO 9001 Clause : Reference Document(s) : . To be updated Non-conformity : AUF 22, AVF-20 Auditor Name : D. Vax u devo, Redoy Signature & Date ! De y 2 · Kgy CORRECTIVE ACTION REPORT (To be filled by Auditee) Proposed correction Signitures of HOD, Research scholars attende registered to be updated **Root Cause Analysis Proposed Corrective Action :** Proposed Completion Date : Dr. B. B. V. Savlager Signature & Date HEAD OF H Auditee Name : Verification of corrective actions (To be filled by Auditor at the time of constine alytical chemistry AVF-22, 20 are upolated. Technology Andhra University Visakhapatnam Status: Open / Closed. Auditor Name 2. K8 Signature & Date : Verification of effectiveness of corrective action (To be filled by auditor during next internal audit) Auditor Name / Signature Date: 1. Barry 2. Kgm.

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ANDHRA UNIVERSITY VISAKHAPATNAM

AUF-06

AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNo.: 2020/09/D28

Dept./Function: Dept of Human Responsibility: for
Dept./Function: Dept of Human Responsibility: Head Genetics
Audit No. : Date of Audit : 99 2020
Date of Audit : Date of Audit
model.
Non-conformity: All velovors and
ISO 9001 Clause: Reference Document(s): Non-conformity: All y clouds are updated. Auditor Name: Dr. K. SITA MAN INYAN, Signature & Date ! Jeng 2 - 1983 CORRECTIVE ACTION REPORT (To be filled by Auditee)
prof. P. Vasnan VyAa
Auditor Name: Du- K. SITA MUNOT Signature & Date ! "
Proposed correction :
Root Cause Analysis :
Proposed Corrective Action :
Proposed Completion Date :
Auditee Name: N 1 AKSUM Signature & Date: N. Cele
Addite Name: 4. CAPOATI Signature & Date. 1910912020
Verification of corrective actions (To be filled by Auditor at the time of closure lead of the Departmen
Dept. of Human Genetic
Andhra University
Signature & Date: 2 1 Stanton K. Stowolutyer
Verification of effectiveness of corrective action (To be filled by auditor during next internal audit)
Auditor Name / Signature
1 parts
Date: 2. K. Sitzmanlype



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AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNo .: 2020 09 029

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VISAKHAPATNAM

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AUDIT NON-CONFORMANCE REPORT (NCR)

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NCR No: 2020 1091 D 30

Dept. / Function: MATHEMATICS	Responsibility:
Audit No :	Date of Audit: 03. 09.2020
DETAILS OF NONCONFORM	//AITY(To be filled by Auditor)
ISO 9001 Clause: Reference Doc	cument(s):
Nonconformity :	
Auditor Name : 1. Prof. P. K. Ratna Kumar	PKR
2. Dr. G. Naga Raja	Namy Signature & Date
CORRECTIVE ACTION REP	ORT (To be filled by Auditee)
Proposed correction :	
Root Cause Analysis : –	
Proposed Corrective Action :	
Proposed Completion Date :	
Auditee Name: Dr. G. NANAJI RAO	/
Head of the Department	< C. Maining
9440367745	Signature kepate
Verification of corrective actions (To be filled	by Auditor at the time of Mathematics
	Andhra University Visakhapatnam-550003
Status: Open / Closed. Auditor Name: 1. Pro	T. P. K. Ratna Kumar.
2. Dr.	G. Naga Raja. Napry
Verification of effective corrective action (To	be filled by Auditor during next internal audit)
Auditor Name: 1. Prof. P. K. Ratna Kumar.	Rohing
2. Dr. G. Naga Raja. 🛛 🔊	M
	Signature & Date



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AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNo.: 2020 09 031

Dept./Function: Materiology and Responsibility:	
Oleonography (R-9-2020	
Audit No. 9 () Date of Audit	
DETAILS OF NONCONFORMAITY (To be filled by Auditor)	
ISO 9001 Clause : Reference Document(s) :	
Nonconformity : N. G. J. C. S.	
Auditor Name: Signature & Date: PROF. K. BASOVAIC	HA)
CORRECTIVE ACTION REPORT (To be filled by Auditee)	-
Proposed correction :	
Root Cause Analysis : Proposed Corrective Action :	
Proposed Completion Date :	
* Pps Naider. Which.	
Auditee Name : Signature & Date : Head	
Varification of corrective actions (To be filled by Andre Department of Meteorolog)	
ANDHRA UNIVERSITY	
Status: Open / Closed. Auditor Name : VISAKHAPATNAM-530 003	
Signature & Date :	
Verification of effectiveness of corrective action (To be filled by auditor during next internal audit)	
(10 be filled by auditor during next internal audit)	
Auditor Name / Signature 1. V. Giggs Sob 2. Bewain A Date: (PROF-K. BASAVALAA))

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		AUF – 06
	AUDIT NON-CONFORMANCE REPORT (NCR)	

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UDIT NON-CONFORMANCE RE	PORT (NCR)
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NCR No: 2020 (09/032_

Audit No : Date of Audit: 31. 08.2020 DETAILS OF NONCONFORMAITY(To be filled by Auditor) ISO 9001 Clause: Reference Document(s): Nonconformity : Auditor Name : 1. Prof. P. K. Ratna Kumar 2. Dr. G. Naga Raja Mayor Signature & Date CORRECTIVE ACTION REPORT (To be filled by Auditee) Proposed correction : Root Cause Analysis : Proposed Corrective Action :
ISO 9001 Clause: Reference Document(s): Nonconformity : Auditor Name : 1. Prof. P. K. Ratna Kumar 2. Dr. G. Naga Raja Namy Signature & Date CORRECTIVE ACTION REPORT (To be filled by Auditee) Proposed correction : Root Cause Analysis :
Nonconformity : Auditor Name : 1. Prof. P. K. Ratna Kumar 2. Dr. G. Naga Raja May Signature & Date CORRECTIVE ACTION REPORT (To be filled by Auditee) Proposed correction : Root Cause Analysis :
Auditor Name : 1. Prof. P. K. Ratna Kumar 2. Dr. G. Naga Raja <i>Mapped Signature & Date</i> CORRECTIVE ACTION REPORT (To be filled by Auditee) Proposed correction : Root Cause Analysis
2. Dr. G. Naga Raja CORRECTIVE ACTION REPORT (To be filled by Auditee) Proposed correction : Root Cause Analysis :
CORRECTIVE ACTION REPORT (To be filled by Auditee) Proposed correction : Root Cause Analysis :
Proposed correction : Root Cause Analysis :
Root Cause Analysis : -
Proposed Corrective Action :
Proposed Completion Date :
Auditee Name: Dr. V. LAKSHMI Head of the Department 9490133021 DEPARTMENT OF MICROBIOLOG
Verification of corrective actions (To be filled by Auditor at the time of closure) VERSITY VISAKHAPATNAM - 530 003
Status: Open / Closed. Auditor Name: 1. Prof. P. K. Ratna Kumar.
2. Dr. G. Naga Raja. Naga Signature & Date
Verification of effective corrective action (To be filled by Auditor during next internal audit)
Auditor Name: 1, Prof. P. K. Ratna Kumar.
2. Dr. G. Naga Raja. Napon Signature & Date



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ANDHRA UNIVERSITY VISAKHAPATNAM

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AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNo.: 2020/09/033

Dept./Function: Nuclear Physics. Responsibility:
Audit No. : Date of Audit : 8th Sept-2020.
DETAILS OF NONCONFORMAITY (To be filled by Auditor)
ISO 9001 Clause : Reference Document(s) :
Nonconformity : None-
NVESMWITHY 222
Auditor Name : M Vijeya Shonibi Signature & Date : No Sauthi
CORRECTIVE ACTION REPORT (To be filled by Auditee)
Proposed correction : None-
Root Cause Analysis :
Status: Open / Closed / None Auditor Name : NVES Murthy MVijaya Santhi Signature & Date : NVES Murthy MVijaya Santhi
Verification of effectiveness of corrective action (To be filled by auditor during next internal audit)
Auditor Name / Signature Date:



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ANDHRA UNIVERSITY VISAKHAPATNAM

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AUDIT NON-CONFORMANCE REPORT (NCR)

