



SCMS SCHOOL OF TECHNOLOGY AND MANAGEMENT (SSTM)
SCMS Campus, Prathap Nagar, Muttom, Aluva, COCHIN- 683 106. KERALA

CRITERIA 6
GOVERNANCE, LEADERSHIP AND MANAGEMENT

6.5: Internal Quality Assurance System



6.5.2: Quality assurance initiatives of the institution
NIRF report & AAA report





NIRF Participation



National Institutional Ranking Framework
Ministry of Education
Government of India

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Academic and Administrative Audit (ISO)






AUDIT REPORT N° 21 IQ 65 MQ

ORGANISATION
Organisation name PRATHAP FOUNDATION FOR EDUCATION AND TRAINING
Registered address SCMS CAMPUS, PRATHAP NAGAR, MUTTOM, ALUVA, 683 106 KOCHI (32), INDIA
Name and address of the sites subject to certification ¹ SCMS SCHOOL OF TECHNOLOGY AND MANAGEMENT, PRATHAP NAGAR, MUTTOM, ALUVA Kochi (32), INDIA SCMS SCHOOL OF TECHNOLOGY AND MANAGEMENT SCMS SCHOOL OF TECHNOLOGY AND MANAGEMENT, PRATHAP NAGAR, MUTTOM, ALUVA, KOCHI 683106, KERALA, INDIA

ACTIVITIES, PRODUCTS AND/OR SERVICES UNDER AUDIT
POST GRADUATE EDUCATION IN MANAGEMENT [MBA], COMPUTER APPLICATIONS [MCA AND IMCA], AND MOLECULAR BIOLOGY AND GENETIC ENGINEERING [M.SC.] AFFILIATED TO M. G. UNIVERSITY. UNDER GRADUATE EDUCATION IN COMMERCE [B.COM], ECONOMICS [B.A.], COMPUTER APPLICATION [BCA] AND BOTANY AND BIOTECHNOLOGY [B.SC] AFFILIATED TO M.G. UNIVERSITY.
POST GRADUATE EDUCATION IN MANAGEMENT [MBA], COMPUTER APPLICATIONS [MCA AND IMCA], AND MOLECULAR BIOLOGY AND GENETIC ENGINEERING [M.SC.] AFFILIATED TO M. G. UNIVERSITY. UNDER GRADUATE EDUCATION IN COMMERCE [B.COM], ECONOMICS [B.A.], COMPUTER APPLICATION [BCA] AND BOTANY AND BIOTECHNOLOGY [B.SC] AFFILIATED TO M.G. UNIVERSITY.
IAF sector: 37 / 85.42

AIM OF AUDIT: ASSESSMENT OF MANAGEMENT SYSTEM CONFORMITY TO ISO 9001:2015
Audit criteria used as reference: requirements of the reference standard for the audit, policies, procedures and documented information of the Organisation Other standard: NA
The audit team has evaluated and accepted the justification provided by the Organisation about non-applicable clause of the rule: CLAUSE 8.3 DESIGN AND DEVELOPMENT IS NOT APPLICABLE IN THE SSTM QUALITY MANAGEMENT SYSTEM, SINCE THE CURRICULUM FOLLOWS THE UNIVERSITY GUIDELINES.

AUDIT	Type: Periodic audit	Start date: 24/03/2021	End date: 24/03/2021	Man/days: 1
Extension activity description (if applicable): NA				

AUDIT TEAM	POSITION
VIJAY MATHEW	Team Leader 

COMPANY REPRESENTATIVES	OPENING MEETING	CLOSING MEETING	POSITION
DR. INDU NAIR	X	X	GROUP DIRECTOR
DR. G SASHIKUMAR	X	X	PRINCIPAL
DR. SHERIN ALEX	X	X	VICE PRINCIPAL/MR
MS. SHYLA KRISHNAKUMAR	X	X	HR HEAD
MS. RADHA JAYARAMAN	X	X	ADMISSION HEAD
DR. SETHU LEKSHMI S NAIR	X	X	DEPT. DIRECTOR - SIBBR&D
MR. GEORGE JOSEPH	X	X	PLACEMENT HEAD
MR. JAYADEVAN T D	X	X	PURCHASE MANAGER
MS. CHANDANAMARI	X	X	LIBRARIAN

