

Broj ugovora/ Contract numbers:	UG-14-119/	EA scope: 37	Broj certifikata/ Cert. number.: 7466
Poduzeće/ Organization:	SVEUČILIŠTA U ZAGREBU - AGRONOMSKI FAKULTET University of Zagreb - Faculty of Agriculture		
Adresa/Address:	Svetošimunska cesta 25, 10000 Zagreb, Croatia		
Norma/ Standards:	ISO 9001:2008		
Predstavnik poduzeća /Company representatives:	Petra Doležalova, Stručni suradnik u tajništvu Fakulteta i QM		
Broj auditiranih lokacija/ Visited sites:	1	Datum audita/ Audit date:	14.10.2015.
Efektivan broj zaposlenih/ Effective number of employees:	36 (35% ukupnog broja zaposlenika)	Broj smjena/ Number of shifts:	1
Vodeći auditor/ Lead auditor:	Marjeta Miholić Jeić	Auditor/i: Auditor/s:	-
Prilikom dostave pismenog izvještaja s audita izjavljujemo da su sudionici audita bili obaviješteni o obavezama auditora certifikacijskog tijela o apsolutnoj nepristranosti i privatnosti, a nakon provedbe audita o povjerljivosti. With the in writing delivered audit announcement the audit participants were informed about the obligation of the auditor/ auditors of the certification body to absolute impartiality and privacy, while and after the auditing activity for confidentiality.			

Izveštaj s certifikacijskog audita/ Report certification audit:	<input type="checkbox"/>	Broj audit dana/ Number of audit days:
Izveštaj s nadzornog audita: Report surveillance audit	<input checked="" type="checkbox"/> s1 <input type="checkbox"/> s2	Broj audit dana/ Number of audit days: 0.65
Izveštaj s re-certifikacijskog audita: Report recertification audit	<input type="checkbox"/>	Broj audit dana/ Number of audit days:

1. Ciljevi audita/ Audit objectives:

Ciljevi audita su/ The objectives of the audit are:

- **potvrditi, da je sustav upravljanja u skladu sa svim relevantnim zahtjevima norme/**
to confirm, that the management system conforms to all relevant requirements of the standard;
- **potvrditi, da je organizacija učinkovito implementirala opisan sustav upravljanja/**
to confirm, that the organization has effectively implemented the described management system;
- **potvrditi, da je sustavom upravljanja moguće postići ciljeve navedene u Politici poduzeća/**
to confirm, that the management system is able to achieve the objectives of the enterprise policy.

2. Opseg certifikacije (područje djelovanja) Scope of certification (field of activity)

Opseg sustava upravljanja – hrvatski/ Scope management system - Croatian:	Upravljanje fakultetom i pružanje usluga korisnicima vezano za akademsko obrazovanje, gospodrastvo te znanstveno istraživački rad
Opseg sustava upravljanja – engleski/ Scope management system - English:	<i>College management and service offers to users regarding academic education and economy and scientific and research work</i>
EA code:	EA 37
Isključenja (samo za ISO 9001): Exclusions (only for ISO 9001):	7.3. Razvoj i projektiranje 7.3 Design and development 7.5.2 Validacija procesa proizvodnje i pružanja usluga 7.5.2 Validation of processes for production and service provision 7.6 Nadzor opreme za praćenje i mjerenje 7.6 Control of monitoring and measuring equipment
Broj originalnih certifikata: The number of the original certificates:	1 certifikat na engleskom jeziku, 1 na hrvatskom jeziku 1 certificate in English, 1 certificate in Croatian
Logo tvrtke na certifikatu: Logo of company on certificate:	-

3. Rezultati audita i pronalasci/Current findings and assessments

Auditor/Auditori su proveli proces orijentirajući audit na značajna obilježja, rizike i/ili ciljeve.

Metode audita su intervjui, promatranja i pregled dokumenata i zapisa.

The auditor/auditors conducted a process oriented audit with focus on significant features, risks and/or objectives. The audit methods were interviews, observations and review of documents and records.