NCR NC 2020 09 034

Dept of o's wir clease by Dr. V. Siddaich Hop
N Pro- V. Siddaich Date of Audit : 8-9-2020
DETALS OF NONCONFORMITY (To be filled by Auditor)
Reference Document(s) :
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Signature & Date Decentral
CORRECTIVE ACTION REPORT (To be filled by Auditee)
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or os d'Corrective Action
a s Comer a Date
mar Harne Dr. V. Skieldalen V. Sidt
erification of corrective actions. To be filled by Aug. CHEMISTRY FOODS DRUGS & WATER
ANDHRA UNIVERSITY, WALTAIR VISAKHAPATHAM-530 003
Auditor Name Mark Sniniver Ro - N. W
Signature & Date My · K-T. B. doven Part - Callo
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AUDIT NON-CONFORMANCE REPORT (NCR)

NCR N: 2020 09 034

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N PA	
1-10-	V. Siddered Date of Audit : 8-9-2020
ala apa adaptatan	DETAILS OF NONCONFORMITY (To be filled by Auditor)
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Monor inform ty	K-Snineivasa Roo
Marame Pr	. K.T. Balaran Padel Signature & Date 29/20
T THERE IS A TRANSPORT OF A STATE OF	CORRECTIVE ACTION REPORT (To be filled by Auditee)
and correct-	-NL -
oo Cruse Analy	ysis 🖌
rol os d Correct	ve Action
ans (comp.	Date Nanch 1/ Cu O
in in Harro	Dr. V. Skieldahn V. Sidt (7/9/2020 Hop Signature & Date 7/9/2020
erification of nor	HEAD OF THE DEPT. OF ORGANIC rective actions. To be filled by Augr CHEMISTIRY FOODS DRUGS & WATE NA ANDHRA UNIVERSITY, WALTAIR VISAKHAPATNAM-530 003
tor is "Open inf	ised Auditor Name Nor K. Svinivas do - M. W
	Signature & Date My · K-T. Deloren Part - (Cal
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AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNO .: 2020 (09) D35

Dept./Function: Chemistry Dept. of Phinical and Neuclean Chemistry Responsibility : Date of Audit : Audit No. DETAILS OF NONCONFORMAITY (To be filled by Auditor) ISO 9001 Clause : Reference Document(s): AUF-8,31,38,39 Non-conformity : 1. P. VASUDEVAREDDY 1. Servy 2. K. Sitawopelegeen Auditor Name: 2. K. STTA MANIK MAY Signature & Date: CORRECTIVE ACTION REPORT (To be filled by Auditee) : Recommended to up date AUF-8, 31, 38, 39 **Proposed correction** Root Cause Analysis : Lack A Knowledge. Proposed Corrective Action : Carried on Proposed Completion Date : 21 - 9-2020 Auditee Name : Signature & Date : Verification of corrective actions (To be filled by Auditor at the time of closure) 1. De M 2 . K. Silaman Auditor Name : Status: Open / Closed. Signature & Date : Verification of effectiveness of corrective action (To be filled by auditor during next internal audit) AUF-8,3138,39 one up dated Auditor Name / Signature 1. Barry 2. K. Sila manitype Date: 22 09/2020



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ANDHRA UNIVERSITY VISAKHAPATNAM

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AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNo.: 2020/09/ D36

Dept./Function: Dept of Physic,	۶ Responsibility :
Audit No.	Date of Audit : $14 - 09 - 20$.
DETAILS OF NONCO	ONFORMAITY (To be filled by Auditor)
	erence Document(s) :
Nonconformity: None	
1. Prof. N.V.E.S.N Auditor Name: 2 Prof. M.V. Sautt	Murithy Date Mr. Sauth
	TION REPORT (To be filled by Audites)
Proposed correction :	TON KEI OKI (10 be inied by Auditee)
	Physics, Science Dt. 14/9/20
Root Cause Analysis :	E Dt. 14/9/20
Proposed Corrective Action : -	Andura University
Proposed Completion Date :	Sakhepatnam-630 003
Auditee Name : D.B. VEN KATAD	Al Signature & Date: D-B. Veryand 14/9
Verification of corrective actions (To	be filled by Auditor at the time of closure)
Status: Open / Closed None	Auditor Name : NVES Kurty M. Vijay San)
Verification of effectiveness of correct	tive action (To be filled by auditor during next internal audit)
Auditor Name / Signature Date:	

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ANDHRA UNIVERSITY

VISAKHAPATNAM

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AUDIT NON-CONFORMANCE REPORT (NCR)

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NCR No: 2020 (09) D 37

Dept. / Function: STATISTICS	Responsibility:
Audit No :	Date of Audit: 03. 09.2020
DETAILS OF NONCONFOR	MAITY(To be filled by Auditor)
ISO 9001 Clause: Reference De	
Nonconformity :	
Auditor Name : 1. Prof. P. K. Ratna Kumar	PKR
2. Dr. G. Naga Raja	Napy Signature & Date
CORRECTIVE ACTION RE	PORT (To be filled by Auditee)
Proposed correction :	
Root Cause Analysis : –	
Proposed Corrective Action :	
Proposed Completion Date :	
Auditee Name: Prof. B. MUNISWAMY	BAD
Head of the Department	Vat
9492532800	Signature & Date
Verification of corrective actions (To be fille	d by Auditor at the time of closure) Department of Statistics Andbra University
Status: Open / Closed. Auditor Name: 1. P	rof. P. K. Ratna Kumar Hithanatham-53000
	Dr. G. Naga Raja.
	Signature & Date
Verification of effective corrective action (T	o be filled by Auditor during next internal audit)
Auditor Name: 1. Prof. P. K. Ratna Kumar.	" He feature
2. Dr. G. Naga Raja. 💦 🔨	Sapp.
	Signature & Date



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AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNo .: 2020 09 D38

Dept./Function : Zoology Responsibility :
Responsibility.
Audit No. : Date of Audit : 07.09.2020
DETAILS OF NONCONFORMAITY (To be filled by Auditor)
ISO 9001 Clause : Reference Document(s) :
Nonconformity: NO MCR
PUTE N. KISHORE BABU
Auditor Name: Signature & Date Nkgul Anija Tigg
CORRECTIVE ACTION REPORT (To be filled by Auditee)
Proposed correction : AUF 26, AUF 27 K AUF 154 will be updated
Root Cause Analysis :
Withe.
Proposed Corrective Action : HEAD
Department of Zoology
Proposed Completion Date: 7.9.2020 Andhra University Visakhapatnam
Auditee Name: C-Manjulathe Signature & Date: Marine 7/9/2020
Verification of corrective actions (To be filled by Auditor at the time of closure)
Status: Open/Closed. Auditor Name Prof. N. KISHORE BABU NEQUE
Signature & Date : V
Verification of effectiveness of corrective action (To be filled by auditor during next internal audit)
A No. N. A Simulation
Auditor Name / Signature
Date:



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AUDIT NON-CONFORMANCE REPORT (NCR)

NCR No .: 20 20 /09 /0 35

Dept / Function Psy chology Responsibility: Post. M.V.R. Raju
Audit No. Responsibility Pro Ho.D Date of Audit: 15-3-20,
DETAILS OF NONCONFORMITY (To be filled by Auditor)
ISO 9001 Clause : Reference Document(s) :
Nonconfermit
Auditor Name: Auditor Name: Signature & Date:
Auditor Name : Signature & Date :
CORRECTIVE ACTION REPORT (To be filled by Auditee)
Proposed correction
Root Cause Analysis
Proposed Corrective Action
Auditee Name : Hop, Hop, Icari Sometime And And
Verification of corrective actions (To be filled whold in the site of closure)
Visekhapatnem
Status, Open / Closed. Auditor Name
Signature & Date Pro IC.T.B. Coll - 16-9 Verification of effectiveness of corrective action (to be filled by auditor during next internal audit)
Auditor Name / Sign. Day k Company
Date: MF IC-J-B. kedy
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ANDHRA UNIVERSITY VISAKHAPATNAM

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AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNO .: 2020 / 19 / P3

Dept/Function: Principals of the Responsibility:	
Audit No. : Date of Audit :	
Audit No. : Date of Audit : DET t W 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
Date of Addit : Details OF NONCONFORMAITY (To be filled by Auditor)	
<u>AUF-17</u> A	
NOB-conformity: C = Protect to AUF-10 201	
ISO 9001 Clause: Reference Document(s): Non-conformity: Separtic Reistows for AVF-17 to be maintained in the AVF-16 and AVF-17 to Auditor Name: K. Lage 12: King for Signature & Date: CORDENCTIVE A CTION DEPORT (To be filled by Auditee)	
Auditor Name : K Later 2: Ki Stra han Signature & Date :	
CORRECTIVE ACTION REPORT (To be filled by Auditee)	
Proposed correction : Cultured to maintain Seperate relates	8
Root Cause Analysis :	
Proposed Corrective Action :	
Proposed Completion Date :	
K. Radhunnathalaro Assistant	REGISTRA
Kashur nacha koro Signature & Date : Marine Assistant Auditee Name : Signature & Date : 21/9/2 Add. College Verification of corrective actions (To be filled by Auditor at the time of closure) Visit hapatr	of Engg. (A)
Verification of corrective actions (To be filled by Auditor at the time of closure)	am - 530.003
Status: Open / Closed. Auditor Name : 1. Jack 2. 1985 Signature & Date :	
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Auditor Name / Signature	
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AUDIT NON-CONFORMANCE REPORT (NCR)