ORGANISATION'S REFERENCE DOCUMENTS	Rev.	of
QUALITY SYSTEM MANUAL	06, ISSUE 01	30/01/2020

PREVIOUS AUDIT REPORTS	N°	of
	20 IQ 118 MQ	10/07/2020

¹ Indicate the sites under under that are shown on the certificate, identifying the type of each (e.g. factory, warehouse, offices of...)



AUDIT REPORT N° 21 IQ 65 MQ

CHANGES WITH RESPECT TO THE PREVIOUS AUDIT	UNCHANGED	CHANGED		REMARKS
		C	NC	
COMPANY NAME	X			
SCOPE	X			
ORGANISATIONAL STRUCTURE	X			
OPERATIONAL YARDS	X			
LIST OF APPLICABLE LAWS/STANDARDS	X			
MANAGEMENT SYSTEM DOCUMENTS	X			
STAFF (*)	Figure actual:45	X		NA

(*) in case of fluctuations in the number of staff, enter the average number of staff for the year declared by the Organisation

Have the corrective actions implemented by the Organisation on the basis of the findings (type A and/or B) set out below as per the previous audit report been verified?(indicate):

NA

Has the Organisation resolved the Recommendations (type-C findings) set out below as per the previous audit report?(indicate):

ALL RECOMMENDATIONS ARE ADDRESSED. FOUND OK.

Permanent sites checked during this audit

Address	Activity performed	Date
SCMS SCHOOL OF TECHNOLOGY AND MANAGEMENT, PRATHAP NAGAR, MUTTOM, ALUVA Kochi (32), INDIA	AS PER SCOPE	24/03/2021

Temporary site checked during this audit

Address	Activity and/or service performed	Date
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Description of other outsourced activities audited by survey

NA

Any activities audited on the basis of documents

LEGAL DOCUMENTS.

AUDIT RESULTS		
Have any major non-conformities been raised (type A)?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	0
Have any minor non-conformities been raised (type B)?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	0
Have any recommendations been raised (type C)?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	0

Identification of audit results (evidences, strength points, positive elements, comments to any NCs raised during the audit):

THE ORGANIZATION HAS FOLLOWING THE 9001:2015 STANDARDS SINCE 2018. THE SAME IS EVIDENT FROM THE ORGANIZATIONS QUALITY SYSTEMS MANUAL, INTERNAL AUDIT DOCUMENTS AND MANAGEMENT REVIEW MINUTES. THE ORGANIZATION HAS CONTROLLED COPIES OF THE MANUAL INCLUDING THE MASTER COPY. RINA HAS VERIFIED THE MANUAL AND FOUND THAT IT IS IN ACCORDANCE WITH THE 9001:2015 STANDARDS. VERIFIED THE LEGAL DOCUMENTS [FILE NO ML-02] REGISTER ISSUE 01, REVISION NO. 03. CHECKED THE AICTE APPROVAL AND MAHATMA GANDHI UNIVERSITY APPROVAL. FOUND VALID. THE MANUAL AND PROCEDURES ARE FOUND COMMUNICATED TO ALL DEPARTMENTS. THE UNDERSTANDING OF PERSONNEL TOWARDS THE QMS WAS FOUND ADEQUATE.

THE DESCRIPTION OF THE INTERACTION BETWEEN THE PROCESSES OF THE QUALITY MANAGEMENT SYSTEM IS GIVEN IN THE QUALITY MANUAL. PROCEDURES ARE FOUND TO BE ADEQUATE. RESPONSIBILITY & AUTHORITY FOR EACH ROLE IS GIVEN IN QUALITY MANUAL. ALL CLAUSES OF THE STANDARD HAVE BEEN ADEQUATELY ADDRESSED AND EXCLUSIONS CLAIMED FOR 8.3. THE PROCESS MAPPINGS AND PROCEDURES WERE VERIFIED AND FOUND TO MEET THE REQUIREMENTS OF THE ENTIRE CLAUSES STANDARD. RECORDS OF REALIZATION OF REQUIREMENTS OF PRODUCT REALIZATION, CORRECTIVE ACTION, RISK ANALYSIS ARE MAINTAINED.

