



**SRI RANGANATHAR**  
**INSTITUTE OF ENGINEERING AND TECHNOLOGY**  
(Approved by AICTE, New Delhi, Affiliated to Anna University, Chennai)  
(An ISO 9001:2015 Certified Institution)  
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# Procedure Manual

In accordance with ISO 9001:2015 standard

## Issue status

SL	Location	Issue Status	Copy Holder
1.	Principal	Master copy	<input type="checkbox"/>
2.	Administrative office	Controlled copy	<input type="checkbox"/>
3.	Library (common copy for library and physical education)	Controlled copy	<input type="checkbox"/>
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9.	Department of Computer Science Engineering	Controlled copy	<input type="checkbox"/>
10.	Department of Information Technology	Controlled copy	<input type="checkbox"/>
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12.	Department of Physics	Controlled copy	<input type="checkbox"/>
13.	Department of English	Controlled copy	<input type="checkbox"/>

# Procedure Manual

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<b>Procedure for Planning and Execution of Theory Classes</b>				
Applicable ISO 9001 Clause Numbers : 7.1, 7.5.1, 8.2.3, 8.2.4				

## **PURPOSE**

The purpose of this procedure is to explain the activities of the Planning and Execution of theory classes.

## **SCOPE**

Scope of this procedure includes the planning and execution of theory classes required as per University regulations. This procedure is to be implemented by all academic departments of the college.

The following academic departments are comes under this procedure...

<b>SL</b>	<b>Department</b>
1	Department of Mechanical Engineering
2	Department of Civil Engineering
3	Department of Computer Science Engineering
4	Department of Electronics and Communication Engineering
5	Department of Electrical and Electronics Engineering
6	Department of Mathematics
7	Department of Chemistry
8	Department of Physics
9	Department of English

## **RESPONSIBILITY**

HOD of concern department is responsible to monitor that this procedure is implemented effectively by the teaching faculty concerned.

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<b>Procedure for Planning and Execution of Theory Classes</b>				
Applicable ISO 9001 Clause Numbers : 7.1, 7.5.1, 8.2.3, 8.2.4				

## **PROCEDURE :**

1. "Time Table" is prepared for every semester.
2. Based on the Syllabus and Time table, a "Lesson Plan" is prepared for each subject for every semester.
3. Course notes uploaded in the software are used by the faculty.
4. Lessons are covered by the faculty as per the Lesson Plan. The detail of lessons covered is recorded in the Log book.
5. Question Paper is prepared for Internal Test.
6. Internal Test is carried out as per Lesson Plan and Mark lists are prepared
7. Slow learners are identified and listed in the "Slow learners file".
8. Performance of slow learners is improved by implementing corrective actions as per the Procedure ACD-P15.
9. Assignments Question Papers are given to the students as per the Lesson Plan and the assignment marks are recorded in the Log book.
10. Attendance of the Student is recorded in the Log book.
11. Model test question paper is prepared, test conducted as per the lesson plan and mark list is prepared.
12. University question papers are maintained in a file.
13. University exam results maintained in a file.

## **Documents and Records (4.2.3 and 4.2.4)**

<b>SL</b>	<b>Document/Record Description</b>	<b>Reference number</b>
1.	Mission, vision and quality policy	ACD-01
2.	Faculty profile	ACD-02
3.	Target and achievement file	ACD-03
4.	Syllabus	ACD-04
5.	Course file	ACD-05
6.	Time table and Lesson plan	ACD-06
7.	Slow learners file	ACD-07
8.	Internal & assignment question bank	ACD-08
9.	University question bank	ACD-09
10.	Internal assessment file	ACD-10
11.	University result file	ACD-11
12.	Counseling file	ACD-16
13.	Students feedback file	ACD-17
14.	Circular File	ACD-18
15.	corrective action report file	ACD-24

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<b>SRI RANGANATHAR INSTITUTE OF ENGINEERING &amp; TECHNOLOGY</b>	Ref	ACD-P2	Rev No	0
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<b>Procedure for Planning and Execution of Practical Classes</b>				
Applicable ISO 9001 Clause Numbers : 6.3, 6.4, 7.1, 7.5.1, 8.2.3, 8.2.4				

## **PURPOSE**

The purpose of this procedure is to explain the activities of the Planning and Execution of practical classes.

## **SCOPE**

Scope of this procedure includes the planning and execution of practical classes required as per University regulations. This procedure is to be implemented by the applicable academic departments of the college as follows...

<b>SL</b>	<b>Department</b>
1	Department of Mechanical Engineering
2	Department of Civil Engineering
3	Department of Computer Science Engineering
4	Department of Electronics and Communication Engineering
5	Department of Electrical and Electronics Engineering
6	Department of Mathematics
7	Department of Chemistry
8	Department of Physics
9	Department of English

## **RESPONSIBILITY**

HOD of concern department is responsible to monitor that this procedure is implemented effectively by the lab staff concerned.

## **PROCEDURE :**

The following activities are carried out by the faculty within the time limit prescribed in the "Lesson Plan".

1. "Time Table" for lab session is prepared once in every semester.
2. "Lab Manual" is used to conduct practical sessions. Lab Manual contains, list of experiments to be conducted and Procedure for Experiment.
3. "Log Book" is maintained after conducting each practical class.

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<b>Procedure for Planning and Execution of Practical Classes</b>				
Applicable ISO 9001 Clause Numbers : 6.3, 6.4, 7.1, 7.5.1, 8.2.3, 8.2.4				

4. Controlled copy of syllabus is used to plan the lesson plan. Based on the Syllabus and Time table, a "Lesson Plan" is prepared for each practical subject for every semester.
5. Experiments are conducted by the students under the guidance of lab staff as per the Lab Manual. The Procedure and results of experiments done is recorded in the observation note by the students and reviewed by the Lab staff and the same is recorded in the Log book.
6. Attendance of the Student is recorded in the Log book.

### **Stock control**

"Stock Register" is maintained for receipt, issue and stock of materials/consumables in the Lab. Material name is identified in each material. Expiry date is also mentioned on the materials/consumables if applicable.

### **Equipment Maintenance**

1. "List of equipments" under maintenance is listed in the "Laboratory stock register"
2. "Equipment Maintenance Log" is maintained for machine/equipment/computer in the Lab. Equipment ID number is identified on each equipment in the lab as per the List of equipments.

### **Safety Practices**

Safety Practices are ensured by the Lab staff and HOD by implementing the procedure for safety practices ACD-P11.

### **Documents and Records (4.2.3 and 4.2.4)**

SL	Document/Record Description	Reference number
1.	Lab Manual	ACD-21
2.	Time table and Lesson plan	ACD-06
3.	Syllabus	ACD-04
4.	Course file	ACD-05
5.	Laboratory stock register	ACD-22
6.	Equipment maintenance log	ACD-19

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<b>SRI RANGANATHAR INSTITUTE OF ENGINEERING &amp; TECHNOLOGY</b>	Ref	ACD-P3	Rev No	0
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<b>Procedure for Assignment Process</b>				
Applicable ISO 9001 Clause Numbers : 7.5.1				

## **PURPOSE**

The purpose of this procedure is to explain the assignment process.

## **SCOPE**

Scope of this procedure includes the assignment to be submitted by the student.

## **RESPONSIBILITY**

HOD/Faculty concerned are responsible to implement this procedure effectively

## **PROCEDURE :**

- a. After completion of lesson, assignment questions shall be given to the students as per the Lesson Plan.
- b. Three assignments shall be given in each semester.
- c. Intimation of assignment submission shall be announced through circulars.
- d. Assignment shall be submitted by student to the faculty concerned within the due date.
- e. Assignment shall be evaluated by the faculty within 5 days from the last date of submission by the student.
- f. Assignment marks list shall be prepared within 5 days from the last date of submission by the student.
- g. Consolidated Mark list shall be prepared within 6 days from the last date of 3<sup>rd</sup> assignment submission by the student.
- h. Assignment Papers shall be returned to the student.

## **DOCUMENTS AND RECORDS (4.2.3 AND 4.2.4)**

SL	Description of the Document/Record	Reference Number
1.	Log Book	ACD-05

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<b>SRI RANGANATHAR INSTITUTE OF ENGINEERING &amp; TECHNOLOGY</b>	Ref	ACD-P4	Rev No	0
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<b>Procedure for Conducting Internal Test</b>				
Applicable ISO 9001 Clause Numbers : 8.2.4				

## **PURPOSE**

The purpose of this procedure is to explain the internal test process.

## **SCOPE**

Scope of this procedure is applicable for theory subject for the following activities,

- A. Preparation of Question paper for Internal test
- B. Conducting Internal test
- C. Evaluation of Internal test Results

## **RESPONSIBILITY**

HOD/Faculty concerned is responsible for the implementation of this procedure effectively.

## **PROCEDURE :**

### **A. Preparation of Question Paper for Internal test**

- a. Internal test shall be conducted as per the lesson plan.
- b. Three internal tests shall be conducted in each semester.
- c. Question paper is set by the faculty 3 days prior to each internal test.
- d. Questions shall not be disclosed in any mode to the student prior to start of the test.
- e. Time table for each internal test is circulated 7 days prior to test date through notice boards and website.

### **B. Conducting Internal Test**

- a. Internal test shall be written under strict supervision by the faculty to prevent any malpractices by the students.
- b. Internal test shall be conducted within the prescribed time as per the time table.
- c. Question paper and answer paper to be issued for each student separately.
- d. Students shall not be allowed to make any malpractices in the internal test.
- e. Students shall not be allowed to write test more time than the time specified in the time table.

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<b>Procedure for Conducting Internal Test</b>				
Applicable ISO 9001 Clause Numbers : 8.2.4				

### C. Evaluation of Answer scripts

- a. Evaluation and Mark list preparation shall be completed by the faculty within 5 days from the date of test.
- b. Answer scripts shall be issued to the student for review and signature of the student shall be obtained.
- c. Consolidated mark list for 3 tests shall be prepared by the faculty within 6 days from the date of 3<sup>rd</sup> internal test.
- d. Answer scripts shall be maintained till the retention period prescribed by the university.

### **DOCUMENTS AND RECORDS (4.2.3 AND 4.2.4)**

<b>SL</b>	<b>Description of the Document/Record</b>	<b>Reference Number</b>
1.	Time Table and Lesson Plan	ACD-06
2.	Internal Test Question Bank	ACD-08
3.	Internal Assessment file	ACD-10

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<b>SRI RANGANATHAR INSTITUTE OF ENGINEERING &amp; TECHNOLOGY</b>	Ref	ACD-P5	Rev No	0
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<b>Procedure for Examination Process</b>				
Applicable ISO 9001 Clause Numbers : 8.2.4				

## **PURPOSE**

The purpose of this procedure is to explain the activities of the examination process.

## **SCOPE**

Scope of this procedure includes the following activities of university exams,

- Hall ticket preparation and issue
- Conducting examination
- Evaluation and re-evaluation
- Mark sheet preparation and issue

## **RESPONSIBILITY**

Coordinator-Exam cell is responsible to implement this procedure effectively.

## **PROCEDURE :**

1. Student registration for exam is taken by sending application to the university for registration along with fees prescribed by the university.
2. Hall tickets are issued to the eligible candidates.
3. Question paper is set by the university.
4. University Examination is conducted as per University Exam Time table.
5. Seating arrangements is made as per University instructions
6. Question paper is issued as per university instructions.
7. Answer paper is submitted to the central evaluation point fixed by the university.
8. Exam results are consolidated in the University Exam results file.
9. Mark sheet and degree certificate is released by the university. Mark sheet and certificates are issued through HOD of concerned department and student sign is obtained in the Log book.

## **Documents and Records**

<b>SL</b>	<b>Description of the Document/Record</b>	<b>Reference Number</b>
1.	University Results file	ACD-11

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<b>SRI RANGANATHAR INSTITUTE OF ENGINEERING &amp; TECHNOLOGY</b>	Ref	ACD-P6	Rev No	0
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<b>Procedure for Industrial Visit</b>				
Applicable ISO 9001 Clause Numbers : 7.5.1				

## **PURPOSE**

The purpose of this procedure is to explain the Industrial Visit (IV) by the students.

## **SCOPE**

Scope of this procedure is applicable Industrial Visit (IV) by the students.

## **RESPONSIBILITY**

The HOD of concerned department is responsible to implement this procedure effectively.