NCR NO .: 2020 091039

The second s
Dept/Function: Dept of Aochilectric Responsibility: Int. G. Visuana she Rice HOD
Audit No. My ALCE Date of Audit: 04-09-2020
DETAILS OF NONCONFORMITY (To be filled by Auditor)
ISO 9001 Clause : Reference Document(s) :
Nonconformity :
Ag 12. Sninivasa Acro - M-W
Auditor Name Dro 12, T. Balaven Fall - Chendrendrend Signature & Date: 4/5/2010
CORRECTIVE ACTION REPORT (To be filled by Auditee)
Proposed correction :
Root Cause Analysis
Proposed Corrective Action
Proposed Completion Date:
Proposed Completion Date: Auditee Name : And · G · V · S wand we have a Signature & Date : 4 7 2020 and on the single of the si
Ag le . Sninivese Reo - N. W Chart
Status: Open / Closed. Status: Open / Closed. Signature & Date :
Verification of effectiveness of corrective action (to be filled by auditor during next internal audit)
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My K.T. B. ladel - Vecelunter
4/3/20



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AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNO .: 2020 09 DYO -

1	Dept /Function : a tribund to a provide trasad	
-	Dept/Function: Dept & checical Responsibility: Ang. P. Rajendra Hasad	
- And	Audit No. : Date of Audit : 21-9-2020 DETAILS OF NONCONFORMALTY (To be filled by Auditor)	
and the second	Date of Audit : 21= 9= 2	
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-	ISO 9001 Clause : Reference Document(s) :	
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-	Nonconformity : - NIL-	
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involution.	a l Vo en fersion	2
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A contract of	CORRECTIVE ACTION REPORT (To be filled by Auditee)	
-	Proposed correction :	
And a second sec	- NIL-	
- International Contractional		
	Root Cause Analysis :	
	Proposed Corrective Action :	
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and the second s	Proposed Completion Date :	
	Proposed Completion Date : Department of Chemichi Engineerini	
-	Auditee Name: Proposed Completion Date: Proposed Completion Date: Oepartment of Chamichi Engineering (A Signature & Date: U Collige of Engineering (A	
	Verification of corrective actions (To be filled by Auditor at the time of closure)	Λ.
-	by K. Svinikasa Reo y. C	
-	Auddor Name	
	Signature & Date: DA K T. Balaran Paded _ 1	Calando
	Verification of effectiveness of corrective action (To be filled by auditor during next internal audit)	21/9/20
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	a mining for the Cal	
	Auditor Name / Signature Pry K. Snine asado L. W	
	Auditor Name / Signature Prof K. Spinic as also M. W Date: Prof K. T. Balaran Pall - Bac	
	My KI DE Grand - Cher	
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AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNO .: 2020 09 DYD

	The AL OF Lendre Presed	
Γ	Dept/Function: Dept & Checical Responsibility: M. p. Rajendra frasad Everineer Date of Audit: 21-9-2020	
	Audit No : Date of Audit : 21-9-2020	
	Audit No. : Date of Addit	
I	D. Commont(s) '	
I	ISO 9001 Clause : Reference Document(s) :	
	-NIL-	
	Nonconformity :	
	prof. K. Snine vasa Row 4. W	
and	Auditor Name: Pro 1 12. T. B. Partie & Date: Dearley 21/9/20	
	Auditor Name: V/G CORRECTIVE ACTION REPORT (To be filled by Auditee)	
	Proposed correction : - NIL-	
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	Root Cause Analysis :	
	Proposed Corrective Action :	
	VL 4ead of the Department	
	Proposed Completion Date : Department of Chemical Engineerin	
	Auditee Name: My P. Rajendra Boasad Department of Chamica Engineering (A Signature & Date: U Collige of Engineering (A	
	Auditee Name : 10 1 (Signature & Date : Verification of corrective actions (To be filled by Auditor at the time of closure)	
	by K. Svinilasa Roo y. C	- man
	Audior Name	
	Status: Open/Closed. Signature & Date: MAK T. Balarow Paded - 10	alando
-	Verification of effectiveness of corrective action (To be filled by auditor during next internal audit)	21/9/20
	Auditor Name / Signature Prul K, Chini vasa & V.	
	Date:	
	Auditor Name / Signature Pry K. Spinivasado M. W Date: My K. T. Balaran Pald - Decel	-ored
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AUDIT NON-CONFORMANCE REPORT (NCR) NCRNo.: 2020 (9) 042

Dept./Function : Civil Cype. Responsibility :
Audit No. : Date of Audit : 03.09.2020
DETAILS OF NONCONFORMALLY (10 be inted by radieory
ISO 9001 Clause : Reference Document(s) :
Nonconformity: R Pry TVK Pshanupralean 1. Pry V. S. & dovi
1. Pry V. Saidovi
Luditor Name: Signature & Date:
Auditor Name : CORRECTIVE ACTION REPORT (To be filled by Auditee)
Proposed correction :
Root Cause Analysis :
Proposed Corrective Action :
Proposed Concerno Action
Proposed Completion Date :
Proposed Completion Date : Auditee Name : Head of the Left of Civil Signature & Date partment 3 9 20 20 Verification of corrective actions (To be filled by Activity at the time of closure) College of Engineering (A)
Auditee Name: Hend of the self of Cin Signature & Date Partition Englished by
Verification of corrective actions (To be filed by Auditor at the time of closure) College of Engineering (A)
Andbra University, Visakhapathan
Signature & Date :
Verification of effectiveness of corrective action (To be filled by auditor during next internal audit)
Auditor Name / Signature
Date:



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ANDHRA UNIVERSITY VISAKHAPATNAM

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AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNo.: 2020 (09) D41

Tiller Da Hunda NAGESWARARO	
Dept./Function: Dept of computer sciencesponsibility: Pop KUDA. NAGESWARARD	
Audit No. : Date of Audit :	
Audit No. DETAILS OF NONCONFORMAITY (To be filled by Auditor)	
ISO 9001 Clause : Reference Document(s) :	
Nonconformity: NIL- Ag K. Snine Vasa Ruo M. W	
An K. Srine Vasa Ruo N. W	
Auditor Name: Mr K. T. Balaran Partieller & Date: Branchen 2019/20 Auditor Name: Mr K. T. Balaran Partieller & Date: Branchen 2019/20	
Auditor Name: pr K it Barner Bight and a Data by Auditee) CORRECTIVE ACTION REPORT (To be filled by Auditee)	
Proposed correction :	
Root Cause Analysis :	
Root Cause Analysis	
Proposed Corrective Action :	
Floposed Contents	
Proposed Completion Date :	
Thoposed company and accurate have	
Auditee Name: Proj Kuda NALES WAR KAS Signature & Date 122.9.2025 RING	
Auditee Name: Prog KODA NALESWARA RAG Signature & Date of 22.9.2020 RING Verification of corrective actions (To be filled by Auditor at One time of closure)	
Status: Open/Closed. Auditor Name : Prof Misakhapatnam-530 003	
Status: Open/Closed. Auditor Name : Pry Right Market 100	o he)
Signature & Date: Mr K-1- Balavaer Prodect Che	22/9/2
Verification of effectiveness of corrective action (To be filled by auditor during next internal audit)	
- NIC	
Auditor Name / Signature	×
Date:	
Auditor Name / Signature Date: Prod K. T. Belerow Part - Bake	20
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ANDHRA UNIVERSITY VISAKHAPATNAM

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AUDIT NON-CONFIRMANCE REPORT (NCR)