LEADERSHIP: TOP MANAGEMENT IS COMMITTED IN ENSURING IMPLEMENTATION OF THE STANDARD REQUIREMENTS AND COULD ABLE TO DEMONSTRATE THE CONTINUAL IMPROVEMENT. QUALITY POLICY AND OBJECTIVES WERE FIXED AND REVIEWED IN ACHIEVING THE ORGANIZATION VISION AND GOAL. TOP MANAGEMENT IS COMMITTED TOWARDS THE COMPLIANCE OF LEGAL AND REGULATORY REQUIREMENTS. VERIFIED THE LEGAL DOCUMENTS FILE WITH RESPECT TO THE ORGANIZATION. FOUND IN COMPLIANCE. THE ORGANIZATIONS QUALITY OBJECTIVES ARE WELL COMMUNICATED THROUGHOUT THE ORGANIZATION AS WELL AS TO THE STAKEHOLDERS. ALL THE EMPLOYEES ARE TRAINED AND ARE EQUIPPED WITH THE CONCEPT OF RISK BASED THINKING. GOOD ENVIRONMENT MAINTAINED WITH WELL LIGHT AND VENTILATED CLASSROOMS. ADEQUATE RESOURCES PROVIDED. STUDENT PLACEMENT CELL IS VERY EFFECTIVELY FUNCTIONING. OTHER PROCESS OF TAKING FEEDBACK IS VERY TRANSPARENT. EFFECTIVE MONITORING AND EVALUATION PROCESS IS FORMULATED. ADDRESS THE FEEDBACK EFFECTIVELY. VERIFIED THE UNIVERSITY CALENDAR FOR THE ACADEMIC YEAR 2020-21 VERIFIED. CHECK THE TIMETABLES OF PRESENT BATCHES. COURSE CODE IS MENTIONED. CHANGES ARE INFORMED WELL IN ADVANCE. VERIFIED THE LIBRARY AND LABORATORY; WELL MAINTAINED. VERIFIED THE MESS AND HOSTEL FACILITY IS NOT OPERATIONAL DUE TO COVID 19. VERY GOOD LAB INFRASTRUCTURES. ALL NECESSARY EQUIPMENT ARE AVAILABLE. PERIODIC MAINTENANCE ARE PERFORMED. THE AMC RECORDS/SERVICE REPORTS WRT TO ANNUAL MAINTENANCE OF CONTRACT FOR AIR CONDITION VERIFIED. FOUND AS PER PROCEDURES. ORGANIZATION RETAINS PERSONAL FILE FOR EACH EMPLOYEES. VERIFIED THE PERSONAL FILE OF FEW EMPLOYEES. FURTHER, THE ORGANIZATION PROVIDES TRAINING TO THE EMPLOYEES. VERIFIED THE TRAINING RECORD. THE TEAM VERIFIES THE TRAINING RECORDS OF MS. MANJU. TEAM HAS ALSO VERIFIED THE QMS AWARENESS STATUS OF THE EMPLOYEES. VERIFIED THE TRAINING RECORDS ISO 9001: 2015 AWARENESS TRAINING. FOUND EFFECTIVE.

