

CERTIFICATE 01 104 2337709 Audit Report as per

STANDARD ISO 14001:2015

For

Kalasalingam Academy Of Research and Education.

ANAND NAGAR, KRISHNANKOIL, 626126, KRISHNANKOIL

# Audit Report



Client	Standard(s)	Certification Number(s)	Audit Type
Kalasalingam Academy of Research and Education	ISO 14001:2015	01 104 2337709	Stage 2

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Audit Leader	:	L. Ramprasath
Audit Team	:	P. Senthil Kumar
Client's representative	:	Ms. Sarasu
Audit Date	:	15/05/2023 – 17/05/2023

#### 1 Audit result

Management system effectiveness was verified on site by means of random sampling by an appropriately selected audit team. This applies in particular to the compliance of workflows with standard requirements and the descriptions in management system documentation. The audit objectives as mentioned in the audit plan, the special features of the organization's business activities, the applicable statutory and regulatory requirements and the requirements set forth in other generally applicable documents were also taken into account. This was done by means of a sampling approach, by conducting interviews and reviewing the appropriate documentation. Audit findings and recommendations regarding opportunities for improvement have been set forth in Sections 4 of this report.

	The last audit revealed nonconformities which have been demonstrably corrected. The corrections and corrective actions taken in this respect have been verified.			
x	A stage 1 audit was performed and the organization found ready for certification. Identified weaknesses, if any, have been eliminated and the respective corrective action verified.			
	The current audit revealed	the following nonconform	iities:	
	Standard(s):	No. of major	No. of minor	
x		nonconformity	nonconformity	
	ISO 14001	Nil	02	
			andard elements require a ns (probable date:. dd.mm.	
x	effectiveness of the corrections and corrective actions (probable date:. dd.mm.yyyy) The organization has established and maintains an effective system to ensure compliance with its policy and objectives. The audit team confirms in line with the audit targets that the organization's management system complies with, adequately maintains and implements the requirements of the standard(s).			

The auditor/audit team therefore recommends (provided nonconformity response has been approved):

X	Award of the new certificates.
	Maintenance of the existing certification.
	Inclusion of the changes (see Section 3) in the scope of application of existing certifications
	Maintenance or issue of the certificates only after successful completion of a re-audit.

#### 2 Scope

## 2.1 Description of the organization

Kalasalingam Academy of Research and Education (KARE) (Deemed to be University) formerly Arulmigu Kalasalingam College of Engineering was established in 1984 by Kalvivallal Thiru T.Kalasalingam under the trust



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Kalasalingam and Anandam Ammal Charities, Founder Chairman who was a freedom fighter and Philanthropist. Kalasalingam is Located at the pristine foothills of scenic Western Ghats of southern Tamilnadu. The college obtained the Deemed to be University status in 2006. The Institution has been serving the society for thirty seven long years and it caters to the needs of the students from all walks of the society. Kalasalingam offers UG programmes, PG programmes and Ph.D programmes in various disciplines of Engineering, Science, Technology and Humanities. It is the first Institution in India to introduce a special B.Tech programme in engineering for the differently able (speech and hearing impaired) students. The Institution has been re-accredited by NAAC with 'A' grade with a CGPA of 3.11. Six UG programmes have been accredited by NBA under Tier-1. The Institution continues to do indefatigable work in getting projects and research centers. It has received DST funding to establish the National Center for Advance Research in Discrete Mathematics. KARE has got the state of the art IRC with splendid high end instruments for advanced research in material sciences and life sciences. Multistoried separate hostels with plenty of facilities provide accommodation to thousands of students. The institution has spent exorbitant sum to create a world class swimming pool and indoor auditorium for sports. Furthermore KARE gives utmost importance to Intra-mural and Extra mural activities for the holistic development of the students. The total number of employees 1900 all working in general shift.

### 2.2 Scope of certification

Scope of certification: (per standard):	Design and Providing Educational services leading to Under Graduation, Post-Graduation and Doctorate degrees in the field of Arts, science, Engineering and Technology.
ISO 9001 standard requirements which are not applicable:	Not Applicable
Reasons for non-applicability:	Not applicable

In cases involving multi-site certification: Internal auditing throughout the multi-site organization was verified with a positive result. The management representative has appropriate authority over the sites included in the multi-site organization.