NCR No: 2020 09 042

Dept:./ Function: Fie	vernical Engr.	Responsibility:		
Audit No.	JEC, AV.	Date of Audit:	3/9/20	
		DDMITY (To be	filled by Auditor)	
	AILS OF NONCONFO Reference Doc	uments(s):	inited by i to analy	
ISO 9001 Clause:				
Nonconformity: No	me.	Sthel -	M.Santh	
Auditor Name:		Signature & I	Date:	
CO	RRECTIVE ACTION	REPORT(To be f	illed by Auditee)	
Proposed correction:	None			
Root Cause Analysis:		1024	of the bepartinent	fur
Proposed Corrective A	ction:	Dept. of A.U. Col	Electrical experiito (Electrical experiito (Elege of Engineerity andhra University andhra University apatnam-530 003. A.	p.
Proposed Completion I	Date: Thenting	Arsten	hapathanin MI.Co	whi
Auditee Name: 9 of T	ne Deperfuncering ne Deperfuncering (A) ctrical Engineering of Engineering A.P.	-Signature &	ditor at the time of clo	
Varification	of corrective actions(T			
Status Open / Closed	Complete.	Auditor Name:	NVESMurty	Or huly
			M.V.jayas	
Verification of effect	iveness of corrective ac	tion (to be filled b	by auditor during next	internal audit)
Auditor Name / Sign.	Detunt-			
Date:	na na sa ang ang ang ang ang ang ang ang ang an	and the first $(m) > m^{2}(r)$ we are the first metric $(r, r) = m^{2} + m^{2} + m^{2}$, $r = r^{2}$		



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AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNo .: 2020 09 043

Responsibility : Dept./Function: E.C.E (A) A.V. : Date of Audit : 10/09/2020 DETAILS OF NONCONFORMAITY (To be filled by Auditor) Audit No. Reference Document(s) : ISO 9001 Clause : Nonconformity: AUF-18,19,26,27-28,29,30-35_36,38_8 to be Updated Inf. Glinia Sankor 591200 prof. Glinis a Sankor Auditor Name: p. P. yodunon dal a hisignature & Date: CORRECTIVE ACTION REPORT (To be filled by Auditee) 10/09/0022 Proposed correction The above documents to be explated : det Con'd pandemic **Root Cause Analysis** Proposed Corrective Action : The above documents will be uplated Proposed Completion Date : 11/9/20 Status: Open / Closed. Virifid Virifid Virifid Verification of effectiveness of corrective action (To be filled by auditor during next internal audit) (Contraction of effectiveness of corrective action (To be filled by auditor during next internal audit) (Contraction of effectiveness of corrective action (To be filled by auditor during next internal audit) (Contraction of effectiveness of corrective action (To be filled by auditor during next internal audit) 101/2020-Auditor Name / Signature Date:



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AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNo .: 2020 109) D44

Descritility,	
Dept./Function: Dept. of Geo-Eng. Responsibility:	
Audit No. : Date of Audit : $09[09]2020$	
DETAILS OF NONCONFORMAITY (To be filled by Auditor)	
ISO 9001 Clause : Reference Document(s) :	
Nonconformity: None 1. Prof. N.V.E.S. Murthy Driver N. Sauf- Auditor Name: 2. Pop. M. V. java Santh: Signature & Date: CORDECTIVE ACTION REPORT (To be filled by Audited)	
Auditor Name: 2 Rot MV: jaya Santhi Signature & Date:	
CORRECTIVE ACTION REPORT (To be filled by Auditee)	
Proposed correction : None.	
Root Cause Analysis :	
Proposed Corrective Action : —	
Proposed Completion Date :	
Auditee Name: Prof P Jaga dress signature & Date: Real of the Jan 19 9 208	80.
Verification of corrective actions (To be filled by Auditor at the time of closure ERING 12 R.	
Status: Open / Closed, None- Auditor Name : Protect Control (A) 2000	\mathcal{P}
Verification of effectiveness of corrective action (To be filled by auditor during next internal audit)	5
Auditor Name / Signature Date:	



ANDHRA UNIVERSITY VISAKHAPATNAM

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AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNO .: 2020 1091 D45

Dept./Function: Deptrinstrument Responsibility: lecturators	
Audit No. : Date of Addit ? DETAILS OF NONCONFORMAITY (To be filled by Auditor)	
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SU 9001 Chause	
Nonconformity: - Nil V-Girps Sho Beau	l.
Auditor Name: Auditor Nauditor Name: Auditor Name: Auditor Name: Auditor Nau) i
Auditor Name : Signature & Date :	
CODDECTIVE ACTION REPORT (10 DE IIICU DY Audree)	
Proposed correction : AUF 35,36,8,31,38,39 are incompleted.	
Root Cause Analysis : No lechnical staff	
1 Convertive Action: $15 - 9 - 20 CC$	
Proposed Completion Date: 15-9-2020 Proposed Completion Date: 15-9-2020 Probably Strange Proposed Completion Date: 15-9-2020	
Proposed Completion Date: Prof. Y. Strinevasa Law Auditee Name: Verification of corrective actions (To be filled by Auditor at the time of closure) We give Sector Head of the Department Te	
Verification of corrective actions (To be filled by Auditor at the time of closure)	Int
Verification of corrective actions (To be filled by Auditor at the time of closure) Status: Open / Closed. Auditor Name Signature & Date: K Base of the Department of Instrument Terminet Signature & Date: K Base of the Department of Instrument Terminet Signature & Date: K Base of the Department of Instrument Terminet Signature & Date: K	chnolog ing (A)
Verification of effectiveness of corrective action (To be filled by auditor during next internal audit)	
Auditor Name / Signature 1. V. Gizin Com Bean - Date: Date: CPrf V. GIRMAR WSTRY C. P. K. Basarciah	,

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VISAKHAPATNAM			
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	AUDIT NON-CONFORMANCE REPORT (NCR)		
	NCR No: 2020 09 D46		
Dept. / Function:	: MARINE ENGINEERING Responsibility:		
Audit No	: Date of Audit: 31. 08.2020		
D	DETAILS OF NONCONFORMAITY(To be filled by Auditor)		
ISO 9001 Clause	e: <u>Reference Document(s):</u>		
Nonconformity	:		
Auditor Name	: 1. Prof. P. K. Ratna Kumar		
Additor Marine	2. Dr. G. Naga Raja Nafry		
	<i>V</i> Signature & Date		
C	CORRECTIVE ACTION REPORT (To be filled by Auditee)		
Proposed corre	ction :		
Root Cause Ana	alysis : –		
Proposed Corre	ective Action :		
Proposed Compl	letion Date :		
	$V_{10} = V_{10} = V$		
	Head of the Department		
	partment of Engineering		
Verification of c	orrective actions (To be filled by Auditor at the time of closure at nam-530003		
Status: Open / CI	osed. Auditor Name: 1. Prof. P. K. Ratna Kumar.		
	2. Dr. G. Naga Raja.		
	Signature & Date		
Verification of ef	ffective corrective action (To be filled by Auditor during next internal audit)		
Auditor Name: 1.	Prof. P. K. Ratna Kumar.		
	Prof. P. K. Ratna Kumar. Dr. G. Naga Raja. Napry		
	Signature & Date		



AUF-06

AUDIT NON-CONFORMANCE REPORT (NCR) NCRNo.: 2020/09/ D47

Dept./Function: Mcchanical Responsibility:
Audit No. : Enpresent Bate of Audit : 8/9/2020.
DETAILS OF NONCONFORMAITY (To be filled by Auditor)
ISO 9001 Clause : Reference Document(s) :
Nonconformity :
1 Prof. J. K. Rodrickenal Alend - 1.1
Auditor Name: 2. Rog. G. Nagalar Signature & Date: 9 99 20.
CORRECTIVE ACTION REPORT (To be filled by Auditee)
Proposed correction :
Root Cause Analysis :
Root Cause Analysis
Proposed Corrective Action :
HEAD OF THE DEPARTMENT OF
Proposed Completion Date : MECHANICAL ENGINEERING
Auditee Name: Prof. K. Veukoda Signature & Date:
Varification of corrective actions (To be filled by Auditor at the time of classes)
1 Prot AK Ratia Kuma
Status: Open / Closed. Auditor Name : by () alarge (
Status: Open / Closed. Signature & Date : - fmf. G Majaren.
Verification of effectiveness of corrective action (To be filled by auditor during next internal audit)
Auditor Name / Signature 2. Por G Magreen My
Auditor Name / Signature
Date: 2. Mapleon in



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ANDHRA UNIVERSITY VISAKHAPATNAM

AUF-06

AUDIT NON-CONFORMANCE REPORT (NCR)

