QUALITY SYSTEM PROCEDURE MANUAL

Issue No. 2.0   **Date 01.07.2020**

Meeting the requirements of ISO9001:2008

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(A project of the Archdiocese of Ernakulam)
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NBS **NAIPUNNYA BUSINESS SCHOOL** Experience ● Explore ● Excel	**QUALITY SYSTEM PROCEDURE**	Revision No.02 Date 02.06.2014

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Prepared by MR	Reviewed By Principal	Approved by Executive Director

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AMENDMENT RECORD SHEET

Issue No.1.0				Date 01.11.2002
Issue No. 2.0				Date 01.07.2009

Sl. No	Section No.	Current Revision		date	Nature of change
		Issue No.	Revision No.		
	All Sections	2.0	00	01.07.2009	Quality manual all sections have been re issued as issue no-2.0 for meeting the requirements of ISO 9001-2008
2	NB:PR:14 page 5 of 6	2.0	01	27.05.10	The number of library books that can be issued to teaching staff is increased to 8 from 5.
4	NB:PR:14	2.0	02	25.06.10	The policy of issuing books to the departments is deleted.
5	NB:PR:08	2.0	01	13.08.10	The selection of the part time faculty is based on Competency Matrix F31B
6	NB:PR:12	2.0	01	13.08.10	The procedure and forms used for vacancy fill request and approval are changed.
7	NB:PR:12	2.0	01	13.08.10	The selection of the faculty is based on Competency Matrix F31
8	NB:PR:13	2.0	01	13.08.10	The evaluation method is amended. The follow up action on the evaluation result is changed
9	NB:PR:10	2.0	01	13.08.10	The minimum requirement of grade for pass for internal examination included.
10	NB:PR:02 page 3	2.0	01	29.10.10	Records needed to provide evidence that the realization processes and resulting product meet requirements, are added to the list (F39/39A and F69)
11	NB:PR:09 Page 1	2.0	01	29.10.10	Under section 2, "Scope", the course DHMCT is deleted.
12	NB:PR:14 Page 5	2.0	01	29.10.10	The number of books to be issued to the faculty is changed.
13	NB:PR:18 Page 1	2.0	01	29.10.10	Reference is made to the applicable version of International Standard ISO 9001:2008, regarding internal audit; the responsibility of HODs defined. The reference given as the requirement for audit training was incorrect.
14	NB:PR:18 page 3	2.0	01	29.10.10	The requirement, "The management responsible for the area being audited shall ensure that any necessary corrections and corrective actions are taken without undue delay to eliminate detected nonconformities and their causes" is included.
15	NB:PR:19 page 1	2.0	01	29.10.10	Section 4.1 revised to include the controls and related responsibilities and authorities for dealing with nonconforming services of subject teachers; 4.0 is revised to define the controls and related responsibilities for dealing with nonconforming services " by taking appropriate action to the effects of the nonconformity when non-conforming product is detected after delivery or use has started"

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Sl. No	Section No.	Current Revision		date	Nature of change
		Issue No.	Revision No.		
17	NB:PR:10 Page 2 of 3	2.0	04	01.08.2011	Subject teachers' responsibility regarding the internal examination score and attendance percentage has been revised.
19	NB:PR:07 Page 1-3 of 3	2.0	01	14.02.13	Store operations is revised to give more clarity to the request and supply of consumable and capital goods; setting reorder levels
20	NB:PR:16 Page L of 6 and 6 of 6	2.0	01	14.02.13	Procedure for Library items purchase revised.
17	NB:PR:10 Page 2 of 3	2.0	04	01.08.2011	Subject teachers' responsibility regarding the internal examination score and attendance percentage has been revised.
18	NB:PR:06 Page 1- 6 of 6	2.0	01	14.02.13	Purchase procedure is revised to give more clarity to consumable and capital goods purchase
19	NB:PR:07 Page 1-3 of 3	2.0	01	14.02.13	Store operations is revised to give more clarity to the request and supply of consumable and capital goods; setting reorder levels
20	NB:PR:16 Page lof 6 and 6 of 6	2.0	01	14.02.13	Procedure for Library items purchase revised.
24	NB:PR:03 page 1 of 2	2.0	01	02.06.2014	Under procedure, the frequency of MRM is changed to once in four months
25	NB:PR:18 page 1 of 2	2.0	02	02.06.2014	Under procedure, the frequency of internal audit is changed to once in four months
26	NB:PR:09 page 3 of 3	2.0	04	18.11.14	Section 4.2 added to include procedure for preparation of program schedule.
27	NB:PR:23: pages 1 to 7	2.0	00	26.09.14	New policy and procedure on Placement is added
28	NB:PR:09 page 4 of 4	2.0	05	26.11.2015	Analysis of examination result to be performed

Prepared by MR	Reviewed By Principal	Approved by Executive Director

Control of Documents

1.0 **Purpose**

To lay down a procedure for control of documents related to QMS.

2.0 **Scope**

This procedure covers all documents of QMS like quality manual, quality system procedures, work instructions, manuals and other documents of external origin such as syllabus, documents issued by the approval body, standards etc.

3.0 **Responsibility**

The responsibility for preparation, review, approval, issues and controls of documents are done as below.

Documents	Prepared by	Review By	Approved by
Quality Manual	MR	Principal	Director
Quality Policy & Objectives	-	Principal	Director
Quality System Procedure	MR	Principal	Director
Work Instructions /Manuals	MR	Principal	Director

4.0 **Procedure**

4.1 A copy of the quality manual, Quality System procedures and work instructions bearing stamp "MASTER COPY" at the front side of each sheet in red ink is treated as master copy and the same is maintained by MR.

4.1.1 The records of revision and the records of issue of Quality Manual, Quality system procedures and work instructions are kept along with the master copy of the quality manual.

Issuance of documents

All documents are prepared, reviewed and approved for adequacy by authorized personnel as specified in clause No.3.0 of this procedure. MR issues the documents by obtaining signatures of the recipients in the distribution list F01-0

Only approved documents are issued.

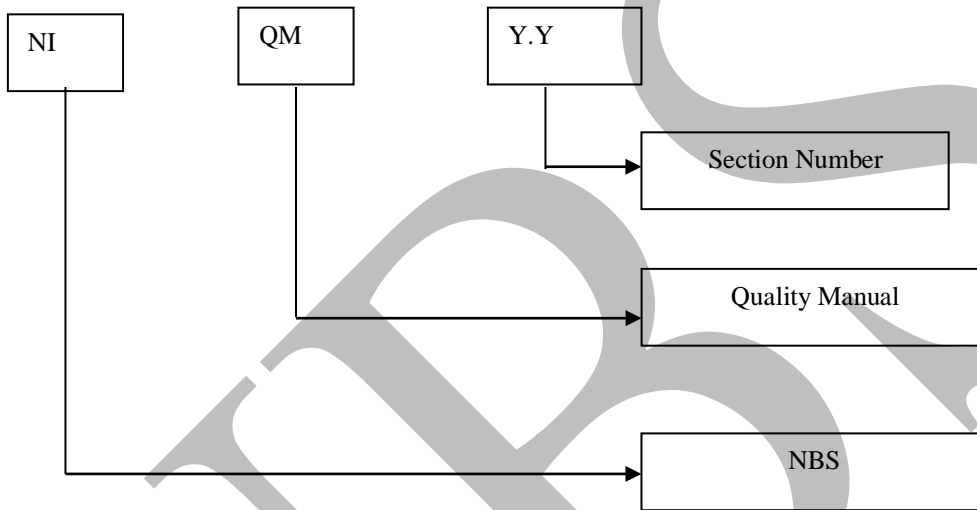Uncontrolled copies may be distributed at the discretion of the management.

MR maintains a register of uncontrolled copies distributed in form no F02-0.

Prepared by MR	Reviewed By Principal	Approved by Director

4.2   Document numbering
Documents are numbered as follows

Quality Manual

| NI | | QM | | Y.Y |

→ Section Number

→ Quality Manual

→ NBS

Quality System Procedure

| NI | | PR | | YY |

→ Serial Number

→ Procedure

→ NBS

| Prepared by MR | Reviewed By Principal | Approved by Director |

Work Instruction

NB	WI/ML	YY

Serial No

Work Instruction/Manual

NBS

Forms/Registers

F/ID		YY

Serial Number

Form &Register/
Internal Doc

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4.3   Amendment to standards

Revised issue of standards and other documents of external origin are procured when information about such revision is learnt through press, through trade journals, internet or interacting with the issuing authorities.

4.4   Master list of documents

A master list of documents such as quality manual, quality system procedures, work instructions, checklists and external documents showing the latest revision status, issue number, date of revision etc are maintained by MR F03-0.

4.3   Number of copies of quality manual, quality system procedures and work instructions are made as required. Each copy is stamped "CONTROLLED COPY" in blue ink before issue. Copies of all documents are made available at all points of use for effective functioning of the process.

4.4   All documents are ensured for legible, readable and readily identifiable.
        Copy number is stamped on all documents before issue.

4.5   All documents under QMS are given individual numbers with revision status.

4.6   External documents like ISO standards, syllabus, guidelines of approved body, examination paper, time table, computer software manuals etc. are identified separately and the distribution of the documents are controlled by authorized personnel as specified as below.
        Documents issued by University/ Approving body. -- Principal/Supt.
        Other external documents   -- MR

4.7   Users destroy obsolete copies of documents as soon as revised copies of documents received by them and no obsolete document is held by any individual/ neither used for any work nor found at any point of usage.

        Obsolete copy of master copy is stamped as OBSOLETE and retained by MR purely for knowledge and reference purposes.

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4.8 **Change to documents**.

Request for modification change to documents are forwarded to MR by entering details in the Change requisition/approval form F04-0.

MR on receipt of this, make assessment of change proposed and in case of any revision required in the document the same is approved and communicated to the concerned. The nature of change is identified in the amendment record sheet of the respective manual. Typographical errors, spelling and grammar mistakes are corrected without raising a change requisition/approval form.

Obsolete copies of documents are withdrawn from all points.

4.9 The Institute as of now does not maintain any quality related documents in any magnetic media. The Institute uses computers for generation of documents and records for convenience. All such computer files are available in hard copies and only hard copies are controlled.

5.0 Reference
5.1 Procedures for quality records. NB: PR:02
6.0 Records
6.1 Change requisition/approval form: F04-0
6.2 Master list: F03-0
6.3 Distribution list for controlled documents F01-0
6.4 Register of uncontrolled copies distributed F02-0

Prepared by MR		
	Reviewed By Principal	Approved by Director

Control of Records

1.0 **Purpose**

To lay down a procedure for effective control needed for the identification, storage, protection, retrieval, retention and disposition of records.

2.0 **Scope**

It applies to identification, storage, retrieval, protection, retention and disposition of all records related to the quality management system.

3.0 **Responsibility**

The functional departmental heads are responsible for maintaining quality records specified in the various procedures and in accordance with this procedure.