## **PROCEDURE :**

- a. "Industrial Visit Organization Database" is maintained by the HOD of the concerned department.
- b. HOD organizes IV with the industries appearing in this data base. HOD gets approval from the organization for IV. Duration of the IV is letter given to the organization.
- c. The student shall maintain IV log and obtain signature of the member of the organization who supported/coordinated the IV.
- d. The faculty shall evaluate the IV log.

## **Documents and Records (4.2.3 and 4.2.4)**

<b>SL</b>	<b>Description of the Document/Record</b>	<b>Document/Record Reference Number</b>
1.	IV Organization Data base	ACD-23A
2.	IV Log	ACD-23B

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<b>SRI RANGANATHAR INSTITUTE OF ENGINEERING &amp; TECHNOLOGY</b>	Ref	ACD-P7	Rev No	0
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<b>Procedure for seminars</b>				
Applicable ISO 9001 Clause Numbers : 6.2.2, 7.5.1				

## **PURPOSE**

The purpose of this procedure explain the activities conduct seminar at college premises or to attend an external seminar.

## **SCOPE**

Scope of this procedure is applicable during the following activities

- A. Conducting a seminar/guest lecture/paper presentation/training work shop at college premises by the student/faculty
- B. Attending an external seminar/guest lecture/training work shop by the student/faculty

## **RESPONSIBILITY**

The HOD of concern department is responsible to implement this procedure effectively.

## **PROCEDURE :**

### **A. Conducting a seminar/guest lecture/paper/presentation/training work shop at college premises by the student/faculty**

- a. HOD plans the topic, faculty, date, number of participants in the lesson plans. At the time selection of faculty for such program, the profile of the faculty is collected to ensure competence of the faculty conducting the program.
- b. HOD gets approval from the principal for conducting such programs.
- c. Principal can approve/reject/post-phone the request depends on the program details given. If needed principal discusses with the management before arrival the conclusion about the program.
- d. If approved by the principal, HOD shall make arrangements to the following
  - Appointment of coordinator to conduct the program
  - Informing the faculty
  - Issuing the circulars
  - Preparation and approval of course materials
  - Arranging LCD projectors, Internet facility
  - Arranging hall, furniture, tea/snacks and food
  - Any other things needed to conduct the seminar effectively

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<b>Procedure for seminars</b>				
Applicable ISO 9001 Clause Numbers : 6.2.2, 7.5.1				

HOD shall ensure that these arrangements are complete and hall and other facilities are ready for the program on the previous working day of the program day.

- e. Program coordinator shall record in the information about the program in the “Seminar/Guest lecture Record” and forwards to the HOD.

#### **B. Attending an external seminar/guest lecture/training work shop by the student/faculty**

Based on the lesson plan/other needs, request for attending such programs is raised by the faculty/HOD to the principal through Inter office communication form.

- a. Principal can approve/reject/post-phone the request depends on the program details given. If needed principal discusses with the management before arrival the conclusion about the program.
- b. If approved by the principal, HOD shall make arrangements to the following
- Appointment of coordinator
  - Selection for participants
  - Registration of participants for the program
  - Issuing the circulars
  - Arranging transportation facility.

HOD shall ensure that these arrangements are complete/ready for the program on the previous working day of the program day.

- c. Program coordinator shall record in the information about the program in the “Seminar/Guest lecture Record” and forwards to the HOD.

#### **Documents and Records (4.2.3 and 4.2.4)**

<b>SL</b>	<b>Description of the Document/Record</b>	<b>Reference Number</b>
1.	Seminar/Guest Lecture Record File	ACD-14

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<b>SRI RANGANATHAR INSTITUTE OF ENGINEERING &amp; TECHNOLOGY</b>	Ref	ACD-P8	Rev No	0
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<b>Procedure Physical Education</b>				
Applicable ISO 9001 Clause Numbers : 7.5.1				

## **PURPOSE**

The purpose of this procedure is to explain the activities of the Physical education process.

## **SCOPE**

Scope of this procedure includes the following activities,

- a. Sports (Indoor and outdoor games)
- b. NCC (National Cadets Corps)

## **RESPONSIBILITY**

Physical director is responsible to implement this procedure effectively.

## **PROCEDURE :**

### **a. Sports (Indoor and outdoor games)**

1. Time table for Physical education is maintained by the Physical Director
2. Physical education test is conducted for new students once in every year (after completion of admission process) to select the students eligible for sports activities.
3. List of students involved in sports (indoor and outdoor games) is maintained and updated when new students are added.
4. "Sports rules" is maintained by the physical director. Ground making is done as per these rules. Physical director to train the students for sports rules and to ensure these rules are strictly adhered by the students.
5. Sport Goods are stocked in restricted location and "Sports Goods stock record" is maintained. Issue and return of sports items is recorded in the "Sports Goods Issue register".
6. Physical Director provides extra coaching for students during Inter-college competition. Physical director shall select eligible student for such competition. Physical directory can arrange external coacher for such competition.
7. Sports day is organized by the physical director. Sports day schedule/time table is circulated after getting approval from the principal.
8. First aid training shall be provided to the students involved in sports through external agencies.

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<b>Procedure Physical Education</b>				
Applicable ISO 9001 Clause Numbers : 7.5.1				

b. **NCC**

- a. Cadets admission and discharge details are recorded in the “List of NCC students”.
- b. Camps are organized in consultation with the principal and applicable records are maintained in the “NCC camps file”.

**Documents and Records**

<b>SL</b>	<b>Description of the Document/Record</b>	<b>Reference Number</b>
1.	Time table	PED-01
2.	Sports Rules	PED-02
3.	Sports Goods Stock record	PED-03
4.	Sports Goods Issue register	PED-04
5.	List of NCC students	PED-05
6.	NCC camp file	PED-06

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<b>SRI RANGANATHAR INSTITUTE OF ENGINEERING &amp; TECHNOLOGY</b>	Ref	ACD-P9	Rev No	0
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<b>Procedure for Hardware and Software Management</b>				
Applicable ISO 9001 Clause Numbers : 6.3				

## **PURPOSE**

The purpose of this procedure is to explain the Hardware and software management.

## **SCOPE**

Scope of this procedure includes the following activities

- a. Hardware and software maintenance
- b. Access control (user name and pass word control)
- c. Data back-up (back-up of significant data)

## **RESPONSIBILITY**

Computer science department is responsible for implementation of this procedure effectively.

## **PROCEDURE :**

- a. Hardware maintenance is applicable for the following devices
  - Computers
  - Printers
  - Communication devices
  - Time card

Hardware networking & Maintenance is done as follows

- AMC is applicable for servers
- Antivirus software is installed in all systems.
- Networking diagram is prepared and used
- Cabling and crimping is done by the electrical department as per the networking diagram
- Networking trouble shooting maintenance is done by the computer science department
- Internet line (example BSNL) is managed computer science department
- Maintenance of Time card device is done through AMC.

## **Access Control**

- IP's are given for Internet Users.

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<b>Procedure for Hardware and Software Management</b>				
Applicable ISO 9001 Clause Numbers : 6.3				

Access control is ensured by providing username and pass word for each computer user by the computer science department.

**External supplier’s support is received for the following activities**

1. Internet line
2. Routers
3. Software development/up gradation
4. Service of printers and UPS is carried out yearly once through external agencies.
5. Communication devices like EPBAX, Time card device are maintained through external agencies

Computer science department shall ensure that only approved service providers are used for external support for hardware/software maintenance. Quality, delivery/service of such service providers is rated by reviewing their performance for each supply.

**Data back up**

Data back up is applicable only for significant data. The following data are treated as significant data,

- a. Student’s Profile/contact data base
- b. Student’s mark data (both internal and semester exams)
- c. Student attendance data
- d. Library books data base
- e. Stock registers (lab consumable stock)
- f. Any other data which is mandatory for effective functioning of the quality management system which is decided by the principal/management
- g. Accounts related data

Back up is taken as per the following method,

- a. Back up of the above data is taken once in a week (every Monday 3-5 PM)
- b. Back up data is stored in the Pen drive/External Hard disk .
- c. The date, time and location of data back is recorded in the Data back up Register.

**Documents and Records (4.2.3 and 4.2.4)**

SL	Description of the Document/Record	Reference Number
1.	Equipment Maintenance Log	ACD-19

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<b>SRI RANGANATHAR INSTITUTE OF ENGINEERING &amp; TECHNOLOGY</b>	Ref	ACD-P10	Rev No	0
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<b>Procedure for Library Management</b>				
Applicable ISO 9001 Clause Numbers : 6.3, 7.5.1				

## **PURPOSE**

The purpose of this procedure is to explain the library activities.

## **SCOPE**

Scope of this procedure includes the library activities.

## **RESPONSIBILITY**

The Librarian is responsible to implement this procedure effectively.

## **PROCEDURE :**

- a. When staff/student raise the requisition to purchase a book which is not available in the library, the librarian can inform such requirements through inter office communications to the Administration department.
- b. Ordering and purchasing of books is carried out by the administration after getting approval from the principal.
- c. After receipt of book, it is verified against the order, ID number is allotted for each book and it is recorded "Library Books Stock Register".
- d. Topic/Heading is displayed on the top of each rack and the books are stored in their respective rack topic wise.
- e. Whenever a student/staff is visited the library for using the books, the details of the visitor is recorded in the "Library Accession Register".
- f. Issue of library books is recorded in the "Library Book Issue register".
- g. Binding of Books, Periodicals and Journals is done using external agencies to prevent any damage.
- h. Physical stock and computer stock is verified once in every semester before the semester exams and books with students/staff if any are collected back.
- i. Old news papers are disposed after one year from the date of purchase.
- j. Magazines are disposed after three years from the date of purchase.
- k. Fire extinguisher is maintained in the library to manage fire accidents.

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<b>Procedure for Library Management</b>				
Applicable ISO 9001 Clause Numbers : 6.3, 7.5.1				

**Documents and Records (4.2.3 and 4.2.4)**

<b>SL</b>	<b>Description of the Document/Record</b>	<b>Reference Number</b>
1.	Library books stock register	LIB-01
2.	Library accession register	LIB-02
3.	Library books issue register	LIB-03

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<b>Procedure Manual</b>	Page	1 of 4	Rev Date	
<b>Procedure Safety Practices</b>				
Applicable ISO 9001 Clause Numbers : 6.4				

## **PURPOSE**

The purpose of this procedure is to explain the safety practices implemented in the college.

## **SCOPE**

Scope of this procedure includes the safety practices followed to prevent accidents to ensure human safety.

## **RESPONSIBILITY**

The HODs and Coordinator office are responsible to implement this procedure effectively.

## **PROCEDURE :**

### **Prevention of accidents due to fire**

Fire extinguishers are fixed at fire accident prone area. Expiry date is mentioned on each fire extinguisher with supplier mobile number. Coordinator office shall organize such supplier at the time of fire accident/refilling of fire extinguishers.

The minimum of 4 teaching staffs and 2 non-teaching staffs are trained to operate the fire extinguisher in case of fire accident. This training shall be provided by the fire extinguisher supplier and the certificates of the participants shall be maintained.

### **First Aid**

First aid training is given for minimum 2 teaching staff and 1 non-teaching staff to provide first aid services to the staff/student affect due to any accident.

This training shall be provided by a hospital who actively involved in provision of such training services and the certificates of participants shall be maintained.

### **Smoking and Usage of Liquor**

Smoking is not allowed as it is injurious to the health.

Consumption of liquor is prohibited.

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Applicable ISO 9001 Clause Numbers : 6.4				

### **Emergency Contact Numbers**

The following emergency contact phone numbers are displayed in the front office.

- a. Near-by Police station phone
- b. Fire station phone number
- c. Near-by hospitals phone numbers (minimum 3 hospitals)
- d. Near-by Ambulance phone numbers

### **Emergency contact numbers at ID cards**

Emergency contact numbers are displayed at staff and student ID cards. These emergency contact numbers are the contact number of college office. In case of any accident to the staff/student inside the premises, the office coordinator shall organize hospitalization of the staff/student and to provide information to family member/relative. It is always advisable to wear/have the ID card in pocket by the staff/student.

### **Helmet Policy**

As part of our Environment, Health & Safety policy we are committed to prevention of accidents through fire, security losses, damages to property, personal injuries and loss of life.

Some statistics / extracts from study reports:

- Crash helmets can save lives and prevent severe brain damage
- 62 per cent of the head injuries due to accidents in city are due to traffic accidents. Those who survive traffic accidents may suffer from brain damage causing paralysis, loss of mental faculties or become a mere 'vegetable'.
- A crash helmet could decrease two wheeler head injuries by about 30 to 50 per cent.
- The highest number of head injuries occurs in the age groups of 20-29 years (27 per cent) and 30-39 years (19 per cent), the highest productive age group.
- Head injury due to traffic accidents forms nearly 20-62 per cent of them.