NCR No .: 2020 091048

Dept/Function: Dept of Metalhusia Responsibility: Dry J. Babe his HOD	
Audit No. :	
DETAILS OF NONCONFORMITY (To be filled by Auditor)	
ISO 9001 Clause : Reference Document(s) :	
Nonconformity: P.J. K. Srimivasa Read M. and	
Auditor Name: My K.T. B. Pad Signature & Date: Cechentry vis 100	
CORRECTIVE ACTION REPORT (To be filled by Auditee)	
Proposed correction	
Root Cause Analysis :	
Proposed Corrective Action :	
Proposed Completion Date:	
Auditee Name : Py J. Baba Ros Head of the Department of Head of the Department of	
Verification of corrective actions (To be filled by Additor at the time of closure)	N
Status: Open / Closed. Signature & Date: Ang. K. T. B. Pader - Con	
Verification of effectiveness of corrective action (to be filled by auditor during next internal audit)	0
Auditor Name / Sign. Date :	
pg. K. grinivasa Res - M. a	
By K.T. Balcounfeal - Carsenter)

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ANDHRA UNIVERSITY		
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		AUF – 06
	AUDIT NON-CONFORMANCE	EREPORT (NCR)
		NCR No: 2020)07) D49
Dept. / Function:	ENGINEERING CHEMISTRY Resp	onsibility:
Audit No :	Date	of Audit: 04. 09.2020
DI	ETAILS OF NONCONFORMAITY	(To be filled by Auditor)
ISO 9001 Clause	: <u>Reference Document(</u>	<u>(s):</u>
Nonconformity	:	
Auditor Name	: 1. Prof. P. K. Ratna Kumar	
	2. Dr. G. Naga Raja 🛛 🔪	Signature & Date
C	ORRECTIVE ACTION REPORT (1	Γο be filled by Auditee)
Proposed correc		
Root Cause Ana	lysis : –	
Proposed Corre	ctive Action :	
Proposed Comple	etion Date :	Q
Auditee Name:	Dr. S. PAUL DOUGLAS	Share Do 6
	Head of the Department	Head of the Department
	9347098430	Dept. of Engineering Chemis Signature&IDge of Engineering (.
Verification of co	prrective actions (To be filled by Audi	itor at the time of closure patnam-530003, A.
Status: Open / Clo	osed. Auditor Name: 1. Prof. P. K.	Ratna Kumar.
	2. Dr. G. Nag	ja Raja. Name
		Signature & Date
Verification of ef	ective corrective action (To be filled	by Auditor during next internal audit)
	Prof. P. K. Ratna Kumar.	
2.1	Dr. G. Naga Raja. Mann	Signature & Dat
		Signature & Date

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AUF-06

AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNO.: 2020 (9) 50

Dept./Function: Ergineering Mattendie Responsibility: Audita Aucerta) Date of Audit : 29-08-2020
Audit No. : Date of Audit : 29-08-2020 DETAILS OF NONCONFORMAITY (To be filled by Auditor)
DETAILS OF NONCONFORMATTY (TO be miled by Fladier)
ISO 9001 Clause : Reference Document(s) :
Nonconformity: 1. M. Satra Anwedda Auditor Name: 2. P. Scientifie Signature & Date: 2. f. Scientifie ODD DESTINE ACTION REPORT (To be filled by Auditee)
Auditor Name : 2, P. Screette Signature & Date : 2, f Screette CORRECTIVE ACTION REPORT (To be filled by Auditee)
the second se
Proposed correction : No NCR -
Root Cause Analysis :
Proposed Corrective Action: - Que have a file of the Department of
Auditee Name : Prog Ch . Son ILi Surder Rei Signatur Ad J College of Engineering (A)
Verification of corrective actions (10 be filled by Audikipantine of crosure) 1. M. Salve Anurcala 2. J. Scienche
Status: Open / Closed. Auditor Name : Mtre Adda Signature & Date : 14/07/2020
Verification of effectiveness of corrective action (To be filled by auditor during next internal audit)

Auditor Name / Signature Date:

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ANDHRA UNIVERSITY VISAKHAPATNAM

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AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNo.: 2020 09 (D 58

Dept./Function: Ergineering Mattematics AVCE(A) Audit No. : Date of Audit : 29/08/2020
DETAILS OF NONCONFORMAITY (To be filled by Auditor) ISO 9001 Clause : Reference Document(s) :
Nonconformity: No NeR - I- Messter Amuredle Auditor Name: 2. P. Surettee CORRECTIVE ACTION REPORT (To be filled by Auditee)
Proposed correction :
Root Cause Analysis :
Proposed Corrective Action :
Auditee Name : Prof Y-Rama kuisha Signature & Date :
Auditee Name : My Y-Rome Kuishia Signature & Date :
Verification of corrective actions (To be filled by of the prime of closure) A.U College of Engineering (A) Status: Open / Closed. Auditor Nanipapatham - 530 003
Signature & Date :
Verification of effectiveness of corrective action (To be filled by auditor during next internal audit)

Auditor Name / Signature Date:



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ANDHRA UNIVERSITY VISAKHAPATNAM

AUF-06

AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNo .: 2020 09 D 52

Dept./Function: Dept. of Hunardie es Responsibility:	
Audit No. Date of Audit : 17-09-2020	
DETAILS OF NONCONFORMAITY (To be filled by Auditor)	
ISO 9001 Clause : Reference Document(s) :	
- Nil -	
Nonconformity :	
Pot V. GIRIODS ASTRY CLIMIT	
Auditor Name: (V-GIRIORS ASTRY Auditor Name: (V-GIRIORS SS 5) Signature & Date: Head Signature & Date: Head	
CORRECTIVE ACTION REPORT (To be Utilities & Social Sciences	
Proposed correction ANDHRA UNIVERSITY	1
VISAKHAPATNAM-530003	
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Root Cause Analysis :	/
Proposed Corrective Action :	
Proposed Completion Date :	/
Proposed Completion Date.	
Auditee Name : Signature & Date :	
Verification of corrective actions (To be filled by Auditor at the time of closure)	
Status: Open / Closed. Auditor Name : 1. B-Pav ~	
Signature & Date : 2. V. Gupps Suff	
Verification of effectiveness of corrective action (To be filled by auditor during next internal audit)	
	-
V-GIRIORSASTRY , V- CELAPS So 5	
Auditor Name / Signature	
Date: Kelascraiah D. Realing	
21 5-3012	



AUF-06

AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNo .: 2020 (09) PY Dept. Function: Principal Office Responsibility: Internet Auditor Audit No. : Date of Audit : 26/08/2520DETAILS OF NONCONFORMAITY (To be filled by Auditor) Reference Document(s) : ISO 9001 Clause : - No NCR Nonconformity : 1. Massty + de 14/09/2020 2. P. Scerettre Auditor Name: 2. P. Sweettre Signature & Date : CORRECTIVE ACTION REPORT (To be filled by Auditee) Proposed correction No NCR -**Root Cause Analysis** : **Proposed Corrective Action :** Ich' Proposed Completion Date : Auditee Name : Rg Sik. Bhalli Signature & Dateline Verification of corrective actions (10 be filled by AANDHRADUNIVERSITY College of Engineering for women Auditor Name ISAKHAPATNAM-530 017 Signature & Date: 1. M-Salza Annedle 2. P-Scepture Status: Open / Closed. Verification of effectiveness of corrective action (10 be filled by auditorly ripe fext internal audit) Auditor Name / Signature

Date:



AUF-06

AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNo .: 2020 109 053

Dept./Function: CS2SE Responsibility: Auce(w) Audit No. : 2, Date of Audit : O2.09.2020, DETAILS OF NONCONFORMAITY (To be filled by Auditor) <u>ISO 9001 Clause</u> : <u>Reference Document(s)</u> : Nonconformity: NO NCR, Prof. N. Killure & Date: Change & Date: Nonconformity: No NCR,	
Audit No.: 2,Date of Audit: $O2 \cdot O9 \cdot 2020$,DETAILS OF NONCONFORMAITY (To be filled by Auditor)ISO 9001 Clause :Reference Document(s) :Nonconformity :NONCR,Prd. N. Kulture & & U	
DETAILS OF NONCONFORMAITY (To be filled by Auditor) ISO 9001 Clause: Reference Document(s): Nonconformity: NO NCR, Prd. N. Kulture & SU	
ISO 9001 Clause: Reference Document(s): Nonconformity: NO NCR, Pref. N. Kupure & SU	
Nonconformity: NO NCR, fref. N. Kipure & &	
Nonconformity: NO NCR, Pr.d. N. Kiphere B&U	
Prof. N. Kipure B&U	
fret.N. Kipure B&U	
Prof. N. KIPUR B&U	
Auditor Name: 2. 1. Autor O. C. A Signature & Date: Audit O. C. Nogen	0
A HOHOL NAME TOAK, HANNING AND THAN THAT A STATE OF A COMPANY A STATE OF A	
Auditor Name : Prok. ANUJO 144A Signature & Date : Anuja ficer Nom CORRECTIVE ACTION REPORT (To be filled by Auditee)	
Proposed correction : NIL	
Root Cause Analysis :	
Proposed Corrective Action :	
Proposed Completion Date :	
Auditee Name: Prof- B. Projug Signature & Date: BOW 2/3/2020	
Auditee Name : Prof - B. Projeg Signature & Date : Boy 2/9/2020 Verification of corrective actions (To be filled by Auditor at the time of closure)	
Status: Open / Closed. Auditor Name Parte of the Beartened ABU M	ha J
Signature & Date All Silence of Face of All	- Ma
Verification of effectiveness of corrective action (To be filled by auditon during next internal a	11
vermeation of encetiveness of corrective action (10 be fineboy auchtoniuring next internal a	iudit)
Auditor Name / Signature	
Date:	