Audit je proveden prema prethodno dostavljenom planu audita poduzeću. Audit tim potvrđuje da je organizacija uspostavila i održava sustav upravljanja koji ispunjava zahtjeve i principe norme koji omogućuje organizaciji sustavno ispunjavanje bitnih zahtjeva vlastite Politike za proizvod i uslugu.

The audit was performed according to the previous audit program submitted to the company. The audit team confirmed that the organization has set up and maintains a management system, which meets the requirements and the principle of the standard which enables the organization to systematically meet the relevant requirements of its own policy for products and services.


DA (yes) NE (no)

Broj pronalaska/ Number of assessment detected:	00 velika nesukladnost main deviations	00 nesukladnost deviations	01 preporuka observation
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Auditor/auditori preporučuju temeljem pronalazaka dobivenih provedbom audita da će organizaciji certifikat biti:

The auditor/auditors recommended based on the findings which could be obtained during the audit that the certification of the organization will be:

<input type="checkbox"/> izdan issued	<input checked="" type="checkbox"/> produljen continuing	<input type="checkbox"/> odbijen refused	<input type="checkbox"/> Suspendiran do provedbe odgovarajućih korektivnih mjera suspend until sufficient corrective measures are given.
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Auditor: release	Datum: date	Potpis: signature
Lead Auditor: Marjeta Miholić Jeić	01.11.2015	

4. Organizacijske promjene/ Organisational change

Imenovana je nova uprava (Dekan, Prodekan za posloводство, Prodekan za nastavu, Prodekan za znanost i Prodekan za međunarodnu suradnju) te Predstavnik za upravljanje kvalitetom.

There was appointed a new management (Dean, Vice Dean for Management, Vice Dean for teaching, Vice Dean for science and Vice Dean for international cooperation) and Representative for quality management.

5. Rezultati prethodnog audita/ Results of the previous audit

Pronalasci s prethodnog audita su provjereni. Utvrđeno je sljedeće:

The assessments from the previous audit were checked. The following findings were obtained:

- Sve nesukladnosti/primjedbe uočene tijekom prošlog audita su otklonjene i potvrđena je učinkovitost provedenih mjera (zabilješke odjeljak 9).**
All deviations/observations detected during the last audit have been corrected, and the effectiveness of these measures was confirmed (remarks see section 9).
- Nesukladnosti/primjedbe uočene tijekom prošlog audita nisu adekvatno otklonjene. Odgovarajuće točke su zabilježene kao nove nesukladnosti u ovom izvještaju.**
The deviations/observations detected during the last audit were not adequately executed. Appropriate points were recorded as new deviations in this report.
- Nije primjenjivo (Prva certifikacija – nije bilo nesukladnosti/primjedbi)**
Not applicable (First certification – or there was no deviation/observation).

6. Pronalasci/ Audit findings

Dokumentacija sustava zadovoljava zahtjeve norme i dovoljno je detaljna kako bi pridonijela provedbi i održavanju sustava.

The system documentation meets the requirements of the standard and is detailed enough to support the implementation and maintenance of the system

DA (yes) NE (no)

Organizacija je pokazala učinkovitu implementaciju, održavanje i poboljšanje svojega sustava upravljanja te je u mogućnosti ostvariti svoje ciljeve.

The organization has demonstrated the effective implementation, maintenance and improvement of their management system and is able to achieve their objectives

DA (yes) NE (no)

Organizacija može pokazati da je uspostavila odgovarajuće ciljeve i da je njihova implementacija nadzirana i bazirana detaljno na kvantitativnim karakteristikama.

The organization can demonstrate that it has formulated appropriate objectives and their implementation is monitored in detail based on characteristic quantities

DA (yes) NE (no)

Interni audit je proveden i pokazuje uspješnost u odnosu na održavanje i poboljšavanje sustava upravljanja.

The internal audits are carried out and show efficacy in relation to the maintenance and improvement of the management system

DA (yes) NE (no)

Upravina ocjena koristi se za dokazivanje primjerenosti i učinkovitosti sustava upravljanja.

The management review will be used to demonstrate the adequacy and effectiveness of the management system

DA (yes) NE (no)

Tijekom audita može se dokazati da su zahtjevi norme ispunjeni.