In cases involving multi-shift operations and having audited all shifts (in other case the non audited shift has to be defined and it has to be described how the inspection of this shift has been done): The audit took appropriate account of multi-shift operations and provided for representative auditing of all shifts.

In case of remote audits: Part of the audit was done by using ICT (Information and Communication Technology). The used method was effective to achieve the audit objectives.

In the stage 1 audit, on-site visits were made to the following sites Krishnan Kovil. In the stage 2 audit, auditing was performed at the sites identified in the table below.

The following sites and their scopes are included in the scope of certification:

Site No.	Sites included in cert. Name/address of site	No. of emp.	Standard and Scope	Audited
01	Kalasalingam Academy Of Research and Education. ANAND NAGAR, KRISHNANKOIL, 626126, KRISHNANKOIL	1900	ISO 14001:2015. Design and Providing Educational services leading to Under Graduation, Post-Graduation and Doctorate degrees in the field of Arts, science, Engineering and Technology.	Yes



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#### 3 Changes in the management system / Contract review

No major changes have been made to the management system and the management system documentation since the last audit. The order details which form the basis of the audit (including number of employees, scope and sites) reflect the actual situation in the organization.

The description of the scope in the certificate appropriately reflects the scope of the management system.

A corresponding printing request is attached.

The audit plan was not changed during the audit.

#### 4 Audit findings

The audit findings related to the audited standards are listed in the annexes to this report (see. Annex ISO 14001). All information gained during the audit will be treated with strict confidentiality by the auditor(s) and the certification body. In view of the sampling approach applied to the audit, weaknesses and nonconformities may still exist which have not been identified during the audit.

No.	Unit/Department Site	Positive findings
1	Top management	Well communicated environmental requirements to all the process owners
2	All process owners	Good monitoring of all objectives.
3	Top management	Tested carbon foot print and appropriate measures taken for reduction.

The following recommendations and opportunities for improvement provided by the auditor(s) are intended to contribute to the continuous improvement of the management system.

No.	Unit/Department Site	Recommendations and opportunities for improvement
1	Estate process	Barricade need to provide near diesel dispensing unit.
2	Estate process	PASCO license number and authorized person name to be display.

#### 5 Dates

Due Date for the next audit

Agreed date for the next audit

2024-05-15 (indicate for each standard if applicable) 2024-05-15

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05/06/2023

Date

Audit Leader / Auditor(s)



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### Annex ISO 14001:2015

Item	Audit result
Context of the organization	The organization has determined external and internal issues that are relevant to achieve the intended outcome of the environmental management system including relevant environmental conditions. The organization has identified the following interested parties:
	<ul> <li>Management.</li> <li>Students.</li> </ul>
	<ul><li>Statutory bodies.</li><li>UGC</li></ul>
	The following needs and expectations are attributed to these interested parties:
	<ul> <li>Maintain greenery in the campus – Statutory body.</li> <li>Reduce consumption of energy usage – Management.</li> <li>Optimize usage of water.</li> </ul>
Policy / objectives	The environmental policy established by top management was communicated and implemented in the organization. It is suitable for the activities of the organization and its context. It includes the commitment to the protection of the environment continual improvement to enhance environmental performance and compliance with the binding obligations. It provides the framework for establishing and reviewing environmental objectives. The organization has determined suitable objectives, associated indicators to monitor progress and actions to achieve them. Key environmental objectives and associated indicators are:
	• Water consumption: $T - 5$ lac/ month. A - 4 lac / month.
	<ul> <li>Electricity consumption: T – 500 KW. A – 448 KW.</li> </ul>
	<ul> <li>Diesel consumption: T – 15,000 KL / month. A – 10,000 KL / month.</li> </ul>
	• STP Water testing: T – 100%. A – 100%.
Environmental aspects, determination of risks and their changes since the last audit	Key environmental aspects are identified and their significance and impact on the environment is reviewed and updated at regular intervals. This includes all activities, products and services that it can control or influence considering a life cycle perspective.
	Key environmental aspects include (per site, where appropriate):
	Paper usage.
	Water consumption.
	Energy consumption
	Food waste
	The following risks and opportunities for the environmental management system have been determined (regarding environmental aspects, binding obligations and other issues:
	<ul><li>Compliance with legal requirements.</li><li>Maintained EMS requirements.</li></ul>
Identification and monitoring of compliance obligations	The organization identifies compliance obligations at regular intervals and makes them accessible to all relevant functions. Compliance is evaluated at regular intervals.
	The following permits and licenses are available at the organization (by site, where appropriate):
	• Education institution comes under White category. Air/Water application submitted on 24/08/2022.
	Diesel bunk Storage PASCO License: P/SC/TN/14/5612 (P197644).