We sincerely request all employees and students to wear crash helmets while driving or sitting as a pillion while travelling on a two wheeler. We would also request each of you to urge members of your family to also use helmets while driving.

Helmet Policy: Employees, students and contract employees riding two wheelers, including pillion riders without wearing helmets, will be denied entry by security at the entrance. This is not a punitive measure and is made with the sole objective of employee

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<b>Procedure Safety Practices</b>				
Applicable ISO 9001 Clause Numbers : 6.4				

safety. Hence, employees riding two wheelers and pillion riders are requested to adhere to the helmet policy strictly.

Similarly, those driving four wheelers are requested to have their seat belts fastened while driving.

### **Safety Practices in the Practical Labs**

Hazardous chemicals in the labs are identified with the sticker as “**Hazardous-Handle with care**”. Fire extinguisher is fixed in the chemistry lab.

Students shall wear shoes while entering the materials, mechanical, electrical and electronics labs.

Student shall do all the experiments under the supervision of the faculty.

A WORK INSTRUCTION shall be displayed in each laboratory/work shop which addresses the safety practices to be followed and safety devices to be used Students/staff.

### **Safety Practices in the food court kitchen**

- Fire extinguisher is fixed in the food court kitchen.
- Students are not allowed inside the kitchen.
- Food adulteration is prevented by the following ways,
  - a. Usage of RO (reverse osmosis) cycled water for drinking
  - b. Maintaining vegetables in refrigerated condition and maintain groceries in closed containers.
  - c. Verifying vegetables and groceries visually before using them
  - d. Disposal of perished/decomposed items without delay.
  - e. Not mixing old preparations/items and new preparations/items
  - f. Cleaning of utensils with hot water
  - g. Keeping prepared foods in closed utensils/boxes.

### **Prevention of accidents due to Electrical Hazardous**

Preventive Maintenance of electrical equipment is carried out by the coordinator maintenance.

At the time of preventive maintenance, it is ensured that electrical cables are installed properly and to avoid the chances of fire/electrical shock accidents due to improper installation of electrical cables.

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<b>Procedure Safety Practices</b>				
Applicable ISO 9001 Clause Numbers : 6.4				

**Documents and Records (4.2.3 and 4.2.4)**

Display of Instructions in the notice boards/prominent areas.

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<b>SRI RANGANATHAR INSTITUTE OF ENGINEERING &amp; TECHNOLOGY</b>	Ref	ACD-P12	Rev No	0
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<b>Procedure for Faculty Development</b>				
Applicable ISO 9001 Clause Numbers : 6.2.2				

## **PURPOSE**

The purpose of this procedure is to explain the activities of faculty development programs.

## **SCOPE**

Scope of this procedure includes the following types of faculty development programs,

- a. Actions based on the students feed backs (collected as per the procedure ACD-P14).
- b. Participating/conducting seminars
- c. Motivating for higher studies including research activities

## **RESPONSIBILITY**

The HOD of concern department is responsible to implement this procedure effectively.

## **PROCEDURE :**

Faculty development program/quality improvement programs are organized by the HOD/Principal

By implementing any one of the following activity.

1. Nominating the staff to attend seminar organized through internal/external faculty
2. Motivating the staff to conduct seminar at internal or at external to the institute
3. Motivating the staff to peruse higher studies
4. Providing Library/computer/internet facilities to the staff

Any staff can forward his/her intention for participating in the quality improvement program to the HOD through Inter-office-communication(IOC). HOD forwards IOC to the Principal for approval. If approved by the principal, the HOD organizes Quality Improvement program for staff or group of staff. Circular and supporting evidences are maintained in the "Faculty Development file" by the concerned department HOD.

## **Documents and Records (4.2.3 and 4.2.4)**

SL	Description of the Document/Record	Reference Number
1.	Faculty development file	ACD-15

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<b>SRI RANGANATHAR INSTITUTE OF ENGINEERING &amp; TECHNOLOGY</b>	Ref	ACD-P13	Rev No	0
<b>Procedure Manual</b>	Page	1 of 2	Rev Date	
<b>Procedure for Counseling</b>				
Applicable ISO 9001 Clause Numbers : 7.5.1, 8.5.2				

## **PURPOSE**

The purpose of this procedure is to explain the activities of the counseling process.

## **SCOPE**

Scope of this procedure includes the counseling of students at three stages as follows

- a. Counseling at the time of admission
- b. Counseling at the time course duration
- c. Counseling after completion of course

## **RESPONSIBILITY**

HOD/Teaching Staff/Administration officer/Principal are responsible to implement this counseling procedure.

## **PROCEDURE :**

### **Carrier counseling**

Students can meet the respective HOD/teaching staff to clarify their doubts related to course/academic affairs/carrier related doubts during college working hours. HOD/Staff records all such clarifications and action suggested/taken in the "Corrective action Report".

### **Counseling for students poor in studies**

After evaluating results of each internal test and university exam, the concern HOD/Staff gives counseling for students poor in studies to improve their performance by investigating the root cause for the poor in studies. The investigation results are recorded in the "Corrective Action Report".

Corrective is initiated as per the procedure ACD-P15.

The effectiveness actions taken shall be monitored by the HOD/Staff by reviewing the consecutive internal test results/university exam results of the student and it is recorded in the "Corrective Action Report". The status of action taken, effectiveness of actions are reported in the class committee meeting and in the MRM.

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<b>Procedure for Counseling</b>				
Applicable ISO 9001 Clause Numbers : 7.5.1, 8.5.2				

Depends on the severity of the problem, the problem even can be reported to the principal/Top Management by the HOD/Staff. In such cases principal/top management shall take necessary actions.

#### **Actions for Student feed back/Complaints/suggestion counseling**

- a. Any Students can complain about the teaching faculty/non teaching staff/inadequacy of facilities. Students shall give all complaints only in writing.
- b. HOD investigates the causes of complaint and records it in the "Corrective action report". Depends on the severity of the problem, the problem even can be reported to the principal/Top Management by the HOD/Staff. In such cases principal/top management shall take necessary actions. The principal/Management can further investigate the problem through HOD/staff concerned. Depends on the severity of the problem and actions are decided accordingly.
- c. The investigation results and the actions taken are recorded in the "Corrective action report".
- d. The effectiveness of action taken is recorded in the Management Review Meeting.

#### **Documents and Records (4.2.3 and 4.2.4)**

SL	Description of the Document/Record	Reference Number
1.	Slow learner file	ACD-07
2.	Corrective Action Report	ACD-24

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<b>Procedure for Student Feed-back</b>				
Applicable ISO 9001 Clause Numbers : 8.2.1.				

## **PURPOSE**

The purpose of this procedure is to explain the student feed back process.

## **SCOPE**

This procedure covers the process of collection and analysis of student feed back.

## **RESPONSIBILITY**

HOD of respective department is responsible to implement this procedure effectively.

## **PROCEDURE :**

“Student feed back form” is used to collect students’ feed back. The following information is obtained through student feed back form

- a. Presentation skills of teaching faculty
- b. Behaviors of the teaching faculty/non teaching staff
- c. Adequacy of facilities meeting the learning requirements
- d. support services (example transportation) provided by the institute
- e. Safety practices and
- f. Any other aspects related to the quality/service of the institute

Teaching staff of each subject issues student feed back form to all the students in the class.

Student Feed-back is collected during the middle of every semester.

To get factual data, name/signature of students not identified/revealed student feed back form.

Corrections/Corrective actions are initiated for significant student feed backs through the procedure for Controlling non conformity, corrective and preventive actions (ACD-P15).

HOD of the respective department, prepares Student feed back summary for each semester.

Correction/corrective action for student feed back is initiated by the HOD in-consultation with the principal depends on the severity of the problems occurred/effects encountered or potential problems/potential effects. (Refer procedure no: ACD-P15).

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<b>Procedure for Student Feed-back</b>				
Applicable ISO 9001 Clause Numbers : 8.2.1.				

Cause and effectiveness off action taken is reviewed during the Management review Meeting.

Filled Students feed-back forms with necessary action taken (enclosed with corrective action reports ) is maintained by the HOD of the respective department.

**Documents and Records (4.2.3 and 4.2.4)**

<b>SL</b>	<b>Description of the Document/Record</b>	<b>Reference Number</b>
1.	Student Feed-back form	ACD-17A
2.	Student Feed-back summary	ACD-17B

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<b>SRI RANGANATHAR INSTITUTE OF ENGINEERING &amp; TECHNOLOGY</b>	Ref	ACD-P15	Rev No	0
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Procedure for Control of Non conformity, corrective and preventive actions				
Applicable ISO 9001 Clause Numbers : 8.3, 8.4, 8.5.1,8.5.2, 8.5.3				

## **PURPOSE**

The purpose of this procedure is to explain the methods of identification and disposition of non conformity(NC) and implementing corrective action to avoid recurrence. This procedure also explains the preventive action and continual improvement practices.

## **SCOPE**

Scope of this procedure is to explain the following activities...

- a) Analysis of Data
- b) Identification of Non-conformity
- c) Correction
- d) Corrective action
- e) Preventive action
- f) Continual Improvement

Scope of this procedure does not include the non-conformity generated though internal audit process. Procedure (MAN-P2) explains management of internal audit non conformities.

## **RESPONSIBILITIES**

<b>SL</b>	<b>Step</b>	<b>Responsible</b>
1	Identification of NC	Staff/HOD
2	Separation of NC	Staff concerned
3	Correction	Staff concerned
4	Identification of Root Cause	Staff/HOD/Principal
5	Forming action Plan	Staff/HOD/Principal
6	Implementing action Plan	As per action plan
7	Verify effectiveness	Staff/HOD
8	Discuss in MRM	Staff/HOD/Principal

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Procedure for Control of Non conformity, corrective and preventive actions				
Applicable ISO 9001 Clause Numbers : 8.3, 8.4, 8.5.1,8.5.2, 8.5.3				

## **PROCEDURE**

### **1. Definitions**

#### **a. Non conformity (8.3)**

**The following deviations are treated as Non-Conformity (NC)**

1. Student(s) failed in the internal test.
2. Student(s) failed in the university exam.
3. Not meeting the set target value of objective listed in the “Objective Monitoring sheet”.
4. A lesson which is not completed even after 15 days from the planned date as per the “lesson plan”.
5. A Complaint from a Student/Parent/AICTE/Anna University against the following
  - a) Academic process
  - b) Administration process
  - c) Lack of facility/infrastructure
  - c) Management/Staff
6. When majority (above 60%) of students in a class made tick mark in “poor” column for a specific topic in the student feed-back form.

#### **b. Correction**

Corrections are temporary action taken on the affected situation. Corrections are done immediately on emergency basis when a non conformity is identified.

#### **c. Corrective action**

Corrective action taken for the root causes for the non- conformance already occurred. Corrective action is taken to prevent occurrence of such non-conformities in future. Corrective action is not a temporary action to solve the problem it is a permanent action. Corrective action is taken to eliminate/remove the cause of non-conformity. Corrective action can lead to change in process the /system/related documents/facilities.

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Applicable ISO 9001 Clause Numbers : 8.3, 8.4, 8.5.1,8.5.2, 8.5.3				

#### **d. Preventive action**

Preventive action is defined as the action taken to prevent occurrence of problems or action taken to eliminate the causes of potential problems (potential means not occurred by there is a chance of occurrence in near future).

### **2. Analysis of Data (8.4)**

The following data is analyzed with respect to set target value. Corrections/corrective actions are initiate if set target value is not met.

<b>SL</b>	<b>Type of Data Analysis</b>	<b>Frequency Of analysis</b>	<b>Responsibility for Analysis</b>	<b>Record Ref</b>
01	Student Feed back	Every semester for each student in the middle of the semester. Collected subject wise.	HOD/Staff	Student feed back form
02	objective target Vs Actual	Monthly once	HOD/Faculty	Objective Monitoring sheet
03	University Exam Results	For every semester	HOD/Principal	University exam result file

### **3. Processing of Student Complaints or “Poor” status in the student feed back form (refer section 1 of this procedure) (8.5.2).**

1. Complaints are handled by the HOD/Principal.
2. “Corrective Action Report” is raised by the HOD/Principal for each complaint.
3. The HOD/Principal interacts with the Student/Parent/Staff and finds the cause(s) for the complaint. The cause(s) are recorded in the “corrective action Report”.