During the audit, it could be demonstrated that the standard requirements are met

DA (yes) NE (no)

Pritužbe se rješavanju u skladu s QSZ-specifikacijama. Korištenje certifikacijskih markica i certifikata je ispravno i u skladu sa smjernicama QSZ.

Complaints are dealt with in accordance with the QSZ-specifications. The use of the certification mark and the certificate is correct and conforms to the guidelines of QSZ

N/A DA (yes) NE (no)

7. Verificirani dokumenti/Verified documents

<p>Upravina ocjena/ Management review:</p>	<p>Zadnja Upravina ocjena prema ISO 9001 izrađena je 16.1.2015. 4 strane pregledane i prokomentirane.</p> <p>Last management review according to ISO 9001 was made 16.1.2015, 4 pages reviewed and discussed.</p>
<p>Organigram</p>	<p>Organigram je sastavni dio Pravilnika o ustroju radnih mjesta 20.3.2013.</p> <p>Organigram is integral part of Rules on job positions 20.3.2013.</p>
<p>Interni audit/ Internal Audits:</p>	<p>Godišnji plan interni audita u 2015 od 20.1.2015. Izveštaj s internog audita 10.10.2015.</p> <p>Annual internal audits plan in 2015 from 20.1.2015. Internal audit report from 10.10.2015.</p>
<p>Zakoni & Evidencije norme/ Law & standards evidence</p>	<p>Popis vanjskih dokumenata, ažuriran 20.1.2015 Zakon o radu NN 93/14 Zakon o zaštiti na radu NN 71/14 Zakonom o pravu na pristup informacijama NN 25/13, 85/15 Zakon o osiguranju kvalitete u znanosti i visokom obrazovanju NN 45/09 Zakon o znanstvenoj djelatnosti i visokom obrazovanju 123/03 , 198/03 , 105/04 , 174/04 , 46/07 , 45/09 , 63/11 , 94/13 , 139/13 Europske norme i smjernice za osiguranje kvalitete u području visokog obrazovanja.</p> <p>List of external documents updated 20.1.2015. Labour Law NN 93/14 Law on Occupational Safety and Health NN 71/14 Law on Freedom of Information NN 25/13, 85/15 Law on Quality Assurance in Science and Higher Education NN 45/09 Law on Science and Higher-education NN 123/03, 198/03, 105/04, 174/04, 46/07, 45/09, 63/11, 94/13, 139/13 European standards and guidelines for quality assurance in higher education.</p>
<p>Dokumentacija sustava upravljanja/ Management system documentation</p>	<p>Poslovnik kvalitete, izdanje 4 od 2012. Priručnik za osiguranje kvalitete (18.09.2013.) Poslovnik o radu odbora za osiguranje kvalitete (6.5.2014.) Pravilnik o uređenju i izdavanju časopisa ACS (1.1.2006.) Procedura strateškog planiranja(10. 03.2015.) Pravilnik o nagradama i javnim priznanjima AF (15.01.2014.) Pravilnik o stegovnom postupku (06.02.2012.) Pravilnik o poslijediplomskim znanstvenim i strucnim studijima (01.02.2012.) Pravilnik o radu Centralne agronomske knjižnice (06.02.2012.) Pravilnik o nagradama za najbolji e-kolegij (17.07.2013.) Popis važećih dokumenata, ažuriran 20.01.2015. Upravljanje dokumentima, Upravljanje zapisima, Korektivne radnje, Preventivne radnje, Upravljanje nesukladnostima, Interni audit, sve procedure izdanje 4/2012.</p> <p>Quality Manual, edition 4 from 2012. Manual for Quality Assurance (18.09.2013.) Manual of Committee for Quality Assurance (05.06.2014.) Regulations on the arrangement and the publishing of the ACS (1.1.2006.) The procedure of strategic planning (10th 03.2015.) Regulations on awards and accolades AF (15.01.2014.) Regulations for disciplinary proceedings (06.02.2012.) Regulations on postgraduate and professional studies (01.02.2012.) Regulations on the Central Agricultural Library (06.02.2012.) Regulations on prizes for the best e-course (17.07.2013.) List of valid documents, updated 20/01/2015. Control of documents, Control of records, Corrective actions, Preventive actions, Control of nonconformities, Internal audit, all procedures edition 4/2012.</p>

8. Općeniti dojam i moguća poboljšanja/ General comments and possible improvements

Pozitivne točke/ Positive points

Veliko ulaganje u usavršavanje djelatnika.