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ANDHRA UNIVERSITY VISAKHAPATNAM

AUF-06

AUDIT NON-CONFORMANCE REPORT (NCR)

	NCR No.: 2020 9	054
	AUCEW	
	Dept./Function: Meclecical Cuertuces Responsibility: Arg. S.K. Bhatte	
	Audit No. : Date of Audit : 01 09 2020	
	DETAILS OF NONCONFORMITY (To be filled by Auditor)	
	ISO 9001 Clause : Reference Document(s) :	
	Nonconformity: NIL	
	Pry. K. Srinikesa hoo I. N. W	
	Auditor Name: Prz. K. T. Balance fall Signature & Date: 19/202	ବ
	CORRECTIVE ACTION REPORT (To be filled by Auditee)	
	Proposed correction : NIL	
	Root Cause Analysis	
	Proposed Corrective Action : -	
	Proposed Completion Date:	
	Auditee Name : Prof S.K. Bhatti Signature & Date : BHATTI HOD Meck. Dete: BHATTI	
	Verification of corrective actions (To be filled by Auditor at the time of calo ENGINEERING	
	VISAKHAPATNAM IN C 1 VOCC BOOK	an
	Status: Open / Closed. Auditor Name	VI e av
ł	Signature & Date : Dr 1C . T. Balc, an fact Verification of effectiveness of corrective action	Val.
	(to be filled by auditor during next internal audit)	1 llow
	- 054 -	
-	Auditor Name / Sign. My K. Svinivasa Roo - 4. W Date: My K. T. Balance Pace - Cache de	
L	Date: Dry K.T. Balance face - Checked	
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AUF-06

AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNo.: 2020 09 55

Dept./Function: ECE, AUCENE	Responsibility :	
Audit No. :	Date of Audit : 05/09/2020	
DETAILS OF NONCON	FORMAITY (To be filled by Auditor)	
ISO 9001 Clause : Refere	nce Document(s) :	
Nonconformity : Nil	nein	امد
Auditor Name: prof P polokondala	W Signature & Date: July Orlog 1020	
CORRECTIVE ACTIO	ON REPORT (To be filled by Auditee)	
Proposed correction :		
Root Cause Analysis :	- N12 -	
Proposed Corrective Action :		
Proposed Completion Date :	\frown	
Auditee Name : Dr. S. ARUN	A Signature & Date : S- Muer 05/09/2020	
Verification of corrective actions (To be	e filled by Auditor at the time of closure)	-
Status: Open / Closed. Au Sig	uditor Name : prof. h. Crini î a laula 24 - Magine gnature & Date : prof. p. yadunudala a ansoglogino-	20
Verification of effectiveness of correcti	ve action (To be filled by auditor during next internal audit)	
Auditor Name / Signature Date:		



AUF-06

AUDIT NON-CONFORMANCE REPORT (NCR) NCRNo .: 2020 09 056 Responsibility: Internal Auditor Dept./Function: Electercel, Eigineering Audit No. AUCE(W) : $A \cup (E \cup A)$ Date of Audit : 26/08/2020DETAILS OF NONCONFORMAITY (To be filled by Auditor) Audit No. Reference Document(s) : ISO 9001 Clause : No NCR -Signature & Date ?. P. Generthe Nonconformity : 1. n= stype Amurade 2. P. Suntu Auditor Name : **CORRECTIVE ACTION REPORT (To be filled by Auditee)** Proposed correction NO NER -**Root Cause Analysis** I/c HoD of **Proposed Corrective Action :** Proposed Completion Date : Signature & Date Auditee Name : Verification of corrective actions (To be filled by Auditor at the time of closure I. M. Salya Aswedd 2. P. Junto Auditor Name Status: Open / Closed. Signature & Date : Verification of effectiveness of corrective action (To be filled by auditor during next internal audit) Auditor Name / Signature Date:



AUF-06

AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNO .: 2020 091057 Dept. Function : Civil Deputment AUCE(W) Responsibility: Internal Auditor Date of Audit : 26 08 2020 Audit No. DETAILS OF NONCONFORMAITY (To be filled by Auditor) **Reference Document(s) :** ISO 9001 Clause : No NER -Nonconformity : 1-Mc Silger toller 14/09/2020 Signature & Date : f. Frentlie 1. M. satya Anwedle 2. P. Serette Auditor Name : **CORRECTIVE ACTION REPORT (To be filled by Auditee)** Proposed correction No NCR -Root Cause Analysis : **Proposed Corrective Action :** Proposed Completion Date : Signature & Date Head of the Department Auditee Name : O My G. Siversto Signature & Date Head of the Department Verification of corrective actions (To be filled by Auditor at the purchased in the Signature for Wo College of Engineering for Women Status: Open Closed. Andhra University Auditor Name sakhapatnam Signature & Date : Verification of effectiveness of corrective action (To be filled by t internal audit) 14/09/2020 p. Gentles Auditor Name / Signature Date:



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ANDHRA UNIVERSITY VISAKHAPATNAM

AUF-06

AUDIT NON-CONFORMANCE REPORT (NCR)

NCR No .: 2020 0910 DC1

Dept./Function: CDC office	Responsibility :		
Audit No. :	Date of Audit : 29.08.2020		
DETAILS OF NONCONF	ORMITY (To be filled by Auditor)		
ISO 9001 Clause : Reference	Document(s) :		
Nonconformity			
Auditor Name :	Signature & Date :		
	REPORT (To be filled by Auditee)		
Proposed correction :			
Root Cause Analysis :			
Proposed Corrective Action :	1 aturn 5		
Proposed Completion Date:	Dean		
Auditee Name : Dean of CDC	College Development Council Signatur And Art University Yisakhapatnam-530.003		
Verification of corrective actions (To be filled by Auditor at the time of closure)			
Status: Open / Closed.	Auditor Name : Signe.ture & Date :		
Verification of effectiveness of corrective action (to be filled by auditor during next internal audit)			
Auditor Name / Sign. Date :			



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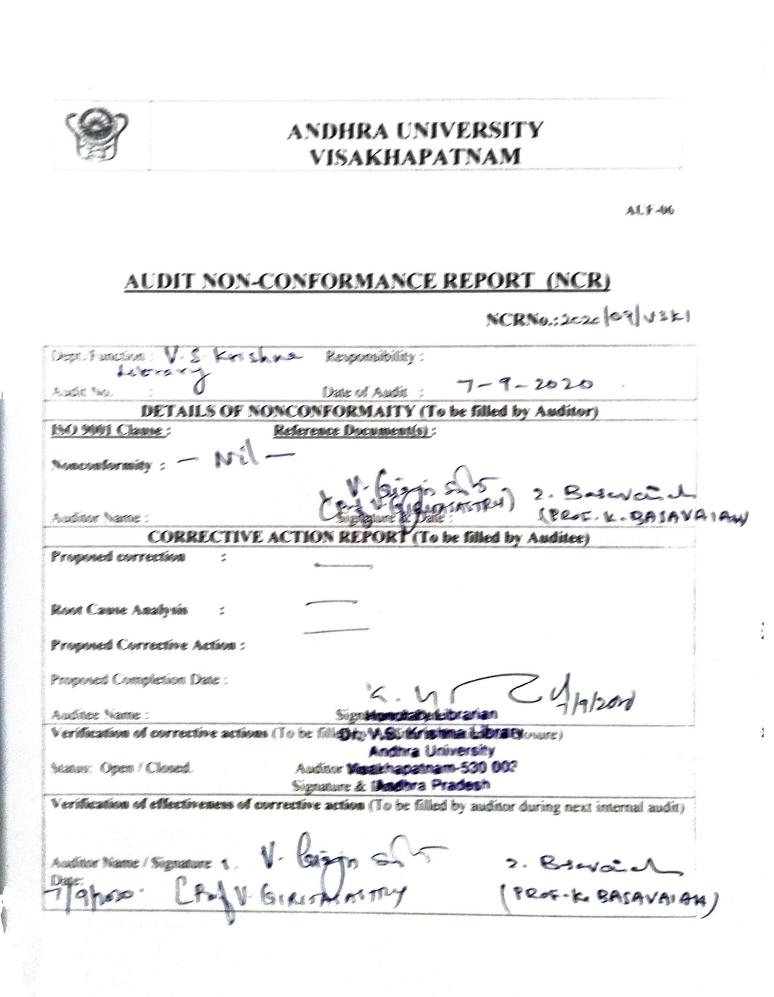
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AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNO .: 2020/09/DOAL