4.0 **Procedure**

4.1 The records are maintained as per various quality procedures, customer requirements and as per these procedures.

4.2 All records are written legibly with a view to provide utmost clarity on reference. Any corrections can be made by striking off and rewriting only and use of erasing fluid are not permitted. Quality records are not allowed to write in pencil.

4.3 A list of records maintained by the institute is included in the index of forms used by the institute. List of mandatory records maintained by the institute is given at the end of this procedure.

4.4 The retention period of quality records is as shown in Annexure 1.

4.5 The records are stored in racks/ cupboards situated in the office. The records are indexed and filed in date sequence and are stored and protected.

4.6 The records are stored in such a way that they are easily identifiable and retrievable within a reasonable time. The records for the previous years are stored in racks or cupboards and are adequately protected from fire and damage. Every care is taken to see that the records do not deteriorate during their retention period.

4.7 Access to the quality records for the previous years are only with the authorization of Director/ Principal or MR.

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4.8   At the end of the retention period, the responsible person reviews the old records and decides on the need for retaining records for a further period. Otherwise all old recodes are destroyed by burning it or other suitable means as specified by the management.

4.9   Wherever agreed contractually, quality records are made available for evaluation of customer or his representative for an agreed period.

4.10   Use of electronic media is not applicable in maintaining details.

5.0 **Reference** Nil

6.0 **Records** Nil.
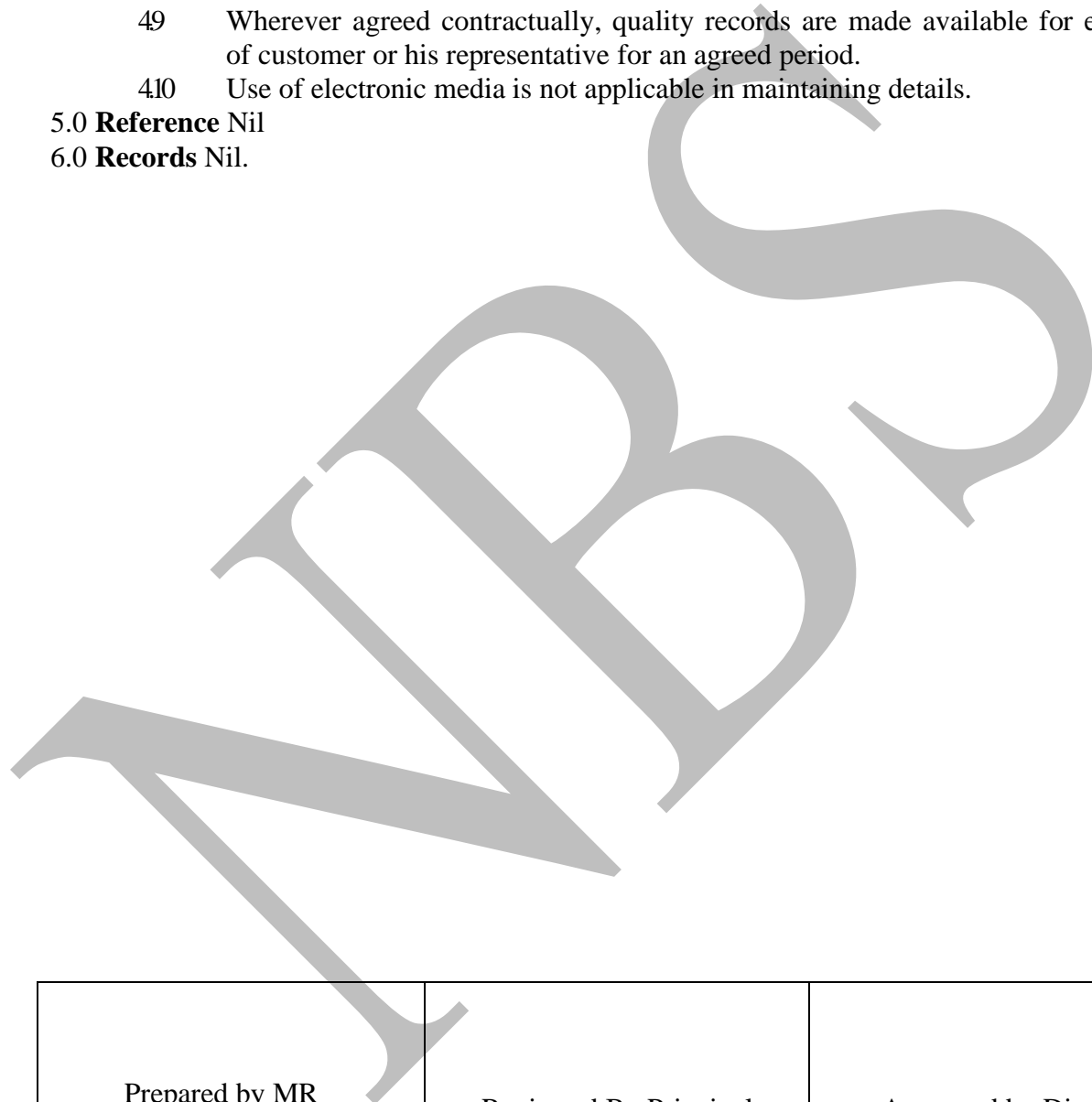
| Prepared by MR | Reviewed By Principal | Approved by Director |

Annexure-I

Form No	Mandatory as per ISO9001:2008 clause	Form description	Retention Period
F06-0	5.6.1	Attendance record of MRM	3 years
F07-0	5.6.1	Minutes of MRM	3 years
F13-0	6.2.2	Training needs identification records.	1 years
F14-0	6.2.2	Training records.	Till employee in service
F17-0	7.2.2	Enquiry register	2 years
F18-0	7.2.2	Admission register	3 years
F28-0	7.4.1	Approved list of suppliers	Till sub contract with the company
F30	7.4.1	Supplier evaluation report	Till sub contract with the company
F39/F39A	7.1.d	Internal examination assessment report	3 years
F69	7.1.d	University examination assessment report	3 years
IF43-0	7.4.1	Feedback form	1 year
F44-0	7.5.3	Progress report	3 years
F71-0	7.5.4	Customer property register	3 years
F72-0	7.6	Calibration certificates	3 years
F65-0	8.2.2, 8.5.2	Non-conformance report, corrective action record	3 years
F66-0	8.2.2	Audit summary report	3 years
F62-0	8.2.2	Annual audit schedule	3 years
F41-0	8.2.4	Final assessment report	3 years

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Management Review

1.0 Purpose

To lay down a procedure for review of the quality management system by the top management of the company at planned intervals to ensure the continuing suitability, adequacy and effectiveness and to assess opportunities for improvement and need for changes to the institute's quality management system, including the quality policy and quality objectives.

2.0 Scope

This covers all aspects of quality management system, procedures and documents, assessing opportunities for improvement and the need for any change to the QMS.

3.0 Responsibility

MR is responsible for organizing management reviews and reporting of performance of QMS.

Director is responsible for review of quality system in consultation with the members of the review committee.

4.0 Procedure

4.1 The review committee under the chairmanship of Executive Director conducts the management review. In the absence of the Executive Director, MR or Principal will chair the review meeting. It is conducted as and when required and in any case at an interval not exceeding 4 months with a time gap of 15 days. The review committee consists of

Executive Director	–	Chairman of committee
MR	–	Convener
Principal	–	Member
Vice Principal	–	Member
HODs	–	Members

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4.1.1   In the review, opportunities for improvement and the changes required to the quality management system, Quality policy and objectives are evaluated.

4.2.   Scheduling the meeting

Management Representative convenes the review meeting and he sends the agenda for the review meeting sufficiently in advance to all members and it is mandatory to attend the meeting unless otherwise exempted by Director.

The agenda consists of the following items.

(1)   Minutes of the previous meeting and its effective implementation and follow up.
(2)   Results of audits. (internal & external)
(3)   Customer feedback/complaints.
(4)   Process performance and service conformances.
(5)   Status of corrective and preventive actions.
(6)   Changes that could affect the QMS.
(7)   Review of effectiveness of achieving quality objectives.
(8)   Resource adequacy.
(9)   Recommendations for improvement.

4.2   Review Inputs

The inputs for management review are submitted by the concerned persons in the forms as specified below.

a)   Results of audits. (internal & external) by MR in F11-0
b)   Customer feedback/complaints. by Principal/Supt.
c)   Process performance and service conformities, by Principal
d)   Status of corrective and preventive actions, by MR in
e)   Changes that could affect the QMS by MR in F12-0
f)   Review of effectiveness of achieving quality objectives.
g)   Recommendation for improvement
h)   Resource planning

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4.3   Review Output

The decisions and actions taken in the review meeting are recorded in form F07-0   and it contains aspects like

a) Improvement of QMS and its process.
b) Improvement of products related customer requirements.
c) Resources requirement.

4.3.1   Changes to the QMS as decided during the management review are communicated by MR to the concerned person/department for implementation with due date.

4.3.1 Records of such review are maintained.

5.0   Reference

5.1   Procedure for control of records no: NI:PR:02

6.0   Records

6.1   Minutes of management review: F07-0
6.2   Agenda cum meeting notice- F05-0
6.3   Attendance record of MRM- F06-0
6.4   Report on internal/external audits F11-0
6.5   Report on major changes to QMS F12-0

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Procedure for Training

1.0 **Purpose**

To establish and maintain a procedure to identify training needs and provide training for all personnel and to evaluate the effectiveness of the training provided.

2.0 **Scope**

All personnel who perform work affecting quality including faculty.

3.0 Responsibility

    a.   Identification of training needs of faculty   - HODs

    b.   Identification of training needs of HODs   - Principal

    c.   Organizing training programs   - Principal

    d.   Maintaining training records   - Principal

4.0 Procedure

4.1 Identification of training needs

Training needs are identified every year in the month of March. The training needs of faculties are identified by respective HODs and the training needs of HODs are identified by Principal. The training needs are based on the following aspects.

    a. On the job training requirements to continue to do the job.

    b. Based on the emerging trends in teaching methodologies, class room managements etc.

The training needs are assessed and recorded in form F13-0. Principal consolidates the training needs and prepares the training calendar in form no F14-0 and obtains approval from Director.

Principal organizes the training as per the plan (in-house & external) And the records of training are maintained in form F15-0

If some scheduled training could not be organized on scheduled dates, the same will be re scheduled and organized.

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42   Induction training

All personnel joining NBS are given induction training. This includes:

a) Organizational policy and objectives
b) Organizational Structure
c) The quality management system
d) Service/ courses offered
e) Organizational practices

All the new employees undergo an induction programme according to the induction checklists F16A and F16B. Unless the employee undergoes the induction, he/she shall not be put on the job. This induction programme is not applicable to part time faculties.