Usklađenost sa Europskim normama i smjernicama za osiguranje kvalitete u području visokog obrazovanja.

Major investment in training of employees.

Compliance with European standards and guidelines for quality assurance in higher education.

9. Nesukladnosti/Preporuke (Deviations/Observations)

Komentari za otklanjanje nesukladnosti/preporuke s prethodnog audita Comments for completion of the deviations/observations from the previous audit

Nesukladnost Deviation x:	Nije bilo No one
Preporuka 1/ Observation 1:	<p>Upravina ocjena; ISO 9001; 5.6</p> <p>U ocjenu sustava upravljanja kvalitetom uključiti i rezultate samovrednovanja.</p> <p>Komentar auditora na kontrolu prethodne preporuke</p> <p>Samoanaliza za razdoblje 2012 – 2015 je u fazi izrade te rezultati nisu mogli biti uključeni u ocjenu sustava 16.1.2015.</p> <p>Management review; ISO 9001; 5.6</p> <p>In the review of the quality management system should be included the results of self-evaluation.</p> <p>Auditor comment for previous surveillance observation:</p> <p>Self-evaluation for the period 2012 - 2015 is in the process of making and the results could not be included in the management review from 16.01.2015.</p>

Veća nesukladnost s trenutnog audita/Main deviations from the current audit

Veća nesukladnost
Main deviation x:

Nesukladnost s trenutnog audita

Tijekom audita pregledana je dokumentacija i zapisi na temelju uzorka. Postoji mogućnost da postoje nesukladnosti koje nisu uočene zbog principa auditiranja koji se temelji na uzorku

Throughout the audit documents and records are examined on a sample basis. There is a possibility that there are nonconformities that are not observed because of the principles of auditing that is based on the sample.

(This audit covered procedures, activities and records based on samples. During this assessment, we stated the deviations listed below and discussed during the audit and the closing meeting. There may be other deviations that have not been detected due to the inherent character of an audit.)

Nesukladnost
Deviation x:

Preporuke s trenutnog audita/Observations from the current audit

Preporuka 1/ Observation 1:	<p>Analiza podataka; ISO 9001; 8.4</p> <p>Voditi evidenciju prigovora, primjedbi i žalbi zainteresiranih strana na jednom mjestu radi lakše analize navedenih zapisa i predlaganja mjera za poboljšanje.</p> <p>Analysis of data; ISO 9001; 8.4</p> <p>There should be kept records of reclamations, objections and complaints of interested parties in one place for easier analysis of these records and for proposal of measures for improvement.</p>
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Izveštaj s audita sustava upravljanja

Regulacija nesukladnosti:

Veća nesukladnost: Zahtjevi cijelih dijelova standarda ili vlastite dokumentacije upravljanja kvalitetom što je temelj audita, a nisu izrađeni ili organizacija sustavno ne provodi jednu ili više aktivnosti koju zahtjeva norma ili dokumentacija upravljanja kvalitetom.

Nesukladnost: Kompletna suglasnost s cijelim dijelom standarda ili vlastite dokumentacije sustava upravljanja nije utvrđena, ali na temelju objektivnih dokaza sukladnost proizvoda nije ugrožena

Primjedba: Napomena za dodatne mogućnosti s namjerom poboljšanja sustava upravljanja

Veća nesukladnost i nesukladnost moraju biti ispravljani prema određenom vremenskom okviru; primjedbe su preporuke auditora za poboljšanje sustava

Regulation of Deviations

Main deviation: Requirements of whole sections of the standard or the own quality management documentation, which is basic of the audit, are not worked on, or the organisation does systematically not use one or several activities of the required standard or the quality management documentation.

Deviation: Complete agreement of entire sections of the standard or the own quality management documentation was not determined, but on the basis of an objective proof the conformity of the product is not endangered

Observation: Remarks over additional possibilities attend to improve the management system.