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Procedure for Control of Non conformity, corrective and preventive actions				
Applicable ISO 9001 Clause Numbers : 8.3, 8.4, 8.5.1,8.5.2, 8.5.3				

4. Based on the cause identified, a Corrective action Plan to be implemented is decided by the HOD/Principal and it is recorded in the “corrective action report”.
5. After implementation of corrective action, it is recorded in the “corrective action report”.
6. The HOD/Principal ensures the effectiveness of implementation of corrective action by verifying status of the similar complaint for further for the period of 6 months and the results of verification is recorded in the “corrective action report” by the HOD/Principal.
7. The Status of complaints is reviewed in the MRM.

#### **4. Actions taken when student failed in the Internal Test/University Exams (8.3, 8.4, 8.5) or for students poor in studies**

Any one or combinations of the following type of actions are applied depends on the root cause for the failure...

- a) Conducting special class by the staff
- b) Submitting additional assignment by the students
- c) Conducting additional/Re-test and re-evaluation

The action taken is recorded in the “corrective action report” by the staff/HOD.

Attendance record, assignment papers, question papers and answer papers are maintained for such special class/additional assignment/additional tests.

#### **5. Procedure for Preventive Action (8.5.3)**

- a. MR/HODs/Staff initiates preventive action based on the following information.
- b. Preventive Action is an action taken to prevent a Potential/anticipated Problem (ie action taken for a problem before its occurrence based on the forecast) Potential Problems/NCS are identified by any one of the following sources.

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Procedure for Control of Non conformity, corrective and preventive actions				
Applicable ISO 9001 Clause Numbers : 8.3, 8.4, 8.5.1,8.5.2, 8.5.3				

- (i) Any Change in the AICTE/University/DOTE norms/Syllabus
- (ii) Any Change in the Quality Management Systems
- (iii) Internal Test/Assignment results
- (iv) Attendance % of student
- (v) Poor infrastructure/facility/break down of equipment
- (vi) Resignation of key staff.
- (vii) Usage of unskilled teaching staff.
- (viii) From the Internal Audit Results.
- (ix) From the Management Review meetings/inputs by the management
- (x) From the Student feed back results
- (xi) Inputs from parents when they meet staff/principal/management
- (xii) From the information from the other Colleges/universities
- (xiii) From the information obtained through newspapers/internet /government organizations
- (xiv) Any other modes

Based on the above sources, if any information about the potential problem is obtained, it is taken as an opportunity to initiated preventive action. MR initiates preventive actions in consultation with the Staff/HOD/Principal. The details of preventive actions and the results of actions taken are recorded in the Management Review Meeting. The action taken is discussed and recorded in the MRM.

## 6. Continual Improvement (8.5.1)

Continual Improvement projects are initiated and implemented to improve the QMS, Teaching Practices, infrastructure/facility development and Staff Performance.

Objective of the Project, budget and team members involved for continual improvement Project is decided in the MRM. Implementation of such projects are monitored by the MR. The results of such continual Improvement Projects are reviewed in the subsequent MRMs.

## 7. Documents & Records (4.2.3 and 4.2.4)

SL	Description of the Document/Record	Reference Number
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Procedure for Control of Non conformity, corrective and preventive actions				
Applicable ISO 9001 Clause Numbers : 8.3, 8.4, 8.5.1,8.5.2, 8.5.3				

1	Internal Test file	ACD-10
2	University Results file	ACD-11
3	Corrective Action Report	ACD-24

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Approved by :

<b>SRI RANGANATHAR INSTITUTE OF ENGINEERING &amp; TECHNOLOGY</b>	Ref	ACD-P16	Rev No	0
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<b>Procedure Class committee Meeting</b>				
Applicable ISO 9001 Clause Numbers : 5.6				

## **PURPOSE**

The purpose of this procedure is to explain the class committee meeting process.

## **SCOPE**

Scope of this procedure covers class committee meeting activity.

## **RESPONSIBILITY**

The Principal is the leader of the class committee meeting is responsible to implement this procedure effectively. All the HODs are the members of the class committee meeting.

## **PROCEDURE :**

- a. Class committee meeting is held once in a semester.
- b. Agenda for class committee meeting
  1. Review of actions decided in the previous class committee meetings
  2. Review of Academic Schedule
  3. Review of breakdown of equipment/non availability of facility
  4. Analysis and Review of objectives of academic process
  5. Analysis and Review of Internal test results
  6. Review of action taken for poor students identified
  7. Analysis and Review of University exam results
  8. Analysis and Review of outcomes of Industrial visits
  9. Analysis and Review of student feed back
  10. Disciplinary actions needed for a student/staff if any
  11. Seminar/Guest Lectures/Paper Presentations Planned
  12. Staff Development Programs Planned
  13. New Resource Requirements
  14. Improvement suggestions
  15. Formation of Minutes and Action Plan
- c. Date of meeting is fixed by the Principal and circulated to the HODs one week before the actual date of meeting.
- d. Members shall present the above information with adequate data.
- e. Minutes for meeting shall be circulated by all the members.
- f. Class Committee meeting minutes, action plan status is reviewed in the Management Review.

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<b>Procedure Class committee Meeting</b>				
Applicable ISO 9001 Clause Numbers : 5.6				

**Documents and Records (4.2.3 and 4.2.4)**

<b>SL</b>	<b>Description of the Document/Record</b>	<b>Reference Number</b>
1.	Class Committee Meeting Minutes with action plan	MAN-09

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<b>SRI RANGANATHAR INSTITUTE OF ENGINEERING &amp; TECHNOLOGY</b>	Ref	ACD-P17	Rev No	0
<b>Procedure Manual</b>	Page	1 of 1	Rev Date	
<b>Procedure for Objective Monitoring</b>				
Applicable ISO 9001 Clause Numbers : 5.4.1				

## **PURPOSE**

The purpose of this procedure is to explain the activities of the objective monitoring process.

## **SCOPE**

Scope of this procedure includes the monitoring of quality objectives.

## **RESPONSIBILITY**

HODs of concerned department is responsible to implement this procedure effectively.

## **PROCEDURE :**

- a. Objective(s) for respective department of the institution is listed in the "Objective Monitoring sheet ".
- b. These objectives are monitored at frequency defined in the "Objective Monitoring sheet" by collecting supporting data and enclosed as evidence.
- c. Actual data (achieved value) is compared with the target value in the "Objective Monitoring sheet". If target is not achieved, then applicable correction and corrective actions are initiated and the action status is recorded in the "Corrective action Report" (Refer Procedure ACD-P15 for more details).
- d. Action taken and its effectiveness is reviewed in the Management review meeting (refer procedure no:MAN-P4)

## **Documents and Records (4.2.3 and 4.2.4)**

<b>SL</b>	<b>Description of the Document/Record</b>	<b>Reference Number</b>
1.	Target and Achievement file (Department Objectives)	ACD-03
2.	Corrective action report	ACD-24

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Approved by:

<b>SRI RANGANATHAR INSTITUTE OF ENGINEERING &amp; TECHNOLOGY</b>	Ref	ADM-P2	Rev No	0
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<b>Procedure for Maintenance of Students' Original Certificates</b>				
Applicable ISO 9001 Clause Numbers : 7.5.4				

## **PURPOSE**

The purpose of this procedure is to explain the maintenance of student's original certificates

## **SCOPE**

This procedure is applicable for the maintenance of student's original certificates.

## **RESPONSIBILITY**

The Coordinator-office is responsible to implement this procedure effectively.

## **PROCEDURE :**

- a. Original certificates of the students are collected during the admission process.
- b. Details of the original certificates collected is recorded in the "Admission register".
- c. Adequate care is taken to prevent damage/lost/theft of certificates. Care includes take adequate measures to prevent damage due to fire/flood/earth-quake/natural calamities.
- d. Original certificates are stored student-wise in a plastic pouch and kept in the safe locker.
- e. At the time of course completion, the original certificates are handed over to the students after receiving "clearance report" signed by applicable departments.
- f. Original certificate returned details are recorded in the back side of the additional copy college Transfer certificate (TC) book.

## **Documents and Records (4.2.3 and 4.2.4)**

<b>SL</b>	<b>Description of the Document/Record</b>	<b>Reference Number</b>
1.	Admission Register	ADM-02
2.	Clearance Report	ADM-07
3.	Transfer Certificate (TC)	ADM-08

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Approved by:

<b>SRI RANGANATHAR INSTITUTE OF ENGINEERING &amp; TECHNOLOGY</b>	Ref	ADM-P3	Rev No	0
<b>Procedure Manual</b>	Page	1 of 3	Rev Date	
<b>Procedure for Purchasing</b>				
Applicable ISO 9001 Clause Numbers : 7.4				

## **PURPOSE**

The purpose of this procedure is to explain the capital and Consumable purchasing activity.

## **SCOPE**

This procedure is applicable for the following type of capital purchasing.

- a. Purchase of Furniture for college/food court/hostel
- b. Purchase of computers/software license/communication facilities
- c. Purchase of Equipment for lab/hostel/Food court
- d. Purchase of gen-set other captive equipments
- e. Safety equipments/devices
- f. Security devices
- g. Construction of building/lab/related facilities
- h. Transport vehicles
- i. Any other facilities required for academic affairs or administration affairs/hostel/food court

Scope of this procedure includes the purchasing of the following consumables

- a. Printed formats/note books/stationeries
- b. Laboratory consumables
- c. Work shop consumable
- d. Consumables for foods court
- e. Consumables for hostel
- f. Consumables for maintenance services

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Approved by:



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<b>Procedure for Purchasing</b>				
Applicable ISO 9001 Clause Numbers : 7.4				

## **RESPONSIBILITY**

The Office coordinator is responsible to implement this procedure effectively.

## **PROCEDURE :**

### **A.Capital Purchasing**

- a. The requirement for capital purchase is generated any one the following modes.
  - When top management decides to improve infra structure of the organization
  - When a resource requirement is identified during the class committee meeting
  - When a “Purchase Indent” is generated by the staff to initiate procurement of resource.
  - When there is a complaint from student/parent/government body due to inadequacy of resource/facility
  - To improve the facility to achieve required norms/academic standards/safety norms.
- b. All such resource requirements are transferred to the Purchase Indent and forwarded for approval by the top management through Principal.
- c. Resources related to fulfilling legal requirements are given top priority. Top management may approve or reject other proposals depends on the severity of the needs and financial considerations.
- d. Quotation for new resource is obtained from minimum 2 sources (preferably through known sources). Approval from the top management is obtained in the quotation. Purchase order is released by the coordinator-office.
- e. After receipt of facility, Goods inward note-GIN is raised by the coordinator-Office and forwards to the department concerned for verification.
- f. After verification, GIN is forwarded to the accounts section along with bills.

### **B.Consumable Purchasing**

- a. Stock of the consumable is monitored by the concerned lab/work shop.
- b. When a consumable to be purchased, a Purchase Indent is raised by the staff concerned after getting approval from the principal.
- c. List of approved Consumable Suppliers is maintained by the coordinator Office.
- d. Purchase order is prepared with clear specification of the consumable to be purchased and approval of purchase order is obtained from the principal.

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Applicable ISO 9001 Clause Numbers : 7.4				

- e. For local/cash purchase of consumables below Rs.500, approval from principal is not mandatory. The coordinator office can approve such purchases even without purchase orders. However no purchases shall be made without bills.
- f. Purchase order is released by the office coordinator. Purchase order is approved by the principal/top management.
- g. After receipt of consumable it is verified against purchase order specifications.
- h. The results of verification is updated in the Goods Inward Note-GIN. GIN is not applicable for local/cash purchases less than Rs.500.
- i. GIN is attached with the supplier bill and forwarded to the accounts department for payment.

#### **Documents and Records (4.2.3 and 4.2.4)**

<b>SL</b>	<b>Description of the Document/Record</b>	<b>Reference Number</b>
1.	Purchase Indent file	ADM-09
2.	Purchase Order file	ADM-10
3.	Goods Inward Note (GIN)	ADM-11
4.	List of approved consumable suppliers	ADM-12

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<b>Procedure Manual</b>	Page	1 of 2	Rev Date	
<b>Procedure for Maintenance</b>				
Applicable ISO 9001 Clause Numbers : 6.3 and 6.4				

## **PURPOSE**

The purpose of this procedure is to explain the activities of the maintenance process.

## **SCOPE**

This procedure covers...