ADMISSION: CHECKED THE ADMISSION SUPERVISORY COMMITTEE CIRCULAR/GUIDELINES FOR PROFESSIONAL COLLEGES IN KERALA DATED ASC/100/20/MBA/SSTM. CHECKED THE ADMISSION GUIDELIEN W.R.T. MG UNIVERSITY REFERENCE NO. 6055/AIV/2/2018/ACCADEMIC DATED 09/08/2018 (PERVALING DOCUMENT). CHECKED THE INTERVIEW AND SELECTION PROCESS. VERIFIED THE DOCUMENTS OF GROUP DISCUSSION (GD) AND PERSONAL INTERVIEW (PI) CONDUCTED FOR MBA. OTHER COURSES ADMISSION ARE PERFORMED AS PER GOVT. OF KERALA REGULATION/MG UNIVERSITY REGULATIONS. VERIFIED THE GD EVALUATION SHEET. THERE WERE PANEL MEMBERS EVALUATED THE PROCESS. VERIFIED THE EVALUATION SHEETS. PARAMETERS WERE DEFINED. VERIFIED THE DOCUMENTS RELATED TO THE ADMISSION FOUND THAT ALL THE DOCUMENTS VERIFIED AND ARE IN LINE WITH THE ELIGIBILITY REQUIREMENTS. TEAM CONFIRM THAT THE PROCESS IS EXECUTED IN LINE WITH THE REQUIREMENTS OF STANDARD.

ACADEMICS ACTIVITIES: COURSE PLAN VERIFIED FOR THE YEAR 2020-21 W.R.T. B.SC BOTONY AND BIOTECHNOLOGY AND M.SC MOLECULAR BIOLOGY & GENETIC ENGINEERING. CHECKED THE ASSESSMENT AND COURSE EVALUATION RECORDS. THE PROGRAMME STRUCTURE OF M.SC COURSE. INTERNAL ASSESSMENT CRITERIA MENTIONED FOR ALL COURSES. CHECKED THE LESSON PLAN W.R.T. LIST OF ELECTIVE PAPERS OF III & IV SEMESTER. CHECKED BS030102 MOLECULAR ORGANIZATION OF CHROMOSOME SYLLABUS DETAILS AND CREDIT DETAILS. CHECKED THE ASSIGNMENT AND PROJECT DETAILS OF B.SC STUDENTS. VERIFIED THE ASSIGNMENT PRESENTATION OF LISONY JOSHY AND TITO THOMAS DANIEL. SUBJECT RECORD THEORY VERIFIED. FOUND OK. PERSENTLY ONLINE CLASSES ARE CONDUCTED. SUFFICIENT INFRASTRUCTURE TO PERFORM THE SAME IS AVAILABLE. CHECKED THE INTERNAL EXAM DETAILS W.R.T. BSC AND MSC. RESULT ANALYSIS IS PERFORMED. CHECKED THE RESULT ANALYSIS RECORDS W.R.T. ALL DEPARTMENTS. FOUND OK. COURSE SYLLABUSES ARE VERIFIED FOR ALL THE COURSES. TEAM VERIFIED ACADEMIC DEPT. MANUAL (CRITERIA FOR REVIEW AND APPROVAL OF THE PROCESS & USE OF SPECIFIC METHODS AND PROCEDURES), LAB. MANUAL (APPROVAL OF EQUIPMENT AND QUALIFICATION OF PERSONNEL). TEAM CHECKED THE PROJECT WORK DETAILS FOR MSC. VERIFIED THE ATTENDANCE SHEET OF PRESENT BATCH OF BSC, AND MSC. TEAM CHECKED THE RISK MITIGATION REGISTER W.R.T. ACADEMICS. THE COURSE CONDUCTED AS PER THE APPROVAL REQUIREMENTS OF AICTE AND MG UNIVERSITY COURSE SYLLABUS. VERIFIED THE COURSE PLAN FOR THE PRESENT BATCH FOR BSC AND MSC. STAFF/FACULTY EVALUATED AND VALIDATED AS PER THE PROCEDURE. EXAMINATIONS ARE CONDUCTED AS PER THE AICTE AND MG UNIVERSITY NORMS. THE PERPERATION W.R.T. CONDUCTION OF EXAM VERIFIED; FOUND AS PER THE REQUIREMENT. VERIFIED COURSE PLAN AND MINUTES OF DEPARTMENT MEETINGS. FOUND OK. ACADEMICS ARE MANAGED AS PER PROCEDURE.