43   External training

Principal identifies the external training programmes keeping in view of the staff to be trained based on the identified training needs. Based on that, proposal for the programme is submitted to Director. Upon approval, the concerned person is nominated for the programme.
Employee undergoing training from external agencies outside the company premises shall submit the following:

- copy of the course material
- training certificate(if any)
- feedback in form

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44   Effectiveness of training provided

4.4.1 Effectiveness of training programs is evaluated by any of the following means.

Evaluation   Sheet
Tests/Interviews   etc.
Submission of report

4.4.2 The records of training are maintained in form F15-0

5.0   Reference

5.1   Procedure for control of quality records NB/PR/02

6.0   Records
6.1   Identification of training needs. F13-0
6.2   Training calendar F14-0
6.3   Records of training F15-0
6.4   Induction check list-1 F16-A
6.5   Induction check list -2 F16-B

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Procedure for Admission

1.0 Purpose

To lay down a procedure to make sure that review of enquiry, review of admission and admission acceptance are adequately defined, documented and well coordinated.

2.0 Scope

This applies to all inquiries and the admissions offered for the following courses namely

1. Master of Business Administration Specialization in finance, Human Resource management, and Marketing

Responsibility

1. Issue of application, brochure, prospectus   – Supt.
2. Scrutiny of applications   - HODs
3. Aptitude test & Interview   - HOD/PCP/DIR
4. Admission   – Supt.

4.0 Procedure

4.1 Inquiry

4.1.1 All the inquires pertaining to the above courses through letter, e-mail, telephone, in person or other means are registered on a daily basis in the Course Inquiry Register.

The inquiries are handled through counseling. The details of eligibility, qualification, age, duration of the course, course fee etc. are communicated. The inquiry kit containing brochures of the course, prospectus, application form is given to the inquirer for the cost fixed every year.

Follow up of the inquiry are done through letters, telephones and the details of the action taken are maintained in the Course Inquiry Register.

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4.2 Admission

4.2.1   After collection of the filled in application forms, it is sent to the respective HODs for verification.

4.2.2   After verification, the qualified students are informed to appear for the test/interview on a particular date.

4.2.3   The test /interview is conducted as per schedule and the short listing will be done based on the predetermined parameters   ID06-0.

4.2.4   Selection of the candidates is done as per the above process and the rank list is prepared and the same is communicated to the candidates.

List of the selected students will be displayed on the office notice board.

4.2.5   For admission to any of the course, the following documents are required: Proof of age (certificate)

Proof of qualifying certificates

Photographs (5 numbers) Transfer certificate

Conduct certificate

4.2.6   To monitor strict compliance to the admission guidelines given by the University or other external bodies a mechanism, like a monitoring chart, should be set up and the chart should be updated. Any deviation from the scheduled date should be noted in the chart with the reason and approval for the deviation (Monitoring chart F100)

4.3   Admission Acceptance

4.3.1   Candidates complying with the above documentation and passing in the test/interview are informed to remit the required fee specifying the last date of remittance.

4.3.2   Names of the candidates admitted to the courses are entered in the Admission Register F18-0.

4.3.3   In the Admission Register, along with the name, all other particulars (admission date, date of birth, TC date, qualifying examination etc.) should be entered. If a candidate, after taking admission, decides against joining the Institution (before the start of the classes) or decides at any time to leave the Institution, appropriate entry should be made in the "Remarks" column.

4.3.4   An Admission Number, which is a sequential number, should be assigned to every candidate who is admitted. It is assigned in the chronological order of admission. No number should be omitted from the sequential list of admission numbers.

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4.3.5   On admission and remittance of fee, fee receipt F19-0 is issued and the details are entered in the fee register F20-0.

4.3.6   On admission a student is issued with the following documents:
- Identity Card ID05-0
- Students Handbook ID04-0

4.4   Late remittance of admission fee

In case after offering admission to a student, if the student could not remit the required fee before the closing date and the student requests for late remittance of fee, Director shall review the suitability of acceptance by making a remark in the Admission Register.

5.0   REFERENCE
5.1   Procedure for control of records NB: PR: 02
5.2   Brochure ID: 01-0
5.3   Prospectus ID:02-0
5.4   Admission form ID:03-0
5.5   Students Handbook ID:04-0
5.6   Students ID card ID:05-0
5.7   Short listing Parameter ID:06-0

6.0   RECORDS
6.1   Course inquiry register F17-0
6.2   Admission Register F18-0
6.3   Fee Receipt F19-0
6.4   Fee Register 20-0
6.5   Monitoring chart for admission procedure F100

Prepared By MR	Reviewed By Principal	Approved By Director

Procedure for Purchase & supplier evaluation

1.0 Purpose

To lay down a procedure for purchase and to evaluate suppliers, rate and to develop them so as to select suppliers on the basis of their ability to meet the quality requirements.

2.0 Scope

This procedure covers
a) Purchase of items such as learning materials, consumables, equipments and services.
b) Registration of potential suppliers.
c) Evaluation and development of existing suppliers.

3.0 Responsibility

Purchase Manager: Assesses the requirements and prepares the Purchase Order
Finance Manager: Prepares the Purchase Order for Capital Goods
Director/Principal - Approval of purchase order

4.0 Procedure

4.1 Evaluation of existing suppliers.

All existing suppliers as on 01.11.02 are considered approved based on their past performance.

Existing suppliers are evaluated based on their past supplies generally according to the following parameters.

a) Quality rating (QR) $= \dfrac{\text{Quantity (weight) accepted}}{\text{Quantity (weight) supplied}} \times 80 = 80\text{Max}$

b) Delivery rating (DR) $=$ 10/15/20 $= 20$ Max

20 = supply total quantity of materials on or before the agreed date.

15 = supply total quantity of materials within 7 days from the expiry of the agreed date.

10 = supply the materials beyond 7 days from the agreed date.

Prepared By MR	Reviewed By Principal	Approved by Executive Director

Those who score (QR+DR) equal to or greater than 80 will find a place in the approved list.

4.1.1   The evaluation result is communicated to the suppliers.

4.1.4   Those who score less than 80 require action for improvement.

Store supervisor gives guidance to suppliers to improve their performance.
After taking corrective measures these suppliers are evaluated again. If the rating is still below 80, the names of such suppliers are removed from the approved list. The details of evaluation are maintained in F30-0

4.1.5   The suppliers in the approved list are reevaluated based on the above parameters once in six months.

4.1.6   The approved list of suppliers are updated once in six months.

4.2   Registration and assessment of potential suppliers.

4.2.4   Potential suppliers are identified through the following sources.
   a) Information from customers and other companies.
   b) Industrial buyers, trade directories.
   c) Catalogues, magazines etc.,
   Supplier capability report form F29-0 is issued to the supplier identified for obtaining capability report.

4.2.5   On receipt of supplier capability report and assessment thereon a trial purchase order is placed with the new supplier.

4.2.6   Based on the quality, delivery conditions the performance of the supplier in the trial supply is evaluated. The suppliers name is incorporated in the approved list once the performance in the trial supply is satisfactory.

4.2.7   The records of evaluation are maintained.

Prepared By MR	Reviewed By Principal	Approved by Executive Director

4.3   Purchasing

4.3.1 Purchase of Products/ Services

4.3.1. A: Consumable Items

Purchase Manager assesses the stock position of the all consumable items on a weekly basis. A re-order level is set for each item based on the recent requirement. Accordingly the requirement of purchase is arrived at and a Purchase Order is prepared in duplicate using the form Fl 16 (Purchase Order for consumable Items). This order is forward to the Finance Manager who will forward it with remarks to the Executive Director for final decision. If approved, the Librarian will place the order. On arrival of the items, the Purchase Manager will inspect the items for conformance to the specifications. The Purchase Order will be sent to the Accounts Department with the bill and the approved Requisition (or the GR number). A copy of the PO will be kept with the Purchase Manager

4.3.1. B: Capital Goods/ Services

Capital improvements can include, but are not limited to, goods or services such as furniture, laboratory equipment or software. Upon receiving the Purchase requirement (form F114) for Capital goods/ services from the department Head, the Purchase Manager forwards the requisition to the Finance Manager after assigning a requisition number. Finance Manager, with his remarks, then forwards to the Principal for final decision. Once approved, the Purchase Manager prepares the Purchase Order for Capital Goods (F25) and forwards to the Finance Manager along with a copy of F114. The Finance Manager, after checking for budget limits, forwards this to the Executive Director for final decision. After receiving the goods, the authorized PO will be forwarded to the Accounts Department with the bill for payment.

4.3.1. C: Library Items

The procedure is detailed in the Procedure for Library Management (NB: PR: 14, page 1 of 6).

Prepared By MR	Reviewed By Principal	Approved by Executive Director

4.3.3 Blanket Purchase Order

Blanket Purchase Orders) allow for recurring purchases of a specific service or commodity from the same vendor when the quantity or frequency of delivery cannot be fully determined at the time the purchase order is initiated. The period for which a BPO is effective must be specified on the Purchase Order. Wherever an annual commitment is not desirable, the period could be shortened to three months or other suitable term. BPOs can be cancelled at any time if the vendor performs in an unsatisfactory manner or the materials are not needed as anticipated.

In order to track the total amount of purchase for a specific BPO-effective term, the amount spent on each individual purchase should be noted down separately. The Purchase Manager is responsible for preparing the Blanket Purchase Order (F104) after consulting with the Principal/ Director

4.3.4 Other Purchases

Stationary and other items needed for the cafeteria in an emergency can be bought without a Purchase Order. However, the amount expended on this should be less than Rs. 1000 for individual purchase (less than Rs. 10, 000 for a month). The Purchase Manager completes the purchase details in the form F105 and submits to the Director to get the approval. The Purchase Manager must keep a keep a register (F106) to track the amount expended monthly.

4.36 Bid Process

The Purchasing Department has the responsibility to solicit bid inquiries from two or more suppliers when the estimated value of the requested purchase or service is Rs.50000 or above. The Purchasing Department with the approval from the Director may competitively bid any request, regardless of the price, when it best serves the institution.

In view of the possibility of splitting the Purchase order so as to circumvent the bid process, it is decided that no purchase order to be placed for the same item within 45 calendar days.

Prepared By MR	Reviewed By Principal	Approved by Executive Director

4.3.2 Purchase order

Purchase orders (F25, F102, F104, F116) are placed only on suppliers from the approved list except where it is a specific requirement of the customer none of the suppliers from the list can supply the material/ service. Purchase Order is prepared by the Purchase Manager.

Purchase order contains the following information as a minimum.

- Clear description of goods/services to be procured.
- Quantity, rate and value
- Requirement of test certificates, if any.
- Delivery schedule.
- Mode of dispatch and payment terms.
- Inspection clauses

Electronic Purchase Order

Electronic Purchase Orders for library books are prepared by Librarian and for other materials are prepared by Store and Purchase Manager. These are reviewed, approved and sent by the authorized personnel. The hard copies of sent email will be filed with the person who prepares the order.

Copies of purchase order are distributed to stores and accounts departments.