1. Civil Maintenance
2. Plumbing and Electrical Maintenance
3. Intercom, Telephone and Internet Maintenance
4. House keeping/Cleaning

This procedure includes the maintenance of office, academic departments, labs, workshops, canteen and hostel. Maintenance of transport vehicles is not covered in this procedure and it is addressed in the Transportation Procedure (refer : ADM-P9).

## **RESPONSIBILITY**

The Office-coordinator is responsible to implement this procedure effectively.

## **PROCEDURE :**

### **a. Repair/AMC maintenance of equipments/facilities**

This section covers the maintenance of Civil, Plumbing, Electrical, Intercom, Telephone and Internet facilities

Civil maintenance is applicable for civil related works like, mason works, carpentry works etc. Preventative maintenance is not applicable for civil maintenance.

If repair work is needed in these facilities, it is communicated to the Office Coordinator through Inter office communication. Office Coordinator shall fix approved contractor to complete the job. After completion of job, office coordinator shall verify the quality of maintenance work.

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Applicable ISO 9001 Clause Numbers : 6.3 and 6.4				

#### **b. House keeping/Cleaning**

House keeping process is carried out throughout the institution premises, canteen and hostel facilities. House keeping is done by the cleaning staff appointed by the office-coordinator.

House keeping is carried out as per the frequency defined in the “House keeping check list” and the status of completion of house keeping activity is recorded in the House keeping check list by the coordinator-Maintenance.

#### **Documents and Records (4.2.3 and 4.2.4)**

<b>SL</b>	<b>Description of the Document/Record</b>	<b>Reference Number</b>
1.	Preventive Maintenance Log	ADM-13
2.	House keeping check list	ADM-14

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Approved by:

<b>SRI RANGANATHAR INSTITUTE OF ENGINEERING &amp; TECHNOLOGY</b>	Ref	ADM-P5	Rev No	0
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<b>Procedure for Stores</b>				
Applicable ISO 9001 Clause Numbers : 7.5.5				

## **PURPOSE**

The purpose of this procedure is to explain the stores activities.

## **SCOPE**

Scope of this procedure includes the storage of

- a. Printed Materials/Stationeries
- b. Laboratory Consumables

## **RESPONSIBILITY**

The Coordinator-office is responsible to implement this procedure effectively.

## **PROCEDURE :**

- a. Receipt of materials is updated in the register at main gate security. Material inward seal is kept by the security on the DC/Invoice.
- b. Materials are transferred to the stores along with and DC/Invoice. Materials are kept in the under inspection area. Materials are not transferred to its racks/designated place prior to the verification activity.
- c. Store keeper/coordinator-office verifies the quantity and quality of the materials as per the purchase order requirements. "Goods Inward note-GIN" is prepared as an evidence of verification activity. Result of verification (ie accepted or rejected status is recorded in the GIN. DC/Invoice is attached with GIN and forwarded to the accounts department for payment. Accounts department shall release payment for suppliers by referring the DC/invoice and GIN acceptance status.
- d. Accepted materials are moved to their racks/designated areas/respective departments. The status about the rejected materials is informed to the supplier for replacement/alternate actions.
- e. Inward qty of material is updated in the "stock register" in the respective department. Materials are issued based on the requirement and Issue qty is recorded in the "stock register".
- f. Space for each material should be clearly allotted. Name of the Material should be identified through display board/stickers on the material itself for easy accessibility of material. Materials should not be dumped one on another to prevent damage due to storage.

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Applicable ISO 9001 Clause Numbers : 7.5.5				

- g. Fire extinguisher if needed is kept in the areas where materials are stored.
- h. If Shelf life items (example material with limited life/expiry date) are stored in the stores, Expiry date shall be marked on the materials.
- i. Hazardous material (like acids) are stored properly under the identification board as **“Hazardous-Handle with care ”**

**Documents and Records (4.2.3 and 4.2.4)**

<b>SL</b>	<b>Description of the Document/Record</b>	<b>Reference Number</b>
1.	Goods Inward Note (GIN)	ADM-11
2.	Laboratory Stock Register	ACD-22

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<b>Procedure for Staff-leave</b>				
Applicable ISO 9001 Clause Numbers : 6.2.2				

## **PURPOSE**

The purpose of this procedure is to explain the staffs leave policies.

## **SCOPE**

Scope of this procedure includes the policies of Staffs leave/permissions.

## **RESPONSIBILITY**

Principal is responsible to ensure that this procedure is implemented by the teaching and non teaching staff effectively.

## **PROCEDURE :**

Objective : Leave policy provides employees with time off from work for reasons of rest and relaxation, illness and other reasons.

Eligibility : All Confirmed Employees are eligible for Leave Policies

### **Casual Leave :**

Casual leave is a key benefit essential to take care of employees' personal & family needs. It plays a vital role in rejuvenating the energy of the employee from time to time. In order to promote better work-life balance, we encourage all employees to avail their Casual Leave.

- Employees earn 12 days of casual leave during each year of service, where year is defined as follows
  - Year is defined as Calendar year for all confirmed employees.
  - Year is defined as First year of Service (One year from date of joining the organization) for employees who are new joinees.
- Casual Leave is earned on a day to day basis. Employees do not earn annual leave for the days when they are availing any leave other than Casual Leave. For ex. when an employee is on Loss of Pay Leave, he does not earn casual leave for the period that he/she is on loss of pay leave.
- The number of leave days that an employee can avail is exclusive of official and weekly holidays.
- In the first year of service (one year from date of joining, i.e. probation period), employees will be allotted an opening balance of 3 days which is leave accumulation for 3 months. Thereafter the actual accumulation of leave will commence from the third month onwards.

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- Employee can apply for advance leave of maximum 10 days. However, new joinees can avail only 3 days of advance leave.
- Casual Leave applications for next calendar year Casual leave balance is adjusted every year end after 31 December. In case you apply for casual leave for next calendar year, even though it may get approved, if the leave applied for is outside the rules/guidelines of the policy as per your year end leave balance, it may be cancelled. For ex, if your advance leave taken is beyond a leave balance of -10 after the year end adjustment, the leave applied for in next calendar year will be cancelled.

#### Accumulation

- Every year (except the year of joining and year of confirmation) a minimum number of days of leave have to be mandatorily availed. This mandatory leave number is proportionately computed based on the number of leaves you earn in the year. For 12 leave days earned, 8 days are mandatorily to be availed. If an employee does not avail the mandatory leave, they will lapse and will not be carried forward.
- For employees on probation, the mandatory leave requirement is not applicable for leave year from date of joining to date of completion of one year of service.
- On confirmation, from the date of confirmation to December End of the same year, and for every calendar year there on, prorated mandatory leave based on number of leave days earned would be required to be availed so that it does not lapse. ( For 12 Leave days earned, 8 should be mandatorily availed).
- If an employee has a negative opening balance, during year end reconciliation and leave that needs to be lapse will be adjusted from the negative opening balance of the year, only the remaining leave will lapse.
- All employees can accumulate a maximum annual leave of 15 days. Beyond 15 days, you cannot accumulate further leave and you would have to avail all the leave earned during the year, else it would lapse.

#### **SickLeave**

- Sick leave policy is designed to enable employees to take necessary rest from work in case of personal ill health or if the employee is unwell.
- If you have joined during this year, your sick leave entitlement will not be prorated.
- Sick leave cannot be carried forward to the next academic year.
- Sick leave cannot be encashed.
- Maternity leave is a statutory leave.
- Expecting women employees are eligible to avail of maternity leave for a maximum period of 84 days (as per The Maternity Benefit Act, 1961, a women employee is eligible for 12 weeks or 84 days of leave).
- Employee should have completed a minimum of 120 days of service to be eligible for maternity leave.

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Applicable ISO 9001 Clause Numbers : 6.2.2				

- Employees shall receive full-pay during this period. If you are on probation, you are entitled to avail maternity leave, subject to conditions.

On-duty Leave :

- On-duty Leave can be availed for all remunerative work such as evaluation, exam-duty upto a maximum of 6 days per semester.
- On-duty can also be availed for Self Improvement (academic related) like attending conferences, seminars, Faculty development/empowerment programs, pursuing higher education upto a maximum of 6 days in a semester.

Permission Leave :

- Permission Leave upto 1 hour (either for late arrival or early leaving) is limited to a maximum of 2 days in a month, and to a maximum of 24 permissions in a year.
- Permission Leave cannot be carried forward to the next month.
- Permission Leave exceeding 2 days in a month will henceforth be treated as half-day Casual leave.

**Documents and Records (4.2.3 and 4.2.4)**

<b>SL</b>	<b>Description of the Document/Record</b>	<b>Reference Number</b>
1.	Staff Leave file	ADM-15

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Approved by:

<b>SRI RANGANATHAR INSTITUTE OF ENGINEERING &amp; TECHNOLOGY</b>	Ref	ADM-P7	Rev No	0
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<b>Procedure for Disciplinary Policies</b>				
Applicable ISO 9001 Clause Numbers : 7.5.1				

## **PURPOSE**

The purpose of this procedure is to explain the disciplinary policies implemented in the college.

## **SCOPE**

Scope of this procedure includes following disciplinary policies,

- A. Dress code policy
- B. Drug and Alcohol related policy
- C. Ragging related policy
- D. Eve teasing related policy
- E. Usage of Cell phone
- F. Respecting faculties/staff
- G. Cleanliness
- H. Protection of college properties
- I. Violence behaviors
- J. Student's Leave/permission
- K. Malpractice in the exam

## **RESPONSIBILITY**

Principal, staff and students are responsible to implement the policies defined in this procedure

## **PROCEDURE :**

### **A.Dress Code Policy**

An Institution's objective in establishing a dress code is to allow all employees to work comfortably at the workplace and at the same time project a professional image to our students and other employees, and the community we are a part of.

#### Tips for a professional appearance:

- Know the kind of workplace you are in and dress to feel confident and comfortable
- Differentiate between clothes to work and clothes to party
- Ensure that you look well-groomed, clean, and looking smart

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#### For Women

1. Dress - Sarees : Only professional Sarees provided by the Institution with ladies over-coats should be worn.
2. Business Leather Shoes for Ladies either in brown or black, duly polished should only be worn.
3. Hair : Hair should be neatly groomed and suitably pinned so give a professional attire.

#### Jewelry, Makeup, Perfume, and Cologne

It is always considerate to use colognes or perfumes that are mild in fragrance so that it doesn't disturb others at work. Subtle make up and jewelry also help accessorize work wear suitably.

#### For Men

1. Dress - Institution provided Shirts tucked into Trousers with a neat belt of either black/ brown (office leather belts) and also provided with men over-coats should be worn. Full / half-sleeved Collared shirts are permitted.
  2. Wearing a Tie is mandatory during the contact hours of the Faculty.
  3. Business Leather Shoes either in brown or black, duly polished should only be worn.
- Note: The above dress code should also be followed by all Teaching, Non-teaching and Office Staff.
4. Hair : Hair should be neatly groomed and suitably combed. No hippy or style growth is accepted.

#### Jewelry, Makeup, Perfume, and Cologne

It is always considerate to use colognes or perfumes that are mild in fragrance so that it doesn't disturb others at work. Subtle make up and jewelry also help accessorize work wear suitably.

Note : Any other dress other than the prescribed dress is not permissible. Strict adherence to Dress code is a mandatory. Also, clothes should be pressed and never wrinkled. Torn, dirty, or frayed clothing is unacceptable. No dress code can cover all contingencies so you need to exert a certain amount of judgment in your choice of clothing to wear to work. If you are unsure about acceptable professional office casual attire for work, please feel free to have a chat with your Head or Principal.

### **B. Drug and Alcohol free Campus**

Our Institution is committed to maintaining this campus with an environment that is free from alcohol and illegal drugs. Our Institution is committed to helping our students maintain similar environments both in their hostels and at home by suitably providing them

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Applicable ISO 9001 Clause Numbers : 7.5.1				

with consultations and counselling that will help them not use alcohol or illegal drugs. We believe that this policy is in the best interests of the Employees and our Students.

- Our institute prohibits smoking inside the college premises.
- Our Institution prohibits all employees from reporting to work under the influence of alcohol, illegal drugs or controlled substances. This Institution also prohibits the use of alcohol, illegal drugs or controlled substances by an employee during the work day or anywhere at any location where the employee is working.
- Those employees who must use a prescription drug which might impair their ability to perform their duties should inform their head that they are taking such medication on the advice of a physician. These employees are responsible for informing their head of the possible side effects of the drug on performance and the expected duration of use.