PURCHASE & PROCUREMENT: PURCHASE IS FROM APPROVED VENDORS; AND ARE EVALUATED PERIODICALLY. VENDOR RATING IS PERFORMED. COMPARATIVE STATEMENTS ARE MADE. VERIFIED THE COMPARATIVE STATEMENTS. FOUND AS PER THE PROCEDURE. VERIFIED THE VENDOR EVALUATION RECORDS.



AUDIT REPORT N° 21 IQ 65 MQ

CORRECTIVE ACTION & RISK ANALYSIS: EFFECTIVENESS OF THE CORRECTIVE ACTIONS TAKEN ON THE INTERNAL AUDIT NON-CONFORMITIES WAS VERIFIED AND FOUND TO BE SATISFACTORY. THERE WAS NO REPETITIVE KIND OF NON-CONFORMANCE OBSERVED DURING THE INTERNAL AUDITS, AND IMPROVEMENT IN THE QUALITY MANAGEMENT SYSTEM IS EVIDENCED. THE ORGANIZATION HAS ALSO PERFORMED A DETAILED RISK ANALYSIS BASED ON THE EXTERNAL AND INTERNAL FACTORS. FOUND EFFECTIVE.

THE INTERVIEW STAFF WELL AWARE OF THE QMS AND RELEVANCE OF THE SAME TO THE AREA OF THEIR ACTIVITY. QUALITY POLICY ADEQUATE AND WELL COMMUNICATED ALL APPLICABLE LEGAL REQUIREMENTS IDENTIFIED AND COMPLIED. QMS IS VERY WELL MAINTAINED THROUGH MANAGEMENT REVIEWS AND INTERNAL AUDITS AS PER ANNUAL PLAN. THE PROCESS IS MANAGED BY THE TOP MANAGEMENT AND MANAGEMENT REPRESENTATIVE. MANAGEMENT HAS SET QUALITY POLICY WHICH SUITS TO THE TYPE AND NATURE OF THE ORGANIZATION. MEASURABLE QUALITY OBJECTIVES ARE DEFINED AND IN CONSISTENT WITH THE POLICY. MANAGEMENT REPRESENTATIVE WAS FOUND TO BE WELL AWARE OF ROLES AND RESPONSIBILITIES. OVERALL, IT WAS OBSERVED THAT THE MANAGEMENT IS COMMITTED TOWARDS ACHIEVING CONTINUAL IMPROVEMENT WITH IMPROVING EFFECTIVENESS OF THE SYSTEM. EFFECTIVE MAINTENANCE OF ALL THE PROCESS EVIDENCED.

Management of claims received by the Organisation and of claims received by the CB (to be filled in the presence of claims):
NO CLAIMS RECEIVED BY THE ORGANIZATION AND RINA.

SPECIFIC INFORMATION RELATED TO THE SCHEME

CONTEXT OF THE ORGANIZATION IS DEFINED. NEEDS AND EXPECTATIONS OF INTERESTED PARTIES ARE IDENTIFIED AND DOCUMENTED. THE ORGANIZATION HAS DETERMINED THE EXTERNAL AND INTERNAL ISSUES THAT ARE RELEVANT. THE ORGANIZATION DEFINED A MECHANISM TO MONITOR AND REVIEW THE INFORMATION ABOUT THE EXTERNAL AND INTERNAL ISSUES. THE TEAM HAS CHECKED THE RISK MITIGATION REGISTERS WHICH IS MAINTAINED DEPARTMENT WISE.