Prepared By MR	Reviewed By Principal	Approved by Executive Director

4.4 Verification of purchased products

4.4.1 The purchased materials are inspected by the store personnel for quality and quantity as per the specifications mentioned in the purchase order and incoming inspection parameters.

The details of inspection and verification are recorded in the Purchase Order F25.
In case of discrepancies, the same is resolved with the supplier.

4.4.2 The purchased products after verification, taken into the Stock register F27-0 and stored in designated location in the store.

4.4.3 When agreed with the customer or his representative, the performance of on-site supplier verification, method of verification etc are specified in the respective purchase order.

4.4.3 After inspecting and verifying the products/ services, a copy of the Purchase Order (with remarks) will be sent to the Accounts Department with the bill. One copy of the Purchase Order will be retained by the Purchase Department.

5.0 Reference:

5.1   Procedure for control of records.
5.2   Procedure for Library Management

6.0 Records

6.1   General requisition Form F21-0
6.2   Purchase Order for Capital Goods. F25-0
6.3   Blanket Purchase Order F104
6.4   Emergency Purchase without PO F105
6.5   Emergency Purchase Register F106
6.6   Stock Register F27-0
6.7   Approved list of Suppliers. F28-0
6.8   Supplier capability report. F29-0
6.9   Supplier evaluation report F30-0
6.10   Purchase Order for Consumable Items Fl 16
6.11   Requisition for Capital Goods Fl 14

Prepared By MR	Reviewed By Principal	Approved by Executive Director

Procedure for Store Operation

1.0 Purpose

To set a procedure for the operation of store which includes storage of materials, sale of merchandises, and inventory control.

2.0 Scope

This procedure covers

d) Storage of merchandises
e) Supply and sale of merchandises as per request
f) Inventory control

3.0 Responsibility

Purchase Manager:

i) Assesses the requirements and if not in stock, makes arrangements for purchase

ii) Periodically check the merchandises in stock (physical inventory) to keep track of the materials

Store keeper:

i) Supply and sale of merchandises
ii) Collecting money for the sold items and submitting to the Accounts department
iii) Data entry

Director /Principal

i) Approval of Requisitions

4.0 Procedure

4.1 Requisitions

4.1.1 For consumable items

Request for general items (stationery items, merchandise that contributes to the educational program or approved extra-curricular programs) is made by the heads of the departments in duplicate using General Requisition form F21. The General Requisitions are to be approved by the Executive Director or in his absence by the Principal. Once approved, the items will be issued to the respective department Heads within 24 hours, by the Store keeper/ in charge. The Store in Charge will make an entry in the computerized stock register. The total amount of the items on each requisition will be calculated, written down on the requisition, and will be forwarded to the Accounts Department. A copy will be kept with the Store.

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4.1.2 Request for Capital Goods

Request for capital goods will be made by the department head in the form Fl 14 and will be forwarded to the Purchase Department.

4.1.3 Request for Library items

The procedure is detailed in the Procedure for Library Management (NI: PR: 14, page 1 of 6).

4.2   Supply of materials

The materials requested through General Requisition (F21) should be supplied to the requestor within a reasonable period of time from the time of receipt of approved request. If the item could not be supplied for any reason, it should be noted on the General Requisition against that particular item.

The details of the material and quantity supplied will be entered in the Stock Register F27 (or in the Compute system) within 5 days from the date of delivery. In case of capital goods, upon the arrival of goods, the Store Manager notifies the requestor (department Head) for verification of the goods. If the goods are found acceptable, the details of the goods will be communicated to the Finance Manger who will make an entry in the Asset Register. An identification number will be given to each material by the Finance Manager which will be affixed to the material by the Store Manager. The material will then be issued to the requestor

Prepared by MR	Reviewed by Principal	Approved by Executive Director

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4.3   Sale of Merchandise

The sale of merchandise is prohibited during the class hours. The sale is allowed during break time, lunch time or after the class. The quantity and material supplied will be entered in the computer system (F27) daily and the amount collected will be deposited with the Accounts Department at the end of the day. Any cash held overnight at the counter must be stored in a locked cabinet.

4.4   Inventory control

The Store Manager takes a physical inventory at the end of each academic year. The Store Manager also must count a few items in stock (preferably 10% of the total number of items), randomly picked, and check whether there is any discrepancy with the count shown in the Stock Register.

4.5   Security

The keys to the store must be kept to a minimum. Keys should be given to only those people who need unrestricted access to the store. This is the greatest control mechanism to reduce the shrinkage of inventory.

If a key is lost or if there is reason to believe that a key is in the hands of an unauthorized person, the Store Manager should change the lock to the store.

5.0   Reference

5.1   Procedure for control or records

6.0   Records

6.1   General requisition Form F21-0

6.2   Stock Register F27

Prepared by MR	Reviewed by Principal	Approved by Executive Director

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Procedure for enrolment and assessment of part time faculty

1.0   Purpose
To lay down a procedure for enrolment and assessment of part time faculty on the basis of their ability to meet the quality requirement

2.0   Scope
This procedure applies to part time faculty enrolment and assessment.

3.0   Responsibility
Principal, Vice Principal and HODs will be responsible for this.

4.0   Procedure

4.1   Enrolment of new part time faculty.
Every year during the month of March, HOD identifies the part time faculty requirement based on the requirement for the next academic year.

Based on the assessment of the requirement, the part time faculties are identified by way of advertisement/contacting institutions. Interview is conducted based on the Competency Matrix for part time faculty (F31A- minimum requirement for hiring) and the selection will be done accordingly. An approved list of part time faculty is maintained in form F 32-0 by the Principal.

Prepared by MR	Reviewed by Principal	Approved by Director

1.1   Evaluation of the existing part time faculty

Evaluation of the existing part-time faculty is done based on the following parameters

1. The evaluation given by the students using the feed back form (F43)
2. Self-evaluation by the faculty (F 75)
3. Evaluation by the HOD using the form F75A which details the various criteria for evaluation.
4. Evaluation by the Principal using the form F75A

Each evaluation is quantitative and 25% of each evaluation score is added to get the total evaluation score (the maximum being 100).The overall evaluation of the faculty is given in the form F78 (Faculty Evaluation). A score of 60 or above is considered as an acceptable level of performance.

If the total score is 60% or above then the faculty name is retained in the list, else the name of the faculty will be deleted from the list

5.0   Reference
Nil

6.0   Records
6.1   Faculty Profile form F 31-0
6.2   Approved list of Part time faculty F32-0
6.3   Students' feedback F43
6.4   Self evaluation by part-time faculty F75
6.5   Evaluation of part-time faculty by Principal/HOD: F75A
6.6   Faculty Evaluation F78

Prepared by MR	Reviewed by Principal	Approved by Director

PROCEDURE FOR COURSE PLANNING

1.0 Purpose

To lay down a procedure for preparation of scheme of course, teaching materials, records, notes, equipments and study materials for each approved course based on syllabus/guidelines prescribed by the university.

2.0 Scope

It applies to the following courses.

M. B.A
- Affiliated to Calicut University, Approved by A.I.C.T.E

3.0 Responsibility

Principal, Vice Principal, HODs and faculties.

4.0 Procedure

For each approved course, the HOD of the concerned department in line with the specification/guidelines of the university/approved bodies maintains a master file.
The master file of each course contains the following details:

a.   Objective of the course
b.   Scheme of the course
   1. Duration of course
   2. Date and month of commencement
   3. Eligibility such as age, educational qualification etc.
   4. Fee details
   5. Number of students per batch
   6. Name of subjects and subsidiary
   7. Number of teaching and/practical hours for each subject

Prepared By MR	Reviewed By Principal	Approved By Executive Director

c. Teaching materials
   1. Detailed syllabus
   2. Program Schedule
   3. Practical plan
   4. Training/Teaching scheme

d. Records, notes and equipments

   4. Records to be kept by the students
   5. Records to be kept by the teachers
   6. Tools, equipments and other facilities

e. Study Materials

   7. Text books prescribed
   10 Books for reference and their availability 11 Library
   facility
   12 Study materials offered

f. Programme for academic excellence
   1. Utilizing OHP
   2. Computer aided learning schemes
   3. Project work
   4. Seminars

g. Evaluation of student performance

   1. Internal Examinations
   2. Assignments
   3. Seminars
   4. Assessment of extra-curricular activities
   5. Leadership quality and character
   6. Attendance

Prepared By MR	Reviewed By Principal	Approved By Director

h. Instruments of evaluation

The quality of the coaching is assessed by obtaining feedback from the students on the following aspects:
Facult
y
Course
Teaching   method
About the institution

i. Model examination scheme

4.1   Revision of Syllabus

Whenever the University revises the syllabus, the Principal will forward a hard copy of the syllabus to the Heads of the Departments. The HODs will stamp the syllabus to indicate the revised syllabus and the year & batch to which it is applicable. A separate folder will be kept by the HOD to file the syllabus.

The Master file will be revised to reflect the revised syllabus and the new documents will be stamped to indicate the revised syllabus and the year & batch to which it is applicable. The revised syllabus in the Master file has to be reviewed and approved by the authorized personnel. If different syllabi are there for different batches of the same course, the Master file will reflect all different syllabi separately.

4.2   Preparation of Program Schedule

Before the commencement of the new academic year/ semester, the Head of each department will secure the updated syllabi for the courses and will forward to the respective subject teachers. The subject teachers will prepare the program schedule by breaking down the topics month-wise after examining the number of hours scheduled for the course and the syllabus mandated by the University. The HOD will verify the program schedule for topics and the hours and will forward to the Principal for approval. The program schedule should be made accessible to the students.

Prepared By MR	Reviewed By Principal	Approved by Executive Director

4. 3 Analysis of Result

The result of the internal and external (University) examination will be analyzed after the exam result is published. The HOD will verify the analyzed report. Wherever corrective action is needed and possible, it will be performed.

5.0   Reference:

5.1 Control of Records
5.2 Master file for Management

6.0 Records:

F123: Analysis of Examination Result

Prepared By MR	Reviewed By Principal	Approved by Executive Director

PROCEDURE FOR THE CONDUCT AND EVALUATION OF COURSES

1.0 Purpose

To lay down a procedure for conducting an approved course and monitoring and evaluating the performance of students and conducting examination.

2.0 Scope

It applies to all approved courses under Calicut University.

3.0 Responsibility

Director, principal, Vice Principal, HODs and faculties are responsible for this.

4.0 Procedure
4.1 General

Before the commencement of any approved course the respective HOD ensures the availability of the respective Master File in the department. Based on the specifications mentioned in the Master File, the HOD before commencement of each approved course ensures the following.

Availability of faculty, classroom, laboratory equipments, library books and study materials.

The following records/documents are maintained by HOD: Classroom
    Timetable (Weekly)
    General Staff timetable
    Department wise Staff timetable
    Individual Staff timetable

Prepared By MR	Reviewed By Principal	Approved By Director

4.2 TEACHING AND CLASSROOM MANAGEMENT

For each course, the teacher-student ratio as prescribed in the Master File is maintained.
One of the faculties is designated as **class teacher** who in addition to the duty as a faculty shall perform the following activities:

- □ Maintenance of attendance register F38-0
- □ Daily work register F45-0
- □ Internal Examination assessment report F39-0/ F39A
- □ Maintenance of progress report F44-0/F44A
- □ Ensuring the entry of work report in the daily work register by all teachers of the class.