Main deviations and deviations must be corrected in a certain timetable; observations are recommendations of the auditors to improve the system.

10. Datum sljedećeg audita/Date for the next audit

Za sljedeći nadzorni audit koji je potrebno provesti sljedeće godine, predlaže se najkasnije datum do **15.10.2016.** Ured će Vas kontaktirati prije navedenog termina radi potvrde dogovorenog datuma.

Područja na koja će se usmjeriti sljedeći audit:

- Ocjenjivanje sustava
- Realizacija ciljeva i akcijskih planova
- Zadovoljstvo korisnika/studenata i preporuke za poboljšanje

For the next surveillance audit which needs to be implemented next year, it is proposed to be no later than **15.10.2016.** The office will contact you before this date in order to confirm the agreed date.

Areas on which will be focus on the next audit:

- o Management review
- o Realization of objectives and action plans
- o Users / students satisfaction, and recommendations for improvement

11. Lista sudionika (uvodni i završni sastanak)/List of participants (opening and closing meeting)

Ime i prezime Name	Funkcija Position	Uvodni sastanak Opening meeting	Audit audit	Završni sastanak Closing meeting
prof. dr. sc. Zoran Grgić	Dekan Dean	X	X	X
Petra Doležalova	Stručni suradnik u tajništvu fakulteta/QM Research assistant in the Secretariat of the Faculty / QM	X	X	X
prof. dr. sc. Jasminka Karoglan Kontić	Prodekanica za nastavu Vice Dean for Teaching		X	
prof. dr. sc. Ramona Franić	Prodekanica za posloводство Vice Dean for Management		X	
Aleksandra Hršak	Stručni suradnik Expert Assistant		X	
Ivica Kos	Satničar Schedule maker		X	
Renato Hernest	Voditelj nabave Head of procurement		X	
Nikša Barbarić	Ovlaštenik za poslove zaštite na radu i zaštite od požara Representative for occupational safety and fire protection		X	

Tehnička ocjena od strane ureda

Revizor je provjerio dokumentaciju audita te se upravnom odboru prosljeđuje zahtjev za produženje valjanosti certifikata.

Adria Norma – Regionalni predstavnik QS Zürich AG Vam čestita na postignutim rezultatima i želi Vam puno uspjeha u daljnjem radu i unaprjeđivanju sustava upravljanja.

Zahvaljujemo Vam na povjerenju i otvoreni smo za sva Vaša daljnja pitanja.

S poštovanjem

Za Adria Normu d.o.o. - Regionalni predstavnik QS Zürich AG

Lead Auditor - Marjeta Miholić Jeić



12. Relevant audit procedures – dodatak izvještaju za provjeru usklađenosti s zahtjevima norme

The verified processes, procedures and functions are described in detail in the audit program and the audit planning matrix. The processes were audited by sampling with the following results based on the documents listed below.

DOKUMENTATION REQUIREMENTS	
<p>Quality manual Process: Quality Management process / Quality Manual, edition 4 from 2012</p> <p>Evidence: Quality Manual, edition 4 from 2012 contains all the elements required by standard. Quality Manual has appointed exemptions for quality management system according to ISO 9001, and relating to: 7.3 Design and development 7.5.2 Validation of processes for production and service provision 7.6 Control of monitoring and measuring equipment</p> <p>Description of the process and sequence of their interaction is shown in Quality Manual.</p>	
<p>Control of documents Process: Quality Management process / Control of documents ver. 4/2012</p> <p>In the Quality Manual there is structure of documentation defined according to which the documentation is divided into three levels: 1st LEVEL: Policy and objectives for quality management; Quality manual 2nd LEVEL: Regulations and Procedures 3rd LEVEL: Work instructions forms and records Documentation of management system is maintained in electric and printed form. Distribution of documents in electronic form is provided through university intranet. The procedure "Control of documents" ver. 4/2012 defines creation, encryption, review, approval and distribution of documentation, training needs, application, method of recording amendments, revision and protection of documentation.</p> <p>Evidence: List of valid documents; updated 20.1.2015. List of archives and records of the University of Zagreb Faculty of Agriculture and its predecessors, with the retention period (14.11.2012.)</p>	
<p>Control of records Process: Quality Management process / Control of documents ver. 4/2012</p> <p>Procedure "Control of records" (edition 4/2012) describes identification, collection, labelling, formation, deposition, availability, distribution, storage and removal of records.</p> <p>Evidence: Ordinance on the protection of archives and records (14.11.2012.)</p>	
<p>Emergency precaution</p> <p>Process:</p>	<p><input checked="" type="checkbox"/> not applicable/reason: <input type="checkbox"/> not audited/reason:</p>