AUDIT REPORT N° 21 IQ 65 MQ

CONCLUSIONS OF THE AUDIT TEAM	
During the opening meeting, the company's top management was reminded of the importance of the expected outcome of an organisation with a management system with accredited certification. The audit was carried out by sampling the available information, verifying the processes/aspects defined by the organisation and the requirements of the reference standard; the absence of findings does not ensure the total absence of abnormal conditions in the audited areas and/or in other areas.	
Has the audit team verified all processes/aspects, organisational and functional units indicated in the audit plan?	YES <input type="checkbox"/> NO <input type="checkbox"/>
Reason for any deviations from the audit plan and any significant issues affecting the audit programme:	
Evidences concerning the management system capability to meet the applicable requirements and achieve the expected goals and evidences concerning the internal audit process and management review THE ORGANIZATION PERIODICALLY REVIEW, ANALYSE AND EVALUATE THE OUTCOME OF INTERNAL AUDITS, MANAGEMENT REVIEW MEETING. INTERNAL AUDIT IA SCHEDULE FROM 25/01/2021 TO 29/01/2021 VERIFIED. LAST IA PERFORMED IN JANUARY, 2020 COVERING ALL DEPARTMENTS. THE INTERNAL AUDIT OBSERVATION SHEETS AND MINUTES OF MANAGEMENT REVIEW MEETING ARE CHECKED. LAST MRM ORGANIZATION MAINTAINS AN NC FILE AND RETAIN ALL THE DOCUMENTS WITH RESPECT TO THE CLOSURE/ADDRESSING OF THE SAME. THE DETAILS CONTAINS (CORRECTION, ROOT CAUSE ANALYSIS, CORRECTIVE ACTION ETC.) ORGANIZATION ALWAYS LOOKS FOR IMPROVEMENT OPTIONS. THE SAME IS EVIDENT FROM THE MRM MINUTES. THERE IS A POSITIVE IMPROVEMENT TREND TOWARDS THE CONTINUAL IMPROVEMENT OF THE QMS OF THE ORGANIZATION. ALL THE OBSERVATIONS GIVEN DURING THE LAST AUDIT HAS ADDRESSED EFFECTIVELY. LAST MRM PERFORMED ON MRM 10/02/2021.	
In the audit team's judgement, does the Organisation effectively monitor the use of the logo and the advertisement of its management system?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
Does the audit team confirm that the audit objectives have been achieved?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
In the audit team's judgement, is the certification scope adequate?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
In the audit team's judgement, is the Organisation's Management System, as a whole, effective and compliant with the requirements of the standard and the reference certification Rules?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
Does the audit team propose the Organisation for certification/recertification or certification validity confirmation?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>



AUDIT REPORT N° 21 IQ 65 MQ

The Audit Team considers that the next Periodic audit within .././.... or within 12 months from this audit for the following reasons (only fill in if the proposed date is less than 12 months after this audit):

The Organisation undertakes to inform RINA about the corrective actions it decides on and the relevant implementation deadlines within ... days from this audit.

The Organisation may propose corrective actions and the relevant implementation deadlines immediately after receiving the audit report from the Audit Team, but it must bear in mind that the Certification Body may modify the report and the attached findings after checking them. In this case, the Organisation may be required to propose the corrective actions once again and the relevant implementation deadlines.

The Organisation may also propose the corrective actions and the dates for their implementation using the Member Area.

Information and additional remarks

QMS IS WELL MAINTAINED.

SPACE RESERVED FOR THE ORGANISATION

The Organisation accepts the contents of this audit report, including the attached findings and recommendations (if any).

RESERVATIONS AND OBSERVATIONS

SIGNATURE OF THE ORGANISATION'S REPRESENTATIVE FOR ACCEPTANCE

DR. SHERIN ALEX

SIGNATURE OF TEAM LEADER

VIJA MATHIEW



ORGANISATION

PRATHAP FOUNDATION FOR EDUCATION AND TRAINING

**RESULT OF FINDINGS OF PREVIOUS AUDIT REPORT
No. 20 IQ 118 MQ**

AUDIT REPORT N° 21 IQ 65 MQ

N°.	RECOMMENDATIONS	ORGANISATION'S ACTIONS
1	Para 8.2 ACCEPTED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO THE ORGANIZATION HAS AS ONLINE APPLICATION SYSTEM W.R.T. ADMISSION. HOWEVER, THE ELIGIBILITY CRITERIA MAY BE LINKED WITH THE ONLINE APPLICATION SYSTEM. EXAMPLE: IF THE MINIMUM REQUIPMENT FOR APPLYING FOR ANY PARTICULAR COURSE IS 50% MARKS, A CANDIDATE WITH LESS THAN THIS CRITERIA SHOULD NOT BE ABLE TO FORWARD THE APPLICATION (I.E. LIMIT SETTING MAY BE IMPLEMENTED).	Noted