Subject teachers are responsible for the following:

- □ Preparation of session plan for Program Schedule
- □ Record the attendance of students for each course and ensure that at least 75%/D grade is attendance is attained for each course.
- □ Engaging theory and practical classes.
- □ Giving assignments to students and evaluation.
- □ Giving test papers, preparing questions for exams and evaluation.
- □ Entry of details of results in the Internal Examination assessment report form.
- □ Giving internal marks based on the assignments/ projects and Internal Examination result.
- □ Employing effective methods and techniques so that a minimum of 75% students secure C grade and above and a minimum of 20% students secure B grade and above in the internal examinations.

MONITORING and EVALUATION

The daily monitoring of the class is done by class teacher besides conducting test and assignments for each subject as per schedule.

The performance of the students in the test/assignments is reported to their ■ parents at prescribed intervals (after the internal examination) in progress report F44-0/F44A.
Principal/HOD does teaching process evaluation of teachers and records their findings in faculty evaluation form F78.
The performance of the teachers is also assessed by using student feedback form F43-0 administered yearly. For teachers with less than one year experience with the institution, the feedback will be taken semi-annually.

Prepared By MR	Reviewed By Principal	Approved By Executive Director

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CONDUCTING FINAL EXAMINTION

Final examination for each approved course is conducted by the approved body as per their stipulations.

Facilitate for getting Hall ticket: Class teacher is responsible for coordinating all activities specified above.

REFERNCE
Master file for MBA
RECORDS
1. Classroom time table(weekly)F33-0
2. System utilization chartF34-0
3. Staff time table(General)F35-0
4. Staff time table(department wise)F36-0
5. Staff time table(Individual)F37-0
6. Attendance register(Students)F38-0
7. Internal Examination assessment reportF39-0/F39A
8. Faculty evaluation form F78
9. Students Feedback formF43-0
10. Progress report F44-0/F44A
11. Daily work registerF45-0
12. Parents Feedback Form F-72

Prepared by MR	Reviewed by Principal	Approved by Director

PROCEDURE FOR ACADEMIC ADMINISTRATION

1.0 Purpose
To lay down a procedure for managing facilities like library, fee administration, admission cancellation and related aspects.

2.0 Scope
This includes aspects of library, fee administration, cancellation of admission, readmission of fee defaulters etc.

3.0 Responsibility

Examination Fee collection	- Superintendent
Course related fees (except Exam fee)	- Cashier
Library- late fee	- Librarian
Photostat fee	- Photostat in-charge

4.0 Procedure

4.1 Library
4.1.1 Students admitted to any of the approved courses can avail of the library facility.

4.1.2 The students and faculties can get the library books issued to them using their ID cards (ID-05)

4.1.3 Students are issued with two books for a period of seven-days and faculty members can keep the books for a period of one month and a maximum of five books at a time.
A fine of Rs. 5/- per day is collected from the student if the book is not returned by the due date.

4.1.4 Books, marked as "REFERENCE BOOK" in the library, are not issued. But if required, reference books can be issued with the written permission of the Principal.

In case of loss or damage to library books which are issued, recovery is done from caution deposit and if necessary additional amount is collected from the student/Faculty. These are done in consultation with the Principal.

Librarian maintains the details of issue and return of books in computer system. Library registers F46-0 (for students) and F47-0 (for faculties) shall be maintained to enter these details manually when the computer system is down.

Prepared By MR	Reviewed By Principal	Approved By Director

4.2 Fee administration

4.2.1 Candidates admitted to any approved course are informed about the fee collection schedule and the mode of payment. The fees are collected on annual basis and the details are entered in the fee register F20-0

4.2.2 The fees are collected from the students by the Administration department by way of cash/demand draft/cheques.

4.2.3 The fees are collected annually on the reopening day of the academic year. Students can pay fees without fine for the first 10 working days. There after the fees can be paid with fine as shown below:

next 10 days – with a fine of Rs. 25
thereafter with a fine of Rs. 100.

First year students cannot make avail of this fine system, as they have to pay the whole fees at the time of admission. Hence this applies only for the second and third year students.

The students who fail to remit the fees in the stipulated time are served a notice with intimation to the parent.

If the student fails to remit the fees even after the notice, he/she shall not be allowed to attend the classes.

The fee defaulters record F82 is prepared by the Supt.

4.2.4 The fee defaulters are readmitted on satisfying the following conditions.

a. Written application for readmission from the parents with valid reasons
b. Payment of fee dues with fine from the due date.

On receipt of the request for reinstatement, PCP in consultation with the Director reviews the application and takes suitable decision.

4.2.5 REFUNDS

The refund of the fees is governed as per stipulations given below.

1. Application fee and admission fee: Non-refundable
2. Tuition fees : Non-fundable
3. Caution deposit: Refundable

5.0 Reference

5.1 ID Card ID-05

6.0 Records

6.1 Library Register (Students) F 46-0
6.2 Library Register (Faculty) F 47-0

Prepared By MR	Reviewed By Principal	Approved By Director

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PROCEDURE FOR FACULTY SELECTION

1.0   Purpose

To lay down a procedure for identification and selection of faculty.

2.0 Scope

It applies to identification, recruitment and selection of teaching staff.

3.0 Responsibilities

Director, Principal and HODs are responsible for coordinating all activities.
1   HOD are responsible for identifying requirements of faculty.
2   Director ,Principal and HODs are responsible for making selection.

4.0   Procedure

Every year during the month of March, HOD shall identify the part time
/full time faculty requirement based on the data from the following sources.
a) Existing faculty to be retired during the academic year.
b) Existing faculty likely to leave the organization by way of resignation.
c) Willingness of existing faculty to continue next academic year.

4.1 Based on the details available from the above sources and by considering the requirement
of faculty for any new approved course, subject/language-wise faculty requirement is
identified by HOD and
communicated to the Principal through Vacancy Fill Request form F48. The principal after
consulting with the Director makes a decision on the request and notifies the HOD using the form
F48A (Decision on Vacancy Fill Request). If the vacancy fill request is approved, the details will
be entered in the Vacancy Register (F49).

Applications are sought by any of the following methods.
a) Advertisement in news paper
b) Contacting recruitment consultants.
c) Unsolicited applications/resumes available in the institute.

Prepared By MR	Reviewed By Principal	Approved By Director

Shortlisted candidates are intimated to appear for a personal interview. The candidates are issued with the Application for Employment F99 prior to the interview.

Interview is conducted based on the Competency Matrix (F31- minimum requirement for hiring) and the selection will be done accordingly. The interview is conducted by a panel comprising of the Director, Principal and HOD. The details of interview scoring and the scoring in trial class are recorded in the evaluation sheet by the panel. Based on the overall score the selection will be done.

5.0 Reference
5.1 Procedure for control of records NI: PR: 02

6.0 RECORDS
6.1 Vacancy Fill request form F48
6.2 Decision on vacancy fill request F48A
6.3 Vacancy Register F48B
6.2 Application for employment F99
6.3 Competency Matrix F31

| Prepared By MR | Reviewed By Principal | Approved By Director |

Procedure for assessment of faculty

1.0 Purpose

To lay down a procedure for assessment of fulltime faculty on the basis of their ability to meet the quality requirement

2.0 Scope

This procedure applies to full time faculty assessment.

3.0 Responsibility

Principal, Vice Principal and HODs will be responsible for this.

4.0 Procedure

4.1 Evaluation of the faculty

Faculties in the first year of their employment will be evaluated semi-annually. After the first year, yearly evaluation will be conducted.

360-degree feedback is used for performance appraisal. Assessment is based on the feedback provided by students, self, peers, and supervisors.

1. The evaluation given by the students using the feed back form (F43)
2. Self-evaluation by the faculty (F 49)
3. Evaluation by the HOD using the form F49A which details the various criteria for evaluation.
4. Evaluation by the Principal using the form F49A
5. Feedback from peers using the form F49B

The percent contribution of individual evaluation towards the final overall score varies. 25% each of student and HOD evaluation, 10% each of self and peer evaluation, and 30% of Principal's evaluation contribute to the final score. The overall evaluation of the faculty is given in the form F78 (Faculty Evaluation).

A score of 60 or above is considered as an acceptable level of performance. If the faculty scores 60% or above, then the faculty will be retained. If the score is below 60%, appropriate action needs to be taken. If the Director/ Principal feels that further training could help the faculty to improve the performance, the faculty shall be given the opportunity to undergo the required training. During this period the faculty will be considered as discharged from the duties and will be under loss of pay. This period should not extend more than six months. The faculty shall be terminated if the former option seems not proper.

5.0 Reference

Nil

7.0 Records

6.1 Students' feedback F43
6.2 Self evaluation by faculty F49
6.3 Evaluation of faculty by Principal/HOD F49A
6.4 Peer evaluation F49B
6.5 Faculty Evaluation F78

Prepared By MR	Reviewed By Principal	Approved By Director

Procedure for Library Management

1.0   Purpose

To lay down a procedure for purchase, receipt, issue and day-to-day management of library

2.0   Scope This applies to the purchase, receipt, issue and day–to- day management of library

3.0   Responsibility Librarian and Assistant librarian are responsible for coordinating the activities.

4.0   Procedure

4.1   Purchase

To purchase books and CDs, Purchase Orders can be placed either manually or electronically.

The Department Heads will prepare the requisitions (form Fl 15- Requisition for Library items) in duplicate for the required items and forward to the Finance Manager who will forward it with remarks to the Principal for final decision. If approved, the original will be sent to the Librarian to prepare the Purchase Order and a copy will be sent to the HOD. The Librarian will prepare the Purchase Order (F102) in duplicate and will forward it with the approved Requisition (Fl 15) to the Finance Manager who, in turn, will forward with remarks to the Executive Director for a decision. If approved, the Librarian will place the order. On arrival of the items, the requestor will inspect the items for conformance to the specifications. The Purchase Order will be sent to the Accounts Department with the bill and the approved Requisition. A copy of the PO will be kept with the Librarian.

The Librarian will make proper follow up on the Backorder items and will make a remark on the Purchase Order.

4.2   Management

Followed by all major libraries.

Library opens on all working days i.e.: six days of the weeks. Timings: -From 8.30 AM to 8 PM.

The first procedure soon after the opening of the library is ensuring that everything is in order and up to date. The main activities include, putting on the system, Photostat The library follows the DDC (Dewey Decimal Classification) scheme for the classification of books. The DDC scheme is an internationally approved scheme of classification machines, etc, updating Register & entering the new books into the Registers etc.