Evidence:
 Not requirement of ISO 9001 standard.

Additional information/statements

Process:

Evidence:

MANGEMENT RESPONSIBILITY

Management commitment

Process: Management / Quality Management process / Management Review from 16.1.2015

New strategic Plan of development of Faculty of Agriculture for the period 2016 - 2021 is in the phase of preparation

The current strategic plan from 13.07.2010 is valid until the end of the semester 31.12.2015.

There is a clear commitment of the Management for the development and implementation of quality systems through:

Quality Policy.

Objectives for 2015 established 15.3.2015.

Provision of resources: human resources, infrastructure and work environment.

Evidence:

Legal compliance/regulatory requirements

Process: Quality Management process

After accreditation by the AZVO from 24.04.2013 there was developed an action plan to eliminate objections and fully comply with the guidelines. Its implementation is continuously monitored.

Evidence:

List of external documents updated 20.1.2015.

Report on realization of the Action Plan for improving the quality 14.04.2015.

Re-accredited by the AZVO is expected in February 2018.

Policy

Process: Quality Management process / Process of teaching organization / Process of student administration / Quality Policy

Mission and Vision and Quality Policy is published on the website.

Quality Policy (2012) is appropriate with purpose of the organization, communicated with employees and other stakeholders.

Quality Policy is published and understandable to employees, as part of the management review is evaluated regarding to suitability.

Evidence:

Programs

not audited/reason:

Process:

Evidence:

Not requirement of ISO 9001 standard.

Objectives

Process: Management/ Quality Management process

Evidence:

Action Plan for improving the quality 15.03.2014 - 14.03.2015.

Report on realization of the Action Plan for improving quality 14.04.2015.

The objectives for 2015 were established on 15.3.2015.

The established objectives are clear and measurable.

Responsibility, authority and communication

Process: Management / Quality Management process

Roles and responsibilities are defined in employment contracts.

There is Quality Representative appointed and his responsibilities are defined in accordance with the requirements of the standard

Evidence:

Rules on job classification 20.03.2013 with the organizational chart.

Records from the meeting of the Committee for Quality Assurance 13.10.2015.

Analysis of the surveys for assessing quality of teachers and classes is carried out every 3 years.

Labour ordinance (01.02.2012).

Management Review

Process: Management / Quality Management process / Management Review from 16.1.2015

Management review was conducted prior to defining goals for 2015.

The assessment included all input and output data determined by the present standard.

Management is conducting management evaluation system once a year.

During the review there are determined the existence of possible needs for change and examined suggested solutions.

Evidence:

"Management Review" from 16.1.2015 is reviewed.

Additional information/statements

Process:

Evidence:

RESOURCE MANAGEMENT

Human resources

not audited/reason:

Process: Management / Quality Management process

Regularly are kept records of internal training of teachers and nonteaching staff (administration), for example Record of the workshop on disability of students and ways of work.

Records from the Workshop for improving teaching skills of teachers and classes by the external associate after analysing the satisfaction of students 03.06.2015.

In the files of the employees is all legally required documentation.

Evidence:

Realization of the decision on the criteria for the classification of copyright, employment and other contracts (04.14.2015).

Ordinance on the conditions and the procedure of choice in professional positions in science and higher education (01.02.2012).