Signature of Team Leader

VINAY MATHEW

**Quality audit reports/certificate as applicable
and valid for the assessment period**



NATIONAL BOARD OF ACCREDITATION

NBCC Place, East Tower, 4th Floor, Bhisham Pitamah Marg,
Pragati Vihar, New Delhi-110 003
Tel: +91 11 2436 0620-22, 2436 0654 ; Telefax: +91 11 4308 4903
Website: www.nbaind.org



File No. 26-80-2018-NBA

Date: 14-10-2019

To
The Principal
SCMS School of Technology and Management,
SCMS Campus, Prathap Nagar, Muttom,
Aluva, Cochin-683106, Kerala

Subject: Accreditation status of Management program applied by SCMS School of Technology and Management, SCMS Campus, Prathap Nagar, Muttom, Aluva, Kochi-683106, Kerala.

Sir,

This has reference to your Application ID No. **2999-26/06/2018** seeking accreditation by National Board of Accreditation to MBA program offered by **SCMS School of Technology and Management, SCMS Campus, Prathap Nagar, Muttom, Aluva, Cochin -683106, Kerala.**

2. An Expert Team conducted on-site evaluation of the program from **07th to 08th June, 2019**. The report submitted by the Expert Team was considered by the concerned Committees constituted for the purpose in NBA. The competent authority in NBA has approved the following accreditation status to the program as given in the table below:

S. No.	Name of the Program(s) (PG)	Basis of Evaluation	Accreditation Status	Period of validity	Remarks
(1)	(2)	(3)	(4)	(5)	(6)
1.	Masters in Business Administration	July, 2017 Document	Accredited (590 marks awarded by the Visiting Team increased to 600 as per the observations made and indicated in the Annexure to this letter)	Academic Years 2019-2020 to 2021-2022 i.e., upto 30-06-2022	Accreditation status granted is valid for the period indicated in Col.5 or till the program has the approval of the competent authority, whichever is earlier.

3. It may be noted that only students who graduate during the validity period of accreditation, will be deemed to have graduated with an NBA accredited degree.

4. The accreditation status awarded to the program as indicated in the above table does not imply that the accreditation has been granted to **SCMS School of Technology and Management, SCMS Campus, Prathap Nagar, Muttom, Aluva, Cochin-683106, Kerala** as a whole. **As such, the Institution should nowhere along with its name including on its letter head etc. write that it is accredited by NBA because it is programme accreditation and not Institution accreditation. If such an instance comes to NBA's notice, this will be viewed seriously.** Complete name of the program(s) accredited, level of program(s) and the period of validity of accreditation, as well as the date from which the accreditation is effective should be mentioned unambiguously whenever and wherever it is required to indicate the status of accreditation by NBA.

5. The accreditation status of the above program is subject to change on periodic review, if needed by the NBA. It is desired that the relevant information in respect of accredited program as indicated in the table in paragraph 2, appears on the website and information bulletin of the Institute.

Contd./-

6. The accreditation status awarded to the program as indicated in table in paragraph 2 above is subject to maintenance of the current standards during the period of accreditation. If there are any changes in the status (major changes of faculty strength, organizational structure etc.), the same are required to be communicated to the NBA, with an appropriate explanatory note.

7. A copy each of Report of Chairman of the Visiting Team and Evaluators' report in respect of the above program is enclosed.

8. If the Institute is not satisfied with the decision of NBA, it may appeal within thirty days of receipt of this communication giving reasons for the same and by paying the requisite fee.

Yours faithfully,



(Dr. Anil Kumar Nassa)
Member Secretary

Encls.: 1. Copy of Report of Chairman of the Visiting Team.
2. Copy of Expert Report of the Visiting Team.

Copy to:

1. The Registrar
Mahatma Gandhi University,
Priyadarsini Hills, Kottayam, Kerala-686560
2. Director Technical Education
Govt. of Kerala
Thiruvananthapuram, Kerala
3. Accreditation File
4. Master Accreditation file of the State