#### Definitions :

A. Illegal Drugs: Drugs or controlled substances which are: (1) not legally obtained or (2) legally obtained, but not used in a lawful manner. Examples include, but are not limited to, cocaine, heroin, amphetamines, marijuana, as well as prescription drugs which are not lawfully obtained or properly utilized. The term "illegal drugs" also refers to mind-altering and/or addictive substances which are not sold as drugs or medicines, but are used for mind or behavior-altering effect.

B. Legal Drugs: Those prescribed or over-the-counter drugs which are legally obtained and used for the purpose for which they were prescribed and sold.

#### Our Institution's Drug and Alcohol Free Workplace Policy prohibits the following:

A. Smoking inside the college premises

B. Consumption, possession, distribution, sale, manufacture, or storage of an illegal drug or drug paraphernalia on Institutions property, on work, in vehicles or in personally owned vehicles being used for official purposes, or during work hours.

C. Consumption or possession of alcohol on Institution property, on campus site, in vehicles or in personally owned vehicles being used for official purposes, or during work hours.

C. Failing to notify a Head/Principal of the use of a prescription drug which affects the associate's physical or mental ability to perform the essential functions of the job assigned.

#### Consequences of Violating the Policy:

Our Institution takes alcohol and substance abuse very seriously. Therefore, violations of the policy will result in disciplinary action, up to and including, termination.

Please contact the Principal, if you have any questions regarding the Drug and Alcohol Free Workplace Policy.

### **C.Prevention of Ragging**

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Approved by:

<b>SRI RANGANATHAR INSTITUTE OF ENGINEERING &amp; TECHNOLOGY</b>	Ref	ADM-P7	Rev No	0
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Supreme Court defines the ragging as follows

"Ragging is any disorderly conduct, whether by words spoken or written, or by an act which has the effect of teasing, treating or handling with rudeness any student, indulging in rowdy or in-disciplined activities which cause or are likely to cause annoyance, hardship or psychological harm or to raise fear or apprehension thereof in a fresher or a junior student and which has the effect of causing or generating a sense of shame or embarrassment so as to adversely affect the psyche of a fresher or a junior student"

Ragging is prohibited in the state by the "Tamil Nadu Prohibition of Ragging Act 1997". Ragging inside, outside the college premises including hostel is prohibited by this act. Any student violating the rules shall be seriously punishable under this act.

#### **D.Eve teasing**

Eve teasing is prohibited inside, outside of the college premises including hostel in any mode by the ``**Tamil Nadu Prohibition of Eve-Teasing Act, 1998**, any student violating the rules shall be seriously punishable under this act.

#### **E. Usage of Cell Phone**

Both faculty and Students should not use Cell phones inside the class room. Violating this rules shall be punishable by charging fine up-to Rs 1000.

#### **F. Respecting Faculties/Staff**

Students shall respect all teaching, non teaching staff and employee of the college. Students teasing staff/employees of the college in any manner or students not respecting staff/employees of the college shall be seriously punishable by the management of the college.

#### **G. Cleanliness**

Student shall maintain college premises, class room premises, toilets, hostel, office, canteen court, library, garden and other areas clean and tidy. Spitting other than wash basin, writing unwanted things in walls shall be punishable by the management. All wastes should be put only in the dust bin.

Violating this rules shall be punishable by charging fine up-to Rs 500.

#### **I. Protection of college properties**

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Approved by:

<b>SRI RANGANATHAR INSTITUTE OF ENGINEERING &amp; TECHNOLOGY</b>	Ref	ADM-P7	Rev No	0
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Applicable ISO 9001 Clause Numbers : 7.5.1				

Student shall not damage any properties belongs the college even by accident. Any such damage shall be claimable from the student.

### **J. Violence Behaviors**

Students or group of student who involved in violence behaviors (for example agitating the group of students against the management/faculty) in any mode shall be severely punishable by the management. Consequences will be dismissal of student from the college.

### **K. Student's leave/permission**

Student should not take leave/permission without prior approval from the HOD.

If student's attendance is below the university prescribed %, then the student shall not be permitted to write the semester exams and the course will be terminated.

### **L. Malpractice in the internal test/university exam**

Malpractice (for example copying the answer by referring note books/text books) by any student in the internal test/university exam shall be punishable under the university regulations.

Type of punishment: Student will be temporarily/permanently barred from writing the examinations depends upon the severity of the malpractice.

### **Documents and Records (4.2.3 and 4.2.4)**

<b>SL</b>	<b>Description of the Document/Record</b>	<b>Reference Number</b>
1.	Circular file	ADM-16

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Approved by:

<b>SRI RANGANATHAR INSTITUTE OF ENGINEERING &amp; TECHNOLOGY</b>	Ref	ADM-P8	Rev No	0
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<b>Procedure for Security Management</b>				
Applicable ISO 9001 Clause Numbers : 6.3				

## **PURPOSE**

The purpose of this procedure is to explain the security management process.

## **SCOPE**

Scope of this procedure includes the security of the property of the college.

## **RESPONSIBILITY**

Coordinator-office is responsible to implement this procedure effectively.

## **PROCEDURE :**

- a. Securities shall display a list with their mobile number in the security cabin.
- b. It is ensured that security personnel are well trained in the security management processes and shall be physically and mentally capable to meet the security management challenges.
- c. Visitors shall record their details in the "Visitor Register". Securities shall ensure heavy vehicles coming inside the premises shall have RTO approval, Registration certificate, Vehicle Insurance copy, pollution certificate and driving license. If any one of these documents is not available, the heavy vehicle shall not be allowed inside the college premises. Heavy vehicles are not allowed inside the premises without approval of the office coordinator.
- d. Securities shall monitor the entire college premise and to ensure 24 hrs vigilance through CCTV cameras.
- e. Securities to ensure their mobile phone is working properly and its battery charged fully. Securities shall neither to switch off their mobile nor keep it in the silent mode.
- f. Securities shall maintain licensed arms and metal detectors in working condition. Securities shall verify the luggage/packages of visitors/suppliers with metal detectors before allowing them to inside the college premises.

## **Documents and Records (4.2.3 and 4.2.4)**

<b>SL</b>	<b>Description of the Document/Record</b>	<b>Reference Number</b>
1	Visitors Register	ADM-19

Reviewed by:

Approved by:

<b>SRI RANGANATHAR INSTITUTE OF ENGINEERING &amp; TECHNOLOGY</b>	Ref	ADM-P8	Rev No	0
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<b>Procedure for Security Management</b>				
Applicable ISO 9001 Clause Numbers : 6.3				

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Reviewed by:

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<b>Procedure for Transportation</b>				
Applicable ISO 9001 Clause Numbers : 6.3				

## **PURPOSE**

The purpose of this procedure is to explain the Transportation process.

## **SCOPE**

Scope of this procedure includes the managing the transportation process.

## **RESPONSIBILITY**

Coordinator-office is responsible to implement this procedure effectively.

## **PROCEDURE:**

### **Transportation Process**

- The objective of the transport policy is to provide a safe, comfortable and efficient means of transport to the employees/students. Also, we strive to get you the best possible rates from the transport providers.
- The provision of the transport services and cost thereof to the employee/student will be at the sole discretion of the management. Employees include trainees and contract employees.
- The regular bus service operates from all major areas/ areas subscribed by a sizeable number of employees/students. The route and timings are drawn based on a common consensus and feasibility of the request of employees/studnets.
- The office publishes predetermined bus routes with stops covering major areas in the city. The bus routes cover all main residential suburbs of a city within 45 km from the base location and also ensure that the usage of the bus is optimized.
- A group of 40 employees/students or more can request for a new transport service route from a suburb not covered by an existing route.
- Pick-up points will only be on the main roads, narrow bye-lanes/ crowded residential areas will not be covered to reduce travel time and prevent traffic hindrances.
- Employees/students are requested to regularly check their bus route timing and constantly interact with the transport department regarding any change in bus route/timings. Any change in timings/ routes will be communicated via group announcements.
- Extensive route survey has been carried out to determine the timing for bus routes. The timings are fixed for scheduled stops and are displayed
- The bus timings are worked out in such a way that all the buses reach the intitute 15 minutes prior to official start time.

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Approved by:

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<b>Procedure for Transportation</b>				
Applicable ISO 9001 Clause Numbers : 6.3				

- To avoid delays, employees/students are requested to be present at least 5 minutes in advance at their stop before the scheduled time.
- Employees/students are not permitted to commute standing in the buses as per RTO norms. It is the responsibility of the office coordinator to ensure that sufficient fleet size is made available. In case the vehicle size is not adequate, please contact office coordinator to ensure right size of vehicle.
- Evening departure is scheduled as per laid down time. Buses will depart according to the serial number assigned to them. The serial numbers assigned to buses are based on the distance traveled by the bus. Buses which cater to longer distances will be assigned a higher serial number and will depart earlier according to their serial number. During drops the first scheduled drop /stop would be as per the schedule displayed in the bus.

### **Bus Pass**

- A valid bus pass is compulsory and this holds good even if you are using Inter Office shuttle / late evening services.
- Bus pass is not transferable.
- Holding physical bus pass is a mandatory requirement while using transport.
- Permanent and Temporary passes are available for the use by employees/students .
- An employee/student found traveling without possessing a valid bus pass details will be noted by security on daily basis. Employee/student needs to apply for a valid bus pass before travel, if not done it is construed as breach of integrity and disciplinary action will be initiated. In addition, the institute will recover 3 months charges as penalty.
- The employee/student can make a request for a permanent bus pass.
- If any employee/student has lost his or her bus pass, duplicate pass will be issued by the office to continue the facility at a cost of Rs 500/-.
- Upon termination of employment for any reason, surrender of bus pass if any is linked to clearance for separation. Upon completion of course student should surrender the bus pass along with clearance report.
- The cost of transport service to an employee will be automatically deducted from the employee's payroll. Cost of transport service to a student is added with tuition fees.
- All Permanent Bus Passes are issued on monthly basis.
- Temporary passes are available for a maximum period of one week.

### **Maintenance of Transport vehicles**

Vehicle driver and office coordinator is responsible to ensure the following

- Maintenance service is done yearly once
- Insurance is carried out yearly once
- Vehicle is sent to Fitness test as per RTO due date.

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<b>Procedure for Transportation</b>				
Applicable ISO 9001 Clause Numbers : 6.3				

**Documents and Records (4.2.3 and 4.2.4)**

<b>SL</b>	<b>Description of the Document/Record</b>	<b>Reference Number</b>
1	Maintenance file	ADM-13

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<b>Procedure for Scholar Ship Management</b>				
Applicable ISO 9001 Clause Numbers : 7.5.1				

## **PURPOSE**

The purpose of this procedure is to explain about the scholar ship provision to the eligible students.

## **SCOPE**

Scope of this procedure includes the provision of scholar ship to the eligible students.

## **RESPONSIBILITY**

It is the responsibility of coordinator-office and Principal to implement this procedure effectively.

## **PROCEDURE :**

- a. Scholarship is provided to the eligible students. Eligibility criteria is declared by the management through circulars. Top management can revise the eligibility criteria at any point of time.
- b. Scholarship application is collected from the eligible students.
- c. Scholarship application is reviewed by the coordinator office and forwarded to the principal for review. Principal shall review, make comments and forwarded to the top management for approval. Scholarship is issued for the eligible students approved by the top management. Principal/Top management has right to withdraw the scholarship provided at any point of time.

## **Documents and Records (4.2.3 and 4.2.4)**

<b>SL</b>	<b>Description of the Document/Record</b>	<b>Reference Number</b>
1.	Scholar ship file	ADM-18

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<b>Procedure for Control of Documents and Records</b>				
Applicable ISO 9001 Clause Numbers : Documents:4.2.3 and Records:4.2.4				

## **PURPOSE**

The purpose of this procedure is to explain controlling methods of Documents and Records

## **SCOPE**

Controls applicable for the following documents and records

<b>SL</b>	<b>Level</b>	<b>Type of Documents to be controlled</b>
01	1	Quality Manual
02	2	Procedure Manual
03	3	AICTE Norms/University Regulations/DOPE Norms/Syllabus/Lists/Formats used for Records
04	4	Records (evidence of implementing the QMS)

## **RESPONSIBILITY**

MR, Principal, teaching and non teaching staff concerned are responsible for implementation of this procedure effectively.

## **PROCEDURE**

### **CONTROL OF DOCUMENTS (4.2.3)**

#### **1. Quality Manual, Procedure Manual, Lists and Formats**

##### **1.1. CODIFICATION OF DOCUMENTS**

All the documents generated in the organization are identified with unique codes as described below.