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Item	Audit result					
Leadership, responsibility and authority and communication	<ul> <li>The management demonstrates commitment with respect to the environmental management system and integrates its requirements into the organization's business processes. The following persons also have significant responsibility for the environmental management system:</li> <li>EMS manual – EMS/Rev. 00/ Dated – 06/03/2023.</li> </ul>					
	<ul> <li>Ms. Sarasu is Management representative.</li> </ul>					
	The organization has set up an effective communication process for both internal and external communication.					
Operation and performance evaluation	<ul> <li>The organization identifies all environmentally relevant operations and activities and has established adequate processes for their planning and control. Consistent with a life cycle perspective this includes upstream and downstream activities as far as possible as well as outsourced processes and changes.</li> <li>The following activities are of particular relevance:</li> <li>Measures at upstream phases of the life cycle (specific purchasing criteria, etc.):</li> <li>All the paper are given to re cyclers.</li> <li>STP wastes are converted to manure and used for gardening.</li> <li>Waste water treated in STP and used for cultivation.</li> <li>Measures regarding outsourced processes:</li> <li>Incoming vehicle beeing monitored for valid certificates, for waste disposal contract agreement established.</li> <li>Environmental criteria regarding the product/service development:</li> <li>All the products are purchased with environmental compliance.</li> <li>Downstream measures regarding the end of the life cycle:</li> <li>Communication done to all the suppliers on safe disposal of waste in line with life and activities and the product of the suppliers on safe disposal of waste in line with life and the product of the suppliers on safe disposal of waste in line with life and the product of the suppliers on safe disposal of waste in line with life and the product of the suppliers on safe disposal of waste in line with life and the product of the suppliers on safe disposal of waste in line with life and the product of the life cycle:</li> </ul>					
	<ul> <li>cycle perspective.</li> <li>Monitoring and measurement of the environmental performance takes place according to adequate criteria and methods. Environmental indicators have been established for the analysis and evaluation of environmental performance.</li> <li>Being white category no monitoring is required.</li> <li>STP Outlet water testing report dated – 18/02/2023.</li> </ul>					
Internal audit and ma- nagement review	The organization measures the implementation, maintenance and effectiveness of the management system by means of annually scheduled system audits. The organization reliably carries out these audits. Last internal audit conducted on 27/04/2023 with Nil NC. Top management reviews the organization's management system at regular intervals and in line with the requirements to ensure its continuous suitability, adequacy and effectiveness. The management review was carried out in accordance with the requirements and was effective. Date of last management review: 10-05-2023					
Use of certificate and logo	Being certification audit logo not issued to client					

Chapter of standard	4.1	4.2	4.3	4.4	5.1	5.2	5.3	6.1	6.2	
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Rating*	1	1	1	1	1	1	1	1	1	
No. of nonconformity										
Chapter of standard	7.1	7.2	7.3	7.4	7.5	8.1	8.2	9.1	9.2	9.3
Rating*	1	1	1	1	1	1	1	3	1	1
No. of nonconformity								2		
Chapter of standard	10.1	10.2	10.3							
Rating*	1	1	1							
No. of nonconformity										

\* Rating:

1 = conforming

2 = not audited in this audit

3 = nonconformity (see nonconformity report)

4 = not applicable