Dept./Function: Directorate of Responsibility:			
Admissions			
Audit No. : Date of Audit : 04 - 07 - 2			
DETAILS OF NONCONFORMAITY (To be filled by Au	ditor)		
ISO 9001 Clause : Reference Document(s) :			
b land			
Nonconformity: None.			
DINKES MURTER A MARTIN	$P \cap I$		
1. Thop N. V. L'S The trug (2 + 14/9/20.	Santi		
Auditor Name : 2. Prof. M. Vijaya Sonthi Signature & Date : CORRECTIVE ACTION REPORT (To be filled by Aud			
CORRECTIVE ACTION REPORT (To be filled by Auc	litee)		
Proposed correction : NONE			
Root Cause Analysis : -	NDA2		
Root Cause Analysis : -			
Proposed Corrective Action : -			
Proposed Completion Date : -			
	4DenSST		
Auditee Name : Prof. D. A. Naide Signature & Date : Low	aide 4/9/2020		
Verification of corrective actions (To be filled by Auditor at the time of closure			
Status: Open / Closed. Auditor Name : NVES Mur hy Signature & Date : Shully 3	(M. Vijaya saniki		
Signature & Date : OShulu 3.	9/2		
Signature & Date : Verification of effectiveness of corrective action (To be filled by auditor during next internal audit)			
Auditor Name / Signature NVES Murity M-Vieya Sapl	ni l		
Auditor Name / Signature NVES Murity M-Vilaya Sapl Date: 4/9/20. Shut C M. O.			
V.Saut	4		





AUF-06

AUDIT NON-CONFORMANCE REPORT (NCR)

NCR No.: 2020 09 PS
Principal Africe
Dept/Function: college of pharmacy Responsibility: pro. K. V. Raman Handes
Audit No. : Date of Audit : $07 - 03 - 2020$
DETAILS OF NONCONFORMITY (To be filled by Auditor)
ISO 9001 Clause : Reference Document(s) :
Nonconformity :
Mg. K. Snewiv-sako N. W
Auditor Name PAIL.T. B. Pade Signature & Date: Backen had
CORRECTIVE ACTION REPORT (To be filled by Auditee)
Proposed correction
Root Cause Analysis
Proposed Corrective Action
the second se
Proposed Completion Date:
Auditee Name : Provinci provin
Principul Signature & Date PRINCIPAL
Verification of corrective actions (To be filled by Auditor at the time of closure harmaceutical Sciences
Andhra University
Status: Open / Closed. Auditor Name
Signature & Date : My Kr. B. Pach - K
Verification of effectiveness of corrective action (to be filled by auditor during next internal audit)
Aut. K. Suiceivezato
Auditor Name / Sign. Date: My K. Suiseibes a ko
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AUF-06

AUDIT NON-CONFORMANCE REPORT (NCR)

NCRNo .: 2020 09 570 1

Dept./Function : EXAMINATIONS Responsibility : -AILY. Date of Audit : 09/09/ 2020 Audit No. DETAILS OF NONCONFORMAITY (To be filled by Auditor) Reference Document(s) : ISO 9001 Clause : Nonconformity: AUF-72,73,79,83 ad 8 to be updated/property to be NOG. CARDINIJaSonKov Auditor Name : 1 not - P. yed or yourd a Usignature & Date : **CORRECTIVE ACTION REPORT** (To be filled by Auditee) : The above documents will be maintained proper by following the briggestions. **Proposed correction** : over look **Root Cause Analysis** Proposed Corrective Action: we instruct the respective persons for Proposed Completion Date: 10-09-2020 A DADI DOAN DE the Proposed Proposed Completion Date: 10-09-2020 Auditee Name : frof · G, V:RAVINDRANADH BABU, DEAN, PG ffrof · Examines · Verification of corrective actions (To be filled by Auditor at the time of closure) jq[0] Status: Open / Closed. Auditor Name :() Verification of effectiveness of corrective action (To Bentilled by au during next internal audit) VISAKHAPATH (9.GIKIJACANLOA) Auditor Name / Signature Date:



AUF-06

AUDIT NON-CONFORMANCE REPORT (NCR)

NCR NO. 2020 091 PG

Dept/Function Jaw College	Responsibility Julian Auditor
Audit No	Date of Audit : 21/9/2020.
DETAILS OF NONCON	FORMITY (To be filled by Auditor)
ISO 9001 Clause : Reference	ce Document(s) :
Nonconformity :	
Nonconformity: 1. Ø. Stya Druda Auditor Name	Signature & Date: P. Scalette
	REPORT (To be filled by Auditee)
Proposed correction Ni	
Root Cause Analysis	
Proposed Corrective Action	
Proposed Completion Date	
Auditee Name . Jef . S. Sumetra	Signature & Date: x S- Survive
Verification of corrective actions (To be fille	d by Auditor at the time of clogure) R. Ambedkar College of Law
Status Open / Closed	Auditor Name P. Suret Wisakhapatnam Signature & Date
Verification of effectiveness of corrective a (to be filled by auditor during next internal auditor)	
Auditor Name / Sign Date	

Internal Audit NCR Summary:



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ANDHRA UNIVERSITY VISAKHAPATNAM

AUF-07

INTERNAL AUDIT NCR SUMMARY

Audit Date(s) : 31st August - 15th September 2020

SI. No.	College / Departments / Section	Total No. of Nonconformities
۲ l.	Vice-Chancellor	Nil
2.	Rector	Nil
3.	Registrar	Nil
4.	MR Office	Nil
5.	Principal, AU College of Arts & Commerce	Nil
6.	Anthropology	Nil
7.	Commerce & Mgt. Studies	Nil
•8.	Economics	Nil
9.	Education	Nil
10	English	Nil
11.	Fine Arts	5
12.	Hindi	Nil
13.	History and Archaeology	Nil
14.	Human Resource Management	Nil
15.	Journalism & Mass Communication	Nil
16.	Library & Information Science	Nil
17.	Music & Dance	Nil
18.	Philosophy	Nil
19.	Political Science & Public Administration	Nil
20.	Social Work	6
21.	Sociology	1
• 22.	Telugu	Nil
23.	Physical Education	Nil
24.	Principal, AU College of Science & Technology	Nil
25.	Applied Mathematics	Nil
26.	Biochemistry	Nil
27.	Biotechnology	Nil
28.	Botany	Nil
29.	Environmental Sciences	Nil
30.	Food & Nutrition and Dietetics	Nil
31.	Geography	Nil
32.	Geology	Nil
33.	Geophysics	Nil
34.	Human Genetics	Nil

35.	Inorganic & Andrei Lou	
36.	Inorganic & Analytical Chemistry Marine Living Resources	NIL
37.	Mathematics	Nil
38.	Neteoralam & O	Nil
39.	Meteorology & Oceanography Microbiology	Nil
40.	Nuclear Physics	Nil
41.	Organie Chemistry	Nil
42.	Perchalam & p	NE
43.	Psychology & Parapsychology Physics	Nil
44.	Statistics	Nil
45.	Zoology	Nil
46.		Nil
47.	Principal, College of Engineering(A) Architecture	NI
48.		Nil
<u>40.</u>	Chemical Engineering	Nil
<u></u> 	Civil Engineering	Nil
<u>50.</u> 51.	Computer Science & Systems Engineering	Nil
	Electrical Engineering E C E	Nil
52.		Nil
<u>53.</u> 54.	Geo-Engineering	Nil
	Instrument Technology	L
55.	Marine Engineering	Nil
56. 57.	Mechanical Engineering Metallurgical Engineering	Nil
<u>58.</u> 59.	Engineering Chemistry Engineering Mathematics	Nil Nil
<u></u> 60.	Engineering Physics	Nil
<u>60.</u> 61.	Humanities and Social Sciences	Nil
62.	Principal, College of Engineering for Women	Nil
63.	Computer Science Engineering (AUCEW)	Nil
64.	Mechanical Engineering (AUCEW)	Nil
	ECE (AUCEW)	Nil
65.	Electrical Engineering & Civil Engineering (AUCEW)	Nil
66.	Principal, College of Pharmaceutical Sciences	Nil
67.	Principal, Dr. B.R.Ambedkar College of Law	Nil
<u>68.</u>	College Development Council	Nil
69 70	Directorate of Admissions	Nil
71.	Examination Branch	Nil
72.	Dr. V.S.Krishna Library	Nil

5) Management Review meeting:

Following the internal Academic and administrative audits done by the internal auditors team, the annual Top Mangement review meeting was conducted by the office of IQAC on 14/09/2020 at 11:30am in Vice Chancellors Chamber to all the Top Mangement.