##### **1.1.1 QUALITY MANUAL (LEVEL 1 )**

The section of Quality Manual are coded as QM-XX where

QM = Quality Manual

XX = Section Number

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Applicable ISO 9001 Clause Numbers : Documents:4.2.3 and Records:4.2.4				

QM-A = Annexure to the quality manual

### 1.1.2 PROCEDURE MANUAL (LEVEL 2)

The Procedures are coded as AAA-PXX where

Where AAA is the functional code as follows

ADM : - Administration Function

ACD : - Academic Function

MAN : - Management Function

P =Procedure

XX = Serial Number.

### 1.1.3 DOCUMENT NEEDED FOR EFFECTIVE OPERATION OF SYSTEM (LEVEL 3)

AICTE Norms/University Regulations/DOTE Norms/Syllabus/Lists/Formats used for Records

External documents like AICTE Norms/Anna University Regulations or syllabus/ are not coded by the organization but files containing these documents shall be coded (Refer master list of documents and records- )

Internally prepared Level 3 documents (lists, formats) are coded as follows

Department Code – XX ;

Where XX-Serial Number and department codes are as follows,

SL	Department Code	Name of the Function/Department
1.	ADM	Administration/Office
2.	ACD	Academic Functions (Refer procedure ACD-P1)
3.	LIB	Library
4.	PED	Physical Education
5.	MAN	Management Representative/Top Management function

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**Note :**

All the external documents (refer section 2 of this procedure) which are filed in a file are given the by code number. Format code and record code is given with the same code. When format is filled it is called as “record”. Record codification is addressed in the section 4 of this manual.

**1.2 AUTHORITY**

The authority for preparing, approving and issuing various levels of documents are as per Table 1 follows,

**TABLE 1**

<b>SL</b>	<b>Type of Document</b>	<b>Prepared by</b>	<b>Reviewed/Issued by</b>	<b>Approved by</b>
01	Vision, Mission and Policy	MR	Principal	Top Management
02	Quality Manual	MR	Principal	Top Management
03	Procedures	Faculty/HOD	MR	Principal
04	Work Instruction/Formats/Lists	Faculty/HOD	MR	Principal

1.2.1 Preparation, review, approval and issue of new procedure/format

Any member of the institute (MR/Principal/teaching or non teaching staff except student) may require a new procedure/work instruction/ format to improve their process. In such cases, it is given as input to the class committee meeting. Responsibility for preparation, review, approval and issue of new procedure/work instruction/format is fixed in the class committee meeting.

Steps involved when a procedure/work instruction/format is to be added in the quality management.

- a. Preparation authority shall prepare the document by collecting required information by studying the process if needed from the internet.
- b. Draft document is submitted in the class committee meeting for review and approval.
- c. Changes if any decided during the class committee meeting is updated in the soft copy and it is forwarded to the MR through email.

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Applicable ISO 9001 Clause Numbers : Documents:4.2.3 and Records:4.2.4				

- d. MR shall allot document number for the new document and Master List of Documents and Records (MAN-00) is updated. Any other documents to be changed due to addition of new document is also updated by the MR. The other document change is implemented as per the steps defined in the section 1.4 of this procedure. Print out of the new documents and revised is taken Master copy (MR copy) and Controlled copy (department copy) seals are kept. MR shall make signature in the controlled copy seal. Signature of approval authority is obtained by the MR. MR issues to the controlled copy to the needed department HODs through "Document Issue register". The receiver of the document shall sign in the "Document Issue register" as a token of receipt of document.
- e. The HODs shall add the controlled copy of new procedure/Work Instruction/format document in the existing Procedure Manual file.

### **1.3 ISSUE/DISTRIBUTION OF DOCUMENTS (Quality Manual, Procedures and formats)**

Issue of Quality Manual, Procedures, Work instructions, documents and format is carried out as per section 1.2 of this manual.

The controlled copies are issued to the applicable department along the Procedure Manual Content List (refer applicable procedure manual) by the MR.

MR Maintains Master copy of Quality Manual and Procedures with "Master copy" seal kept rear side of the document. Master Copy seal is kept first page of the syllabus rear side. MR issues copies of Quality Manual and Procedures with "Controlled copy" seal kept front side of the documents. Issue details are recorded in the "Document Issue Register".

### **1.4 REVISION OF QUALITY MANUAL /PROCEDURE/DOCUMENTS/RECORD FORMAT**

Any staff the organization may feel the need for revision of documents.

The need for revision may arise because of any of the following reasons:

- Continuous improvement in system.
- Corrective/preventive action for conformities
- Change in the AICTE/DOTE Norms/University regulations/syllabus
- Internal process improvements.
- Any other unforeseen reasons.

### **Steps to be followed to revise the document**

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<b>Procedure for Control of Documents and Records</b>				
Applicable ISO 9001 Clause Numbers : Documents:4.2.3 and Records:4.2.4				

- When a staff needs revision in the documents, “Document Change Note” - DCN is raised and forwarded to the MR through HOD of concerned department.
- DCN shall be submitted along with copy of existing document (soft copy and hard copy) and draft copy (soft copy and Hard copy) of revised document. MR reviews the impact of change affecting any other documents of the quality management system documentation. If changes required in any other documents it is finalized during the class committee/MRM meetings. If no changes required in the other documents of the QMS, then DCN is forwarded to the document approving authority.
- If the approving authority accepts the change requested, then, MR changes the revision number of the document is changed to the next level (for example 0 to 1) and the revision date is also changed. The decision about revising the whole document or any particular sheet alone is taken by the MR. Whenever a format is revised, revision number is updated both in the formats and Master List of Documents and Records (MR-00).
- MR maintains the soft copy of revised document and deletes the soft copy obsolete documents.
- MR arranges the hard copy of revised documents. Master copy is maintained by the MR and Controlled copy is issued to the HOD of the department.
- Signature is obtained in the “Document Issue Register” as a token of acknowledgement of revised document.
- The HODs shall add the controlled copy of revised document in the existing Procedure Manual file.
- Existing controlled copy if any is destroyed by the HOD.
- MR maintains the DCN attached with obsolete Master copy (hard copy) with sealed as “obsolete copy” for future reference.

### 1.5 Control of Obsolete documents

- The “MASTER COPY” of the superceded copy is identified as “**Obsolete Copy**” and filed with DCN separately for further / knowledge purpose by the MR.
- It is the responsibility of the user to destroy the controlled copies of the superceded documents.
- The details of the amendments are recorded in the DCN.

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<b>Procedure for Control of Documents and Records</b>				
Applicable ISO 9001 Clause Numbers : Documents:4.2.3 and Records:4.2.4				

## 2. External Documents

“List of External Documents” is maintained by the MR/Principal which contains the list of the following types external origin document,

- a. University Syllabus
- b. AICTE Norms
- c. University regulations or circulars
- d. National/International standards
- e. DOTE requirements or circulars/Government G.O
- f. Legal requirements

### 2.1 Issue and Control of Syllabus

1. Syllabus prescribed by University is followed.
2. Master Copy of Syllabus is identified with “**Master Copy**” seal with date and sign. Master Copy seal is kept first page of the syllabus rear side.
3. Xerox copies are issued to the concerned department HODs with issue date and controlled copy seal. Receiver sign is obtained in the “Document Issue Register”.
4. If syllabus is revised by the University, then Latest copy is issued with the seal “**Master Copy**” with date and sign. HOD is responsible to cancel/destroy the old syllabus copies if available in their department.

Master copy of old syllabus is kept in the Obsolete Syllabus file with “**Obsolete Copy**” seal with obsolete date and sign. “Document change note-DCN” is raised and not attached with the obsolete syllabus since the changes are originated by the University.

### 2.2 STANDARDS/AICTE NORMS/UNIVERSTIY REGULATIONS/GOVERNMENT G.O/DOTE LETTERS/LEGAL REQUIREMENTS

These external documents are stored in the “External Document File” along with the “List of External Documents”. Master copy of the these documents are identified with the “**master copy**” rear side of first Page of the document. Master copy is maintained by the Principal. Controlled copy of these documents are not issued but when needed to the staff, Master copy itself issued and the “Document issue register” is updated. Changes

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Applicable ISO 9001 Clause Numbers : Documents:4.2.3 and Records:4.2.4				

document is verified once a year (during admission time) by visiting the issuing body website (or) by telephonic enquiry (or) by sending enquiry letter by the Principal. If it is found that these documents are changed, it is procured/downloaded and the file is updated with Master copy seal. Obsolete documents are stored in a separate file with the status as “**OBSOLETE COPY**”. “Document change note (DCN)” is raised and not attached with these obsolete documents as the changes are originated by the external agency.

### **3 CONTROL OF DOCUMENTS/DATA/RECORDS IN ELECTRONIC MEDIA**

Back up of document/data in electronic media is once a month in an alternate storage media (CD/DVD, Pen drive/External Hard-disc etc.) and are stored in safe & fireproof place. The documents and data in electronic media will be accessible to all the users for reading only. The changes or authorizing the changes to this document and data rights will be given only to the document change authorities. All the computer/supporting peripherals will be protected through uninterrupted power supply and sufficient backup recovery and anti-virus packages.

Storage of any document data/record data in the computer memory is identified in the Master list of documents and Records (MAN-00).

### **4 CONTROL OF RECORDS (4.2.4)**

Records (Level IV of documentation) are special type of documents, which are controlled as follows,

Records applicable for each function are listed in the Master List of Documents Records (MAN-00).

Retention period (max storage period) for each record is **10 years** unless otherwise specified by the University/DOTE. All the records are stored for minimum 10 years. If University/DOTE specifies to maintain the records for more than 10 years the same is followed. Unique codification number and Title as per the list of Documents and Records is identified in the front of the file/register.

All the records are prepared by legible handwriting. All the records are kept in cupboard/racks, etc. to protection them from fire/rain/theft or other damages. For easy retrieval of Records an index is displayed near the record storage area/Cupboard/racks.

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Applicable ISO 9001 Clause Numbers : Documents:4.2.3 and Records:4.2.4				

The MR is authorized to destroy the records after the retention period in consultation with the Management. Records are destroyed by firing under supervision of the management.

- Record code number is given follows  
Department Code-XX  
Where Department code is listed as per section 1.1.3 of this procedure.  
XX-Two digit running serial number

**Note : format code and record code is given with the same code. When format is filled it is called as “record”. Code number of the file which contains the filled format is the same code number which is given to the format.**

#### **5. DOCUMENTS AND RECORDS (4.2.3 AND 4.2.4)**

<b>SL</b>	<b>Description of the Document/Record</b>	<b>Reference Number</b>
1.	Master List of Documents and Record	MAN-00
2.	Document Change Note	MAN-01
3.	Document Issue Register	MAN-02
4.	List of External Documents	MAN-10

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<b>SRI RANGANATHAR INSTITUTE OF ENGINEERING &amp; TECHNOLOGY</b>	Ref	MAN-P2	Rev No	0
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<b>Procedure for Internal auditing</b>				
Applicable ISO 9001 Clause Numbers : 8.2.2.				

## **PURPOSE**

The purpose of this procedure is to ensure that,

- Systematic and comprehensive internal audits are planned and carried out to monitor the effectiveness of the Quality System implementation.
- Corrections/Corrective actions are identified and implemented with respect to the discrepancies observed and recorded during the audits.
- Audits cycle is closed after monitoring the effectiveness of the corrective actions.

## **SCOPE**

The scope of this procedure covers the internal auditing of Quality Management System as per ISO 9001 Standard.

## **RESPONSIBILITY**

It is the responsibility of the Management Representative to ensure that these procedures are implemented effectively.

## **PROCEDURE :**

### **1. INTERNAL AUDITING**

- Internal audit of Quality Management System is carried once in 6 months. The MR has the authority, to change the frequency of the audit based on any complaints, occurrence of non-conformity and the results of previous audit.
- The Management Representative (MR) prepares "Internal Audit Plan" for carrying out internal quality audit. MR ensures that all the functions are included in the Internal Audit Plan.
- Internal Audit is conducted by the Auditors selected by the MR as per the "list of Internal Auditors". Auditor shall not audit their own work.
- MR Prepare "Internal Audit Schedule" for each audit and circulates it to the auditee and auditors involved.
- The MR Representative ensures that the current valid procedures and other applicable documents to the area being audited are available.

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<b>Procedure for Internal auditing</b>				
Applicable ISO 9001 Clause Numbers : 8.2.2.				