Prepared by MR	Reviewed by Principal	Approved by Executive Director

4.3   Entering A New Book, CD, Magazine, News Paper etc

4.3.1   Whenever a new book or C D arrives Librarian checks it, and ensures that all the pages are complete and without any defect.

4.3.2   The book is sealed with the library seal on the Title paper, Page No: 21, 101 and the last page. (These pages are called secret pages) .The details of the book of new arrivals (CD's etc) are entered in the Accession Register F50-0. The following details of every book are entered in the Accession Register. The details are entered bill wise.

1.   Date
2.   Accession Number
3.   Author
4.   Title of the Book
5.   Publishers Place
6.   Supplier
7.   Vol/ Edition
8.   Year of Publication
9.   Call No. (call No- is the Number given section wises and the name. Of Author).
10.   Cost
11.   I S B N
12.   Collation Number (Page No)

These details are also entered in the computer system for a new book or CD.

4.3.3

The above mentioned details of the book are entered in the catalogue in the computer system. After entering the data in the Book Catalogue in the computer, the data in the Accession Register (in the computer) are automatically updated. The students and staff can search for books using the Online Book Search module.

The Accession number is given on the Title pages, page no: 101 and the last page in blue ink. Accession number is written on 21st page with black ink.

The books are not circulated before the completion of these formalities.

In the case of books the call. No - consisting of the number put section wises (e.g.: - Hotel Management, Commerce etc) and the first three letters of the surname of the Author is put on a tag and pasted 2.5 inches away from the bottom of the book and it is arranged number wise in the racks.

Prepared by MR	Reviewed by Principal	Approved by Director

4.3.4 Entering a Magazine or Newspaper

Separate Registers are maintained for daily periodicals (F53-0) as well as monthly & weekly periodicals F52-0. In the case of dailies the entry is made in the concerned register on daily basis. Then they are sealed and put on the respective racks.

Details of monthly and weekly periodicals are entered on the concerned register. The details to be entered are

(1). Serial No

(2). Date of Publication

(3) Month & year.

(4). Volume

(5). Number

(6). Date of Receipt

(7. Signature of the librarian

(8) Remarks.

Then the title page is sealed, Page No: 21, page No: 101 or 51 as the case may be and the last pages, Then they put on the respective racks.

An Index is maintained for the all weeklies & magazines.

NB. Magazines, daily Periodicals, are not issued to the students for taking home.

4.3.5 Entry of the CD

A separate Register is maintained for CD (F54-0). But the accession number for CD is put in continuation with that of Books.

All these details are also entered simultaneously into the computer system.

4.4 Issuing of Reference Books

Reference books are issued for the use within the Library only. In case of dire urgency the same can be issued only with the special permission from the Principal/Director.

4.4.1 To students

Students who want to use reference of books in the library should strictly enter their names, batch, and course etc. in the counter register F51-0. The details of the books will be available from online catalogue. After reference they should return the books, periodicals etc before leaving the library. There is no limit to the number of books that can be used by the students.

Librarian checks all the books before placing it on the respective racks

Prepared by MR	Reviewed by Principal	Approved by Executive Director

4.4.2   **To Staff**:

The faculties may use the reference books only in the library premises. They need not enter any details on any register in order to use the reference book. After reference they should return the books, periodicals etc. before leaving the library. There is no limit to the number of books that can be used by them.

4.5   Issuing of General Books

4.5.1   To Students:

General books and books related to subject are issued to students during working days before 4.30 PM.   Only two books can be issued at a time. Students can keep the issued books for a period of seven days maximum.

Before issuing the book, the identification card of the student will be read into the computer system using a card reader (Radio Frequency Reader). The information regarding the student will be displayed in the system (Name of the student, Roll#, level, course, batch and year). The details of the book to be issued will then be read into the computer using a scanner (Accession number and title of the book). Due Date stamp is put on the due date slip posted at the back of the book. After completing these formalities the books are issued to the students. On returning the book, the identification card will be again read into the computer and the data will be entered.

An Issue Register F46-0 shall be maintained to enter these details manually when the computer system is down. In such situations, the student's signature should be obtained in the register before issuance. The same is applicable when the book is returned. The details shall be entered in the computer system when the system is restored.

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4.5.2 To Staff

Teaching staff can take a maximum of eight (8) books at a time. In addition, one book per subject (considered as the primary book for the subject) can be issued to a faculty for the entire period of the course. The Librarian should check with the Principal/ Vice Principal to confirm the number of subjects a faculty teaches. Other books can be used by the faculty for only one month. These books need to be renewed for further use.

The procedure of issuing the book and entry of the data is as explained under section
4.5.1 (Issuance of books to Students).

An Issue Register F47-0 shall be maintained to enter these details manually when the computer system is down. In such situations, the faculty's signature should be obtained in the register before issuance. The same is applicable when the book is returned. The details shall be entered in the computer system whip, the system is restored.

4.6 Issuing of CDs

4.6.1 To Students:

Only two CDs are issued to students, which they can keep for a maximum of two (2) days.
The procedure of issuing the CD and entry of the data (in the computer system and in the register F46) is as explained under section 4.5.1 (Issuance of books to Students).

4.6.2 To Staff

A maximum of two (2) CDs may be issued to the teaching staff for a period ol five (5) days.
The procedure of issuing the CD and entry of the data (in the computer system and in the register F47) is as explained under section 4.5.1 (Issuance of books '<<> Students).

4.7 Fines

4.7.1 **Fine for Late Return:** In case a student fails to return the book on the prescribed date, he/she is fined Rs.5 for each day of delay. This is applicable tostaff members also.

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4.7.2   **Fine for Missing books**: In case a book is lost or missing from the students then he/she would be required to pay a fine which is equivalent to three times the price of the book. This is applicable to staff members also.

4.7.3   **Fine for Damages:** If some books are found to be damaged while checking, then the one who used the book last is liable to pay an amount equivalent to the damages caused to the book. This is applicable to staff members also.

5.0 Other Facilities
Photostat Machines: - the service of Photocopier is provided to the requirements of the library, staff, students and office purpose.

6.0 Reports
Daily Reports: Any collection in the form of fine, Photostat services fee etc is given to the office at the end of the day. Separate books are maintained for keeping the account of the same.

Monthly Reports: At the end of every month, detailed reports of the fine collection (F83) as well as Photostat fee collection (F84) are submitted to the Director.

7.0 Verification of Stock
At the end of every academic year physical verification of the stock is done.

8.0 Reference:
Nil

9.0   Records:
(1) Accession RegisterF50-0
(2) Students Issue RegisterF46-0
(3) Students Counter & Issue RegisterF51-0
(4) Staff loan RegisterF47-0
(5) Periodical Register – Monthly & WeeklyF52-0
(6) Daily Periodical Register – News Papers F53-0
(7) C D RegisterF54-0
(8) Fine (Bill Book) F56-0
(10) Photostat Register F57-0
(11) Damage Reporting Book F58-0
(12) Binding List BookF59-0
(13) Monthly Report of Fine collection F83
(14) Monthly Report of Photostat Fee collection F84
(16) Purchase Order form F102

Prepared by MR	Reviewed by Principal	Approved by Director

Procedure for House keeping and Maintenance

1.0 **Purpose**

To lay down a procedure to ensure that the housekeeping and the maintenance of the building, equipments and other infrastructure are done to facilitate smooth operation.

2.0 **Scope**

This applies to all cleaning of the premises, classrooms, maintenance of equipments including the repair of furniture.

3.0 **Responsibility**

Maintenance worker: repair and maintenance of equipment, furniture and building

Caretaker: Cleaning of the premises, classrooms and offices

Principal/ Director: Approval of maintenance/ repair request, random check to verify the completion of work

Maintenance supervisor: verification of the completion of the work Originator of complaint/ request: verification of the completion of the work

4.0 Procedure

4.1 Housekeeping and Cleaning.

4.1.1 The sweeping and cleaning of the premises, classrooms, canteen, staff room, administrative block etc are done daily.

4.1.2 The toilets are cleaned and sanitized everyday

4.1.3 The details of cleaning and sanitation conducted are recorded in the cleaning check list register F60-0 and same is maintained by Housekeeping & Maintenance Supervisor.

4.2 Maintenance

4.2.1 Furniture and other accessories

The Staff/HOD identifies any breakdown or damage occurred to furniture or other accessories and reports the same in the Maintenance Request Register F- 61.

On receipt of the report, the Housekeeping & Maintenance Supervisor verifies the breakdown or damage and arrange for rectification or repairing of the furniture/accessories.

The details of rectification/maintenance are recorded in the maintenance request form F61-0.

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4.2.2   Maintenance of equipments.

The maintenance of equipments includes the maintenance of computers (except those in Computer lab), electronic lab equipments such as CRO, Function generator, etc. and the equipments used for practical as part of the Hotel management course such as oven, cooking ranges etc.

The maintenance of these equipments is conducted by approved agency and the record of the same is maintained in the concerned department.

Annual inspection & maintenance of all the equipments and facilities should be conducted.

4.2.3   Proper asset register to be maintained by the Housekeeping and Maintenance Supervisor F – 22.

4.2.4   Maintenance of computers in Computer Lab: A record of maintenance of computers in the Computer Lab will be maintained by the Computer Lab In-charge.

5.0   Reference

Nil

6.0   Records

6.1   Maintenance request form F-61
6.2   House keeping cleaning check list F-60
6.3   Asset Register F-22
6.4   Annual Maintenance Log F108

Prepared by MR	Reviewed by Principal	Approved by Director

Procedure for Operation of IT Department

1.0 Purpose
To set a procedure for the operation of Information and Technology department, which functions to ensure that all computer systems running without problems and to ensure that information is made available through network.

2.0 Scope
This procedure covers
d) Maintenance and repair of all computer related equipments
e) Inventory control of all the equipments

3.0   Responsibility
System Administrator
i) Assesses the priority of the repair/ maintenance required and assigns the personnel for the work

i) Periodically check the equipments/ hardware in stock (physical inventory) to keep track.

ii) Ensures that the software used is licensed; data backup done; and contact the dealers/ agents, whenever required, regarding problems with the system or network.

Technical Support Staff:
i) Make necessary repairs to the system/ equipments as per request.

Prepared by MR	Reviewed by Principal	Approved by Director

4.0 Procedure

4.1 General

Any repair requests received will be entered in the Maintenance request register (F40). The priority to various tasks will be assigned and the repair will be made. If the problem is not resolved internally, external technician will be contacted for repair. Details will be entered in the register.

The System Administrator will keep a register (F106) where details all computer related equipments (including software and hardware) will be entered.

If any equipment is removed from the Institution (for repair or any other purpose) the details will be entered in the External Service log (F41). An updated list of IP addresses of all computers will be maintained in the log F107.

The system administrator will make arrangements for security and data backup. The System Administrator also will take a physical inventory of all equipments/ hardware/ software once in a year.