6) Action Taken report:

Minutes of the previous meeting were presented and ratified by the Top Mangement. Due to COVID 19 constraints, the agenda points were discussed for the present MR meeting before the VC, Rector and Registrar and the following is the action taken report on Academic and Administrative audit.

- 1) The Top Mangement has discussed Quality objectives at department level and decided to carryout trend analysis annually.
- 2) To maintain Nonconformities related to process performance and corrective action to be taken if any in the departments.
- 3) To obtain feedbacks at the end of every semester and the stakeholders feedback will be taken as and when required. As per the suggestions of external auditors and Hon'ble VC the office of IQAC has initiated the process of Online student feedback system in coordination with AU computer centre. Coordinator expressed that due to pandemic the process has been delayed.
- 4) The effectiveness of action taken should be reviewed in next MR.
- 5) Hon'ble VC has expressed that the university should gear up for NAAC visit in 2023.

7) ISO 9001:2015 external audits by TUV SUD:

The ISO 9001:2015 surveillance audit to conduct academic and administrative audit is scheduled as follows:

Date of ISO surveillance Audit : 2020-09-26 (Online)

External audit members from TUV-SUD: 1. B.Rohit (Lead auditor)

- 2. K. Sundaresan
- 3. Pavan Kumar Venkata

8) The detailed audit report of TUV SUD is attached



AUDIT REPORT

Organization name	Andhra University	
Standard(s)	ISO 9001:2015	
Order No.	4153154208	
Audit start date	2020-09-26	
Audit end date	2020-09-26	
Audit type	6. Surveillance Audit (Extraord. Event (IAF))	
Certification type	Single	
Client number	66843-01	
Organization´s audit representative	Prof. D. Lalitha Bhaskari	
Certificate No.	99 100 14363	
Result	 Certificate release recommended Maintenance of certificate recommended Non-Conformities were identified and closed by re-audit on site Non-Conformities were identified and closed by resubmitted documentation Suspension of certificate recommended Withdrawal of certificate recommended Certification process terminated 	

Enclosed documents:

Action list Audit plan

Andhra University 4153154208



Audit Team		
Function	Name	
Lead Auditor	Rohit Bhure	
Auditor	Gopu Suresh	
Auditor	K. Sundaresan	

Changes since last audit:

- No changes since last audit
- Significant change of scope
- Increase/decrease in number of employees
- Management System / documented information
- deviations from the audit plan
- significant issues impacting the audit program
- audit objectives or audit criteria
- Others

Auditor to enter comments below for any changes identified above:

Yes revised in the Annex 3(audit program) More focus on on site activities in the next audit as this audit was performed as remote audit due to Covid -19 issue & also audit was conducted through ICT (remote audit) techniques due to extraordinary events , hense the information provided & verified in this audit is based on the documented information verified in remote audit

Date of next regularly scheduled audit

2021-07-01



Audit conclusion

During the audit it was checked how the documented management system was established, implemented and improved at the different areas of the organization.

The audit covered relevant processes / areas of the organization in order to obtain an overall picture of the degree of management system implementation. Although performed to reasonable depth, not every detail of the complete Management System could be checked.

The processes and their associated areas of the organization were checked in accordance with the preagreed audit plan, audit program and process analysis.

Verification of previous audit nonconformities

The audit team evaluated the corrective action taken for the nonconformities/ areas of concern from the previous audit.

In the case of RA / Re-Certification audits, the audit team considered the audit reports for the last two audits in the audit planning / performance of the audits and in particular checked the nonconformities / areas of concerns.

The corrective actions were found to be:

Effectively Implemented?	Not applicable (no existing MiN or NC)
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Comments:

No Min or NC in last audit		

Comments:

Certification documents and marks are not being used.

Andhra University 4153154208



Audit team conclusion				
Is a re-audit needed?	⊖ Yes	No		

Comments:

Not Required			

Type and number of audit findings

	Major nonconformities	Minor nonconformities	Opportunities for improvement	Positive aspects
Total number	-	-	1	-

Standard elements with findings are listed in the action list (NC Management). The audit findings are based on the audit evidence collected during the audit and available to the certification body.

Audit summary

Refer to level of maturity of the MS, commitment of top management, guaranteeing the continuous compliance with the legal and other requirements, application of performance indicators, continual improvement, meeting of objectives and targets, competence of personnel, effectiveness of internal audits and management reviews, environmental performance, etc.

review meetings with the Princip staff to monitor and evaluate the for improvement. Effective Intern Last Internal audit conducted fro Quality objectives are consistent departmental level and manager The University has a formal meet aspects periodically from parents industry. In addition, feedback is conferences, company represen discussed in MRM for improvem Infrastructure include – Academi Common halls,e classrooms, Set office, Canteen, medical facilitie	chanism to obtain feedback on curriculum and other s, alumni, employers, community, academic peers a obtained from the participants of seminars/ tatives who visit the University. Feed backs are	t
Auditor´s name	Rohit Bhure	date

Auditor's signature

Rohit Bhure

26.09.2020





Site specific information

Audited Site	
Site specific name	Andhra University
State	India
City	Visakhapatnam
Postal code	530003
Address	Andhra Pradesh
Client number	66843-01
Certificate scope	Design of Curriculum, Regulations, Eligibility norms and implementation of on-campus Undergraduate, Postgraduate, Professional teaching & Research programmes; Conduct of Examinations, Evaluation, Publication of Results and Award of Degrees; Grant of Affiliation and Academic monitoring to the programmes offered by colleges and other academic institutions; Create infrastructure through Sponsored Research & Consultancy
Industry code(s)	EA 35; EA 37
Products / Services	Education
Total number of personnel onsite	400
Total number of effective personnel	400

ISO 9001	
Number of shifts	1
Temporary sites / projects:	Not applicable
	◯ Applicable
All clauses apply	• Yes
	◯ No
Quality relevant manufacturing/realization processes:	Design, Teaching, Examination, Research & Consultancy, Counselling & Admissions, Library, Infrastructure & Equipment Maintenance, Purchase

Andhra University 4153154208



Risk category (low/medium/high):	Medium	
KPIs:	Name	Trend
	Student Placement - T 60 % - A : 37 in 1st Qtr & 50 in 2nd Qtr	Positive
	First Class Awarded - T 25 - A : 77	Positive
	NAAC Accreditation - 3.6 / 4.0	Positive
Relevant compliance obligations / Significant legal requirements with regard to products / services:	Establishment of Andhra University under Madras University Act in 1926. Andhra Pradesh Universities Act 4 of 1991; Amended Act 7 of 2004	



Audit objectives

See attached Audit Plan

Additional remarks

1. Disclaimer statement

Auditing is based on a sampling process of the available information. Any audit recommendations are subject to an independent review prior to a decision concerning the awarding or renewal of certification.

A management system certification audit (initial, surveillance or recertification audit) is not a legal compliance audit (ISO 17021:2015, 9.2.1.2; IAF MD22:2018, Appendix C).

2. Duty of information

The Certification Body shall be notified by the client without delay of all changes that may impact on the management system's capability to continue to fulfill the requirements of the relevant standard now and in the future.

These matters include major changes regarding:

- legal, commercial, organizational status or ownership
- organization and management (e.g. key managerial, decision-making or technical staff)
- change of address and sites
- scope of operations under the certified management system
- 3. Due dates

The due date (last day of the certification audit) must be considered for the planning of any additional audit. The respective due dates should be coordinated with the lead auditor.

4. Confidentiality

The Certification Body will treat all received documented information related to the certification process as strictly confidential.

Copies to:

- Members of the audit team
- Certification body
- Client