- The observations during the Audit are recorded in the “Internal Audit Observation sheet”.
- The Observations are classified as follows:

Positive Point/Conformity : O+  
 Negative Point/Non conformity : O-  
 Opportunity for improvement : OI

- Non conformities (O-)are recorded in the “Internal audit Non conformance Report” also.
- Auditee implements Corrections/Corrective actions within the committed date. MR/Auditor verifies the effectiveness of action taken. The status/effectiveness of action taken is recorded in the “Internal audit Non conformance Report”.

Unresolved actions are discussed in the Management Review Meetings (MR).

#### **Documents and Records (4.2.3 and 4.2.4)**

<b>SL</b>	<b>Description of the Document/Record</b>	<b>Reference Number</b>
1.	List of Internal Auditors	MAN-03
2.	Internal Audit Plan	MAN-04
3.	Internal Audit Schedule	MAN-05
4.	Internal Audit Observation Report	MAN-06
5.	Internal Audit Non Conformance Report	MAN-07

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<b>Procedure for Staff Recruitment</b>				
Applicable ISO 9001 Clause Numbers : 6.2.2				

## **PURPOSE**

The purpose of this procedure is to explain the activities staff recruitment process.

## **SCOPE**

Scope of this procedure includes the staff recruitment process as per AICTE norms.

## **RESPONSIBILITY**

The staff selection committee formed by the Management to handle the staff recruitment process is responsible to implement this procedure effectively.

## **PROCEDURE :**

- a. Competency requirements (minimum qualifications, experience, special requirements) is defined in the AICTE norms (refer annex-1 enclosed). These norms are fulfilled at the time of recruitment of new staff.
- b. A staff selection committee is formed by the management during the selection of new faculty.
- c. Staff selection committee uses the AICTE norms released time to time through AICTE website [www.aicte.ernet.in](http://www.aicte.ernet.in).
- d. Staff selection committee conducts interview to ensure AICTE norms are met by the candidate applied for faculty position.
- e. Staff selection committee verifies the original certificates of qualification, experience and any other supporting evidences.
- f. Staff selection committee give its comments in the Staff profile/Bio-data of the candidate and it is forwarded to the principal/Management.
- g. Staff is appointed based on the comments by the staff committee/Principal management approval.

## **Documents and Records (4.2.3 and 4.2.4)**

<b>SL</b>	<b>Description of the Document/Record</b>	<b>Reference Number</b>
1.	Annex-1 for Procedure for Staff recruitment –As per AICTE norms	Annex-1
2.	Staff Profile file (with certificates of qualifications and experience)	ADM-21

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<b>Procedure for Management Review</b>				
Applicable ISO 9001 Clause Numbers : 5.6				

## **PURPOSE**

The purpose of this procedure is to explain the activities of the Management Review process.

## **SCOPE**

Scope of this procedure is applicable to the Management Review process.

## **RESPONSIBILITY**

MR is responsible to ensure that this procedure is implemented effectively.

## **PROCEDURE :**

### **Management Review Meeting (MRM)**

The Management Review Meeting (MRM) is conducted out once in 6 months.

MRM is conducted at the middle of each semester.

The Management Review is conducted after announcement of university exam results, after collecting student feedback data and after completing the internal audit.

The purpose of the Management Review is to review the QMS effectiveness.

The Top Management reviews the effectiveness of QMS by reviewing Performance of Quality Management System as per the agenda points defined in the "Management Review Minutes" format .

### **Members of Management Review meeting**

- Top Management
- Principal
- MR
- Department HODs (all functions of Office and academic process)

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<b>Procedure for Management Review</b>				
Applicable ISO 9001 Clause Numbers : 5.6				

### **a. Input**

The following points are reviewed in the Management review (agenda for Management review)

- a. Review of Action Planned in the previous Management Review
- b. Review Internal Audit Results and Effectiveness of action taken
- c. Review of Corrective/preventive actions in the Class Committee meeting, counseling section and its effectiveness.
- d. Review of corrective/preventive actions for Students feed back and its effectiveness
- e. Review of actions related to the legal/regulatory requirements
- f. Review of quality policy and objectives and its effectiveness
- g. Changes affecting the quality management system
- h. Quality Improvement program for the staff
- i. Improvement suggestions
- j. Facilities/Resource requirements
- k. Formation of Action plan

### **b. Out put**

Actions planned in each MRM meeting are recorded in the "Management Review Minutes".

### **Documents and Records (4.2.3 and 4.2.4)**

<b>SL</b>	<b>Description of the Document/Record</b>	<b>Reference Number</b>
1.	Management Review Minutes (MRM) file	MAN-08

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<b>Annex-1 for Procedure for Staff Recruitment –AICTE Norms</b>				
Applicable ISO 9001 Clause Numbers : 6.2.2				

This document is the part of Procedure for Staff Requirement MAN-P3

Important note : This annex-1 is downloaded on 06.06.09. Since AICTE may revise the requirements of norms & standards for engineering institute time to time it is always recommended to refer AICTE website for latest/right information.

**Minimum Qualifications and Experience Prescribed by AICTE for Teaching Posts in Degree Level Technical Institution**

**ENGINEERING AND TECHNOLOGY DISCIPLINES**

Sl. No.	Cadre	Qualifications & Experience	Qualifications & Experience for Candidates from Industry & Profession
1.	Lecturer	First Class Bachelor's degree in the appropriate branch of Engineering/Technology OR First Class Master's Degree in the appropriate branch of Engineering (Engg.)/Technology (Tech.). (No minimum experience required).	First Class Bachelor's degree in the appropriate branch of Engineering/Technology OR First Class Master's Degree in the appropriate branch of Engineering (Engg.)/Technology (Tech.) ( No minimum experience required).
2.	Assistant Professor	Ph.D degree with the first class degree at Bachelor's or Master's level in the appropriate branch of Engineering/Technology with 3 years experience in Teaching/Industry/Research at the level of Lecturer or equivalent  OR  First Class Degree at Master's Level in the appropriate branch of Engg./Tech. with 5 year's experience in Teaching/Industry/Research at the level of Lecturer or equivalent. Such candidates will be required to obtain Ph.D degree within a period of 7 years from the date of appointment as Assistant Professor	Candidates from Industry/Profession with First Class Bachelor's Degree/ First Class Master's degree in the appropriate branch of Engineering/Technology AND Professional work which is significant and can be recognized as equivalent to Ph.D degree and with 5 years Industrial/Professional experience would also be eligible.
3.	Professor	Ph.D Degree with first Class Degree at Bachelor's or Master's level in the appropriate branch of Engineering / Technology with 10 years' experience in Teaching/Industry/Research out of which 5 years must be at the level of Assistant	Candidates from Industry/Profession with Master's Degree in Engineering/Technology and with professional work which is significant and can be recognized as equivalent to Ph.D Degree and with 10 years' Industrial/Professional experience of which at least 5 years should be at a Senior Level comparable

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<b>Annex-1 for Procedure for Staff Recruitment –AICTE Norms</b>				
Applicable ISO 9001 Clause Numbers : 6.2.2				

This document is the part of Procedure for Staff Requirement MAN-P3

		Professor and/or equivalent.	to that of an Assistant Professor, would also be eligible
4.	Principal Head of the Department	Qualifications as per the qualifications of the Professor in the respective discipline. In addition, the candidate should be an eminent person in the field with 15 years' experience in Teaching/Industry/Research out of which 5 years must be at the level of Professor or above.	Candidates from Industry/Profession with Master's Degree in Engineering/Technology and with professional work which is significant and can be recognized as equivalent to Ph.D degree and with 15 years' Industrial/Professional experience of which at least 5 years should be at a Senior Level comparable to that of a Professor would also be eligible.  Desirable: Administrative Experience in a responsible position

**Note:**

If a class/division is not awarded at B.E./B.Tech./M.E./M.Tech./Equivalent Degree, a minimum of 60% marks in aggregate shall be considered equivalent to first class/division. If a Grade Point system is adopted, the CGPA will be converted into equivalent marks and minimum CGPA shall be 6.75 in the ten point scale. In the discipline of Computer Science & Engineering/Technology, in lieu of the "First Class Degree at Bachelor's and/or Master's Level in appropriate branch, "a first class Master's Degree in Computer Science & Engineering/Technology together with a First Class Bachelor's Degree in any area of Engineering/Technology will be acceptable.

**Minimum Qualification and Experience Prescribed by AICTE for Teaching Post in Degree Level Technical Institutions.**

**HUMANITIES AND SCIENCES DISCIPLINES**

Sl. No	Cadre	Qualification	Experience
1.	Lecturer	Good Academic record with at least 55% of marks OR an equivalent CGPA at the masters degree level in their relevant subject from an Indian University, OR an equivalent degree from a foreign University.  Besides fulfilling the above qualifications, candidates should have cleared the National Eligibility test (NET) for Lecturers conducted by the UGC, CSIR, or Similar tests accredited by the UGC.	No Minimum requirement.

Approved by:

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2.	Assistant Professor	Good Academic record with at least 55% of marks OR an equivalent CGPA at the masters degree level and Ph.D degree in the relevant subject.	5 years experience in Teaching and /or Research excluding the period spent for obtaining the degrees and has made some mark in the areas of Scholarships as evidenced by quality of Publications, contribution to educational innovation, design of new course and curricula.
3.	Professor	Good Academic record with at least 55% of marks OR an equivalent CGPA at the masters degree level and Ph.D degree in appropriate branch of Humanities and Sciences (Desirable : Post Doctoral Work in appropriate branch of Humanities and Science)	10 years experience of which at least 5 years should be at the senior level comparable to that of a Assistant Professor in Post graduate teaching, and/or experience in research at the University, National level Institutions, including experience of guiding research at Doctoral level.

1. Note : If a grade point system is adopted the CGPA will be converted into equivalent
2. marks and minimum CGPA shall be 6.75 in the ten point scale.

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**Minimum Qualification and Experience Prescribed by AICTE for Teaching Post in Degree Level Technical Institutions.  
LIBRARIAN.**

**I. College Librarian (Lecturer Scale)**

**Minimum Qualification**

- i. Qualifying in the national-level test conducted for the purpose by the UGC or any other agency approved by the UGC
- ii. Master's degree in library science/ Information science/ documentation or an equivalent professional degree with at least 55% of the marks or its equivalent CGPA and consistently good academic record, computerization of library.

**II. College Librarian (Senior Scale)**

- i. Master's degree in library science/ Information science/ documentation with at least 55% of the marks or its equivalent CGPA and consistently good academic record.
- ii. Five year's experience as a College Librarian.
- iii Evidence of innovation library services, published work and professional commitment, computerization of library.

**Desirable**

M.Phil / Ph.D degree in library science / Information science / documentation / archives and manuscript-keeping, computerization of library.

**III. College Librarian (Selection Grade)**

Master's degree in library science/ Information science/ documentation with at least 55% of the marks or its equivalent CGPA and consistently good academic record.

- i. At least 18 years experience as a College Librarian.
- ii. Evidence of innovation library services and organization of published work.

**Desirable**

M.Phil / Ph.D degree in library science / Information science / documentation /

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archives and manuscript-keeping.

## **DIRECTOR - PHYSICAL EDUCATION.**

### **I. Director of Physical Education (Lecturer Scale)**

- i. A Master's degree in Physical Education (two year course) or Master's degree in Sports or an equivalent degree with at least 55% of the marks or its equivalent CGPA and consistently good academic record.
- ii. Record of having represented the university / college at the inter-university/ inter collegiate competitions or the State in national championships.
- iii. Passed the Physical fitness test.
- iv. Qualifying in the national test conducted for the purpose by the UGC or any other agency approved by the UGC.

### **II. Director of Physical Education (Senior Scale)**

- i. Should have completed 6 years of service as University Assistant DPEs/ College DPEs with a benefit of 2 years for Ph.D and one year for M.Phil Degree holders.
- ii. Passed the Physical fitness test.
- iii. Should have attended at least one orientation course and one refresher course of about 3 to 4 weeks' duration each with proper and well-defined evaluation procedure (exemption from one refresher course is granted to Ph.D degree holders)

### **III. Director of Physical Education (Selection Grade)**

- a. Completed 5 years of service as University Assistant DPE / College DPE in the senior -scale.
- b. Has attended at least 2 refresher courses of about 3-4 weeks duration with proper and well-defined evaluation procedure.
- c. Shown evidence of having produced good teams/ athletes and having organized and conducted coaching camps of at least 2 weeks' duration.
- d. Passed the physical fitness test.

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- e. Consistently good appraisal report.

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