5.0 Reference
Nil

6.0 Records

6.1 F40: Maintenance Register
6.2 F41: External Service log
6.3 F106: Stock Register with details of each computer
6.4 F107: List of IP addresses

Prepared by MR	Reviewed by Principal	Approved by Director

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Internal Audit

1.0 **Purpose**

To lay down a procedure to verify whether QMS activities and related results conform to the requirements of the International Standard, ISO 9001:2008 and comply with the planned arrangements to determine the effectiveness of the quality management system.

2.0 **Scope**

All areas in NBS where activities contribute to quality of educational service.

3.0 **Responsibility**

MR is responsible for planning, scheduling and conducting periodic audit and maintenance of this procedure.

HOD s are responsible for presenting the necessary- documents and records for auditing and ensuring that any necessary corrections an corrective actions are taken without undue delay to eliminate detected nonconformities and their causes.

4.0 Procedure

4.1.1 All activities covered by quality management system are audited at least once in four months.

4.1.2 Internal audit is scheduled on the basis of status and importance of activities and results of previous audits.

4.1.3 An annual audit schedule is prepared by MR in consultation with HOD's at the beginning of the year in form F62-0. Unscheduled or emergency audits can be conducted if required by management whenever adverse quality trends are noticed or there are major changes in the process or similar other conditions.

4.1.4 Based on the annual audit schedule, specific audit schedule is prepared in form F63-0 and communicated to the departments well in advance.

4.1.5 MR also identifies the names of qualified auditors who are to perform the audit and include their names in the audit schedule prepared as detailed above.

4.1.6 Internal auditors including the MR are trained in the techniques of auditing and qualified by training them in internal auditing. The training covers the requirements of ISO 9001:2008. After having trained, they shall witness at least one audit conducted by a qualified lead auditor after that they will be permitted to perform internal audits.

Prepared by MR	Reviewed By Principal	Approved by Executive Director

MR maintains list of auditors eligible to perform internal audits for the company in form no. F64-0

Auditors are not allowed to audit their work areas or those functional responsibilities under their charge in order to ensure independence of internal audit.

4.1   Execution of audit

4.1.1   Auditees are informed of exact time and date of the audit and the scope of the audit.

4.1.2   The auditors as per their discretion may prepare audit checklist. Use of checklist though not mandatory, is recommended to use it. At the end of the audit , the checklist may be deposited with the MR.

4.1.3   The auditors maintain objectivity and fairness throughout the audit. Evidence is collected through interviews, verification of documents and observation of activities. Any deviation from the approved documented procedures, guidelines or other applicable documents is considered as non-conformity.

4.1.4   The non-conformities relating to the quality management system are documented in the non-conformance report form. F65-0

Prepared by MR	Reviewed By Principal	Approved by Director

4.3 **Audit**

Report 4.3.1 The non-conformance report is prepared by the auditor. The auditor discusses with auditee and fill up corrective action and target date for effecting corrective action. All non-conformance reports are signed by the concerned auditee as a token of acceptance of the non-conformity.

All NCs are recorded clause wise in the audit summary report form F66-0 and analyzed. MR circulates the audit report to the persons concerned for information and necessary action.

4.4 **Follow** **up**

action 4.4.1 The management responsible for the area being audited shall ensure that any necessary corrections and corrective actions are taken without undue delay to eliminate detected nonconformities and their causes. Corrective-actions are recorded in the Non Conformity Report (NC) and inform the auditor regarding the same.

4.4.2 Auditor makes follow up with auditee and review implementation of corrective action after auditee reports its completion.

4.4.3 After checking of evidence, the NCR is filled up, signed and sent to MR if corrective actions are effectively implemented.

4.4.4 Follow up audit is carried out to verify and record implementation and effectiveness of the corrective action taken.

4.4.5 MR verifies the effectiveness of the implementation of corrective actions as recorded by auditor and closes the non-conformance if completion is satisfactory.

4.4.6 The results of internal audit are discussed in management review meeting to assess the effectiveness of implementation of the quality management system.

5.0 **Reference**

5.1 Procedure for Quality records NB/PR/02

6.0

Record 6.1 Audit schedule F63-0

s 6.3 Non-conformance form F65-0

6.4 Audit summary report F66-0

6.5 Annual audit schedule F62-0

6.6 List of auditors F64-0

6.7 Audit Conformity Report F76

Prepared by MR	Reviewed By Principal	Approved by Executive Director

Control of Non-Conforming Product

1.0 **Purpose:**
To lay down a procedure for control of non-conforming products/services effectively and expeditiously to prevent unintended use.

2.0 **Scope**
This section covers all non-conforming documents, equipments and other services right from admission till completion of the course.

3.0 **Responsibility:**
Any employee of the Institute can point out non-conformity. Auditors are authorized to raise non-conformities during internal audits. Authority for review of non-conformities is HOD's. Disposition and verification of effectiveness of action taken is by MR/Principal/Director.

4.0 **Procedure:**
Any employee of the institute can be the originator of non-conformity report. Non-conforming services/documents are identified at all stages of the process of education. These documents/services are identified and are segregated from the res1 and kept separately for review and disposition.

When non-conforming product is detected after delivery or use has started, furth< r delivery of the service/ product is discontinued immediately and the cause is identified and corrective action is taken to prevent it from happening in the future. If the no;; conformity is caused in the delivery of educational service, the provider of the service will be located and stopped immediately from providing the service. The faculty will be trained before being allowed to provide further service. However, during this period the service could be provided by another appropriate faculty. The authority for this action lies with the HOD / Principal.

4.1

Aspect	Identification and report	Review & Disposition
Non-conformance in admission process	Supt.	MR/Principal
Non-conformances in course conducting and evaluation.	Teachers/HOD,s	Principal
Nonconformance in Preparing session plan For program schedule	HOD,s	Principal
Nonconformance in the Work register	HOD's	Principal
Non-conformances in the computer lab equipments	Lab-in-charge	HOD
Non-conformances in the library books	Librarian	Principal

Prepared by MR	Reviewed By Principal	Approved by Director

Students who score marks 60% or below during the Internal Examination are identified by the class teacher. Parents of such students are informed regarding the status performance.

All non-conformances get detected during the process are recorded in the non-conforming product register 67-0

4.2 Review and disposition.

Incoming stationary items are identified as non-conforming products are reviewed by Bursar. The review includes analysis of non-conformities, measures for disposition to be taken and also recommend action to be taken with respective supplier.

The non conformities that are identified during admission process are reviewed by Supt. and disposition is done in consultation with Principal/Director.

4.3.1 In process & final inspection

Non conformities observed during the course delivery and Internal Examination assessments are reviewed by HODS and recommend disposal measures.

The review includes evaluation of nonconformities and recommend Appropriate disposal measures. The disposition is done by the PCP/DIR.

Supt./Faculty or designated person performs the correction, enter the details in the NCP register and informs the PCP/DIR.

Correction performed is verified by PCP/DIR for adequacy and accuracy.

If the correction performed is found to be satisfactory, PCP/DIR closes the NC with appropriate remarks. In case it is not satisfactory, the designated person is advised to re-perform the correction.

Prepared by MR	Reviewed By Principal	Approved by Director

4.3.2 Disposal based on review

The review of non-conformities leads to any of the following:
   a. accept the product as it is
   b. rework
   c. scrap

4.3.3 The records of review and disposition are maintained.

5.0   Reference
   4.2   Procedure for records NB/PR/02
6.0   Records
   6.1 Non-conforming product Register F 67-0

Prepared by MR	Reviewed By Principal	Approved by Director

<div align="center">Corrective action</div>

1.0 **Purpose**

To lay down a procedure for implementing corrective action to eliminate existing causes of non-conformities.

2.0 Scope

This covers reporting of non-conformities, data collection, cause, investigation, analysis and implementation of corrective action on non- conformities observed in the following areas.

a) Non conformities in the incoming products/admission
b) Non conformities during course delivery
c) Customer complaints
d) Internal audit report

3.0 **Responsibility**

Responsibility for investigation and analysis and implementing corrective action is as shown below:-

Non Conformity in	**Analysis**	**Implementation**	**Verification**
Incoming products	HODs	ADM-Dept	Supt.
Admission	Supt.	Supt.	PCP
During course delivery	HOD/PCP	Faculty/HOD	PCP
Customer complaint	PCP/Supt.	Person assigned	PCP/Director

4.0 Procedure

4.1 Customer complaint handling

    4.1.1 Customer complaints received from all sources are recorded in the customer complaint register F68-0

    4.1.2 The Principal does preliminary analysis of the complaints that are related to the academic issues and Supt. does the analysis for issues related to other areas. Root cause analysis is done by using appropriate method and corrective action is initiated to dispose of the complaint at an early date.

    4.1.3 Principal, depending upon the nature of complaint, verifies the effectiveness of the corrective action taken.

Prepared by MR	Reviewed By Principal	Approved by Director

4.2   Quality System

The non-conformance reports of internal audit are submitted to MR by the auditors. Analysis and corrective action taken are reviewed by MR.

4.3   Corrective Action (Process related)

4.3.1   The non-conformities that require corrective action and the recurring non conformities recorded in the NC record are brought to the corrective action register on a monthly basis.

4.3.2   Corrective action is implemented based on the importance of the problem encountered.

4.3.3   Root cause investigation and analysis of non-conformities are done by direct observation, measurement and analysis of process and work operation. The result of investigation and analysis are recorded in the Non-compliance report.

4.3.4   For non-conformances that occur again and again, the need for appropriate action is evaluated and the same is implemented.

4.3.5   Corrective action required to eliminate the causes of non- conformances is determined by Principal/ HODs and implemented by the person assigned.

4.3.6   Effectiveness of corrective action taken is reviewed by Principal/HOD. Any revision to be made in the QMS documents as a result of corrective action initiated will be carried out. The corrective action implemented is reported to the management review meeting.

4.3.7   Records of implementation and verification of corrective action are maintained.

5.0 Reference

5.1 Procedure for control of non-conforming products.

5.2 Procedure for control of records

6.0 Records

6.1 Customer complaint register F68-0

Prepared by MR	Reviewed By Principal	Approved by Director

Preventive Action

1.0 Purpose

To lay down a procedure for implementation of preventive action to eliminate potential causes of non-conformities.

2.0   Scope

This covers reporting of potential non-conformities, data collection, and cause investigation, analysis, implementing preventive action on non- conformities observed in the following areas.

(a) Admission, course conducting and course delivery.

(b) Customer complaints.

(c) Internal audit report.

3.0 Responsibility

Potential non conformities in	Responsibility
Process related	Director/ PCP/HODs/Vice principal
Customer complaints	Supt./PCP
Internal audit	MR

4.0   Procedure

4.1   In case the observed non-conformities point towards any potential non-conformity, MR/PCP/HOD`s institutes preventive action to prevent occurrence of such potential non-conformity.

4.2   Sources of potential non-conformities are identified once in a quarter by convening a meeting of HOD`s and other functional heads by MR and are recorded in the preventive action register F70-0

4.3   Root causes for the potential non-conformances are analyzed based on observation, trend in service quality etc and are recorded in the register.

4.4   Preventive actions are implemented based on the importance of the effects of the potential problems.

Prepared by MR	Reviewed By Principal	Approved by Director

4.5 All major and repetitive types of complaints/non conformances are analyzed in detail and appropriate action is determined and implemented.
Preventive action may include
a) Supplier development
b) Changing practices or procedures
c) Enforcing conformance to specific requirement

4.5 The results of preventive action taken are recorded in the preventive action register.

4.6 The effectiveness of the preventive action taken is reviewed by Principal/MR.

4.7 Any revision to be made to the QMS documents as a result of preventive action initiated will be carried out. The preventive action implemented is reported to the management review meeting.

5.0 Reference
5.1 Procedure for control of records.

6.0 Records
6.1 Customer complaint register F68-0
6.2 Preventive Action Register F70-0

Prepared by MR	Reviewed By Principal	Approved by Director

Procedure for Internships

1.0 **Purpose**

To lay down a procedure to facilitate industrial training for students of MBA students to evaluate their performance during training.

2.0 **Scope**

Applies to MBA students

3.0 **Responsibility**

Principal, HOD, Placement Coordinator and faculty members of MBA department is responsible.

4.0 **Procedure**

4.1 **General**

Before the beginning of the academic year, the HOD, in consultation with the Principal and Placement Coordinator, prepares the Training Calendar and submits to the Principal for approval. The calendar should include the period of training, project report submission date and date of presentation. The calendar should show the dates of submission of list of properties. It is the responsibility of the HOD to notify the concerned personnel any change of schedule.

The Placement Coordinator submits the list of properties selected for training to the Executive Director for approval. The approved list is then forwarded to the Principal requesting the list of students for appropriate properties. The Principal notifies the HOD and the HOD prepares and submits the list of students to the Principal for approval. The approved list will be then forwarded to the Placement Coordinator for sending the students for training interviews.

Prepared by MR	Reviewed by Principal	Approved by Director

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During the training period the Placement Coordinator will visit the properties or will contact the Supervisor of the property via phone/email to know about the performance of the student. The Placement Coordinator will prepare a performance report for each student under training.

4.2   Selection of Students: Students are ranked and selected for training based on the following parameters.
1. Attitude towards people, studies and profession- 40%
2. Skills (soft skills and academic (practical) skills) – 30%
3. Subject knowledge (scores from internal examinations) – 30%

4.3   Considering the volatile nature of the industry, if the situation demands, according to the requirements of the property the Placement Manager may schedule training or placement interviews deviating from the calendar and the procedure. However, this requires verbal approval from the Executive Director or Principal. The Placement Coordinator must make a note of this deviation in the Training or Register.

4.4   The Placement Coordinator will maintain Training Register to enter details of training and placement.

5.0   Reference
5.1   Parameters of Industrial Training ID-07
6.0   Records
6.1   Student's performance report F81
6.2   List of properties for placement and training F88
6.3   Training Register F89

Prepared by MR	Reviewed by Principal	Approved by Executive Director

Policy and Procedure for Placement

1.0 Purpose

To lay down a procedure to facilitate placement for students of MBA department

2.0 Scope

The policy and procedure are applicable MBA students

3.0 Responsibility

Principal, HODs, and Placement Coordinator are responsible.

4.0 Policy

4.1 General

Campus placement/ placement in NBS, Pongam is a facility provided for interested final year students.

The role of the Student Placement Office (SPO) is of a **facilitator and counselor for placement related activities**. SPO **does NOT guarantee a job**. The Placement Manager is responsible for coordinating all activities related to placement. Applying for a job or joining a company is entirely the responsibility/decision of the student concerned.

Any student seeking placement must register with SPO during the third semester. Students not interested in placements are requested not to register for placements. The placement facility is available to all the students registered with SPO.

Information regarding company visits will be informed through e mail/ notice board/ website. Students are advised to check timely announcements, go through the College website and apply only if interested.

Prepared by MR	Reviewed by Principal	Approved by Executive Director

The students are expected to follow the institute resume template available in the placement website for preparing the resumes. The details of the resume have to be genuine and any student found violating this, will not be permitted to apply for placements for the rest of the academic year. Depending on the profile/requirements laid by the company a detailed resume should be prepared in an attractive manner and submitted within the deadline. Late submission will not be considered for the test/interview.

The SPO will help the Hotel Management (HM) students by providing them with three (3) chances to appear for placement interview. For HM, the policy is 'one job to one student at the first instance' (Other department students can wait and choose after 3 attempts). The SPO must ensure that all registered and successful students get placement in 5 – star properties (or 4- star properties if not suitable for 5-star).

Once a student is shortlisted by a company for placement process he/she is NOT allowed to contact the members of the team visiting the campus for placement purpose without prior permission of the Placement Manager.

The training and placement calendar must be published in the beginning of the academic year by the placement office, prepared by the HOD and approved by the Principal. The Placement Manager will publish the list of hotels approved by the Principal for placement at the beginning of every academic year. The placement office will introduce at least one new property each year to be considered for placement.

All placement activities for a particular batch must be completed by August 31 of the following year or as specified by the Principal and a programme-wise list showing the names of the students, name of the Hotel and the date of joining be submitted to the Principal and the HOD within two weeks after the completion of the placement activity.

4.2 Eligibility Criteria & Placement Registration

1. All students who expect to graduate from NBS and are seeking employment are eligible to register.

2. Students having 2 or more course backlogs are advised not to register for placement

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3. Students can register for placements only once.

4. Students who have a pre-placement offer will also be allowed to register for the Institute placement process.

5. Each student should register online in the prescribed format (available in the College website) and submit a hardcopy of the completed registration form to the placement office.

6. All students who wish to take part in the institute campus placements should attend soft skills programme organized by the institute. **A minimum of 15 hours of training is to be completed by the students to make them eligible for placement registration.**

4.3 Pre-placement Interaction

1. Pre-placement interaction is a short session of interaction between the Company/ Property and the interested candidates, where details about the company, the nature of business and job will be given by the company. The candidates can ask questions to clarify their doubts.

2. Those who have submitted the resume and attended the PPI session are eligible to appear for the selection process. The PPI attendance is compulsory.

3. Students must clarify their queries regarding salary break-up, job profile, place of work, bond details, medical fitness requirements, etc. with the company officials during PPI.

4. Students shall not question the policy of the company.

5. The interaction with the representatives of the companies should be in a very dignified manner.

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5.0 Procedure

5.1 General

Before the beginning of the academic year, the HOD, in consultation with the Principal and Placement Co-coordinator, prepares the Placement Calendar and submits to the Principal for approval. The approved calendar is forwarded to the Placement Manager for implementation. It is the responsibility of the HOD to notify the concerned personnel any change of schedule.

The Placement Manager submits the list of properties for placement to the Executive Director and Principal for approval. The approved list is then published.

The interested students should register for placement through Student Placement Office in their 5th semester, (before August 15). It is the responsibility of the student to check announcements/notices/updated information/ short listed names etc., in the notice boards/email/website. Students are expected to report at the respective venue as per the announcements.

Late comers for the Aptitude Test / Group Discussion / Interview will not be allowed to appear for the selection process.

5.2 Placement Brochure

A placement brochure will be prepared by the Placement Office with the interested candidate's profile. The required information should be given to the Placement Office by the student with the prescribed fee before October 30, in the 5th semester.

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5.3 Attendance and Punctuality

1. A student who applies and gets short listed is bound to go through the entire selection process unless rejected midway by the recruiter.

2. Any student who withdraws deliberately in the midst of a selection process will be disqualified from placement for the rest of the academic year.

3. Unauthorized absence for the test/interview will lead to cancellation of registration, if the student had already given the consent to attend the interview

5.4 Dress Code

Students must be formally dressed (in College Uniform) whenever they participate in any sort of interaction with a company. The Placement Coordinator reserves the right to refuse permission to a student to attend the selection process, if their attire is unsatisfactory.
The dress code shall be applicable for Pre placement talks as well.

5.5 Identity Card

Students must carry their identity cards whenever they undergo a placement process.

5.6 Job Offer

1. All placement offers will be displayed on the notice board

2. The students shall not question the company on why he/she is not selected. Selection is in the hands of the company. Any unruly behavior compromising the reputation of the institute shall deem the student ineligible for future placements and the student shall face the disciplinary committee.

3. The responsibility of going through the offer letter and taking actions therein such as submission of documents lies entirely with the student.

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4. The students should honour the offer and communicate with the Industry in a pleasing manner.

5. In case offers are received directly by the student from the company, the same must be intimated to the placement office.

6. After attending the interview (off the campus and scheduled through the Placement Office), the students must inform the Placement Manager of the interview within 15 days of the interview, else registration will be cancelled.

.7 Multiple Offers

Hotel Management

A student is eligible for only one job. If a student receives more than one offer owing to delays in the announcements of results by the recruiters, he/she is bound to accept the job whose results are declared first. If the results are declared on the same day, the student may choose from the offers in hand and inform the placement coordinator within 2 days of the announcement of the results.

Computer Science & Commerce Students

CS, Commerce, and B.B.A students can wait and choose after 3 interviews.

5.8 Joining Status

Students should notify the company with a copy to the placement office in case they are not joining the company with reasons. For all matters not covered by the above regulations, the Placement Manager in consultation with the Principal will use their discretion to take appropriate decisions.

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6.0 References

6.1 Placement Assistance ID-07

7.0 Records

7.1 Placement Register F87

7.2 List of properties for placement and Training F88

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1.0 Purpose

To lay down a procedure to address risk and opportunities encountered in the day-to-day operations

2.0 Scope

The procedure is applicable to all departments of the institution

3.0 Responsibility

Principal, heads of all departments, Placement Coordinator

4.0 Procedure

The management will identify the critical processes data that are critical for the students' success and customer satisfaction. Then the risks and opportunities associated with the processes are identified. The responsible parties will then evaluate the identified risks and opportunities and will adopt mechanisms to reduce the risks and accept the opportunities. The responsible team, consisting of the Principal and the heads of the departments will review the risk control measures periodically (at every management review meeting).

The review team will summarize the important deviations from the predefined quality limits and the remedial actions taken.

5.0 Records

Risk & opportunity register

1.0 Purpose

To lay down a procedure to address external and internal issues arising pertaining to organization's functioning.

2.0 Scope

The procedure is applicable to all departments of the institution

3.0 Responsibility

Principal, heads of all departments, Placement Manager

4.0 Procedure

The management will identify the most important internal and external issues that will affect the organization. Internal issues will include overall performance of the institution, university exam result of students, infrastructure, teachers' performance, placement of students, and students' satisfaction/ dissatisfaction with the facilities provided. The external issues will consist of issues from the approving body, suppliers, external providers, local government agencies etc. The review team will discuss all the possible issued arising internally and externally and initiate corrective action within 24 hours wherever required.

The issues will be recorded in the register and action taken will be indicated.

5.0 Records

External and Internal Issue register