Infrastructure	<input checked="" type="checkbox"/> not audited/reason:
Process:	
Evidence	
It is not planned with the FO-305 plan.	
Work environment	<input checked="" type="checkbox"/> not audited/reason:
Process:	
Evidence:	
It is not planned with the FO-305 plan.	
Additional information/statements	
Process:	
Evidence:	
PRODUCT REALIZATION	
Risk analysis	<input checked="" type="checkbox"/> not applicable/reason: <input type="checkbox"/> not audited/reason:
Process:	
Evidence:	
Not requirement of ISO 9001 standard.	
Customer related processes	<input type="checkbox"/> not applicable/reason: <input type="checkbox"/> not audited/reason:
Process: Process of student administration	
Changes of study programs and their improvement is carried out once a year, ECTS catalogue.	
There was introduced a new study program in English for foreign students, license was obtained for 2015.	
All documentation related to the enrolment of students is provided in the student administration office and electronic program ISFU.	
Evidence:	
Design and development	<input checked="" type="checkbox"/> not applicable/reason: <input type="checkbox"/> not audited/reason:
Process:	
Evidence:	
Exclusion according to Quality Manual.	
Purchasing	<input type="checkbox"/> not applicable/reason: <input type="checkbox"/> not audited/reason:
Process: Purchasing	
During 2015 were conducted three public procurements.	

Procurement Plan for 2015 was published on the website.

Evidence:

A list of approved suppliers with evaluations from January 2015.

Ordinance on purchasing, use and maintenance of scientific equipment (24.1.2008).

There were reviewed the records related to the process for bargain purchase (up to 200 000,00) invitation for competition from 14.10.2015 for services of the protection of private and technical assets.

Contract with the supplier BRADA Ltd. signed on 14.10.2015.

Reviewed the Certificate of education for the implementation of public procurement from January 2015. For employee Renato Hernest, which is valid for 3 years.

Purchasing information

not applicable/reason:

not audited/reason:

Process: Purchasing

All data required for the purchasing are mentioned in the cost estimates and/or contracts with suppliers.

Evidence:

Verification of purchased product

not applicable/reason:

not audited/reason:

Process: Purchasing

Products are reviewed while the takeover by the Commission for procurement of which there are records.

Evidence:

Control of production and service provision

not applicable/reason:

not audited/reason:

Process: Process of student administration / Process of teaching organization

Supervision of classes: upon finished classes, teachers are required to sign within 15 days that the teaching was realized.

Exams are reported in the ISFU system.

Evidence:

Validation of process for production and service provision

not applicable/reason:

not audited/reason:

Process:

Evidence:

Exclusion according to Quality Manual.

Identification and traceability

not applicable/reason:

not audited/reason:

Process: Process of student administration / Process of teaching organization

All data related to the students are given in the program ISFU. Data on students are monitored by the ID number of students.

Evidence:

Customer property	<input type="checkbox"/> not applicable/reason: <input checked="" type="checkbox"/> not audited/reason:
Process:	
Evidence: It is not planned with the FO-305 plan.	
Preservation of product	<input type="checkbox"/> not applicable/reason: <input checked="" type="checkbox"/> not audited/reason:
Process:	
Evidence: It is not planned with the FO-305 plan.	
Control of monitoring and measuring equipment	<input checked="" type="checkbox"/> not applicable/reason: <input type="checkbox"/> not audited/reason:
Process:	
Evidence: Exclusion according to Quality Manual.	
Additional information/statements	
Process:	
Evidence:	
MEASUREMENT, ANALYSIS AND IMPROVEMENT	
Feedbacks, Customer satisfaction	<input type="checkbox"/> not audited/reason:
Process: Quality Management process	
An analysis of student satisfaction was made in June 2015. Complaints from students are recorded and immediately addressed.	
Evidence: 40% of returned questionnaires from 974 surveyed students.	
Internal audits	<input type="checkbox"/> not audited/reason:
Process: Quality Management process	
Internal audit is carried out according to the procedure "Internal audit" 2012 edition 1 Annual internal audit plan is made by taking into account the status and importance of the process to be audited, as well as the results of previous audits.	
Evidence: Annual internal audits plan in 2015 from 20.1.2015. Internal audit report from 10.10.2015. Non conformities were not found.	

Monitoring and measurement of processes	<input checked="" type="checkbox"/> not audited/reason:
Process: Evidence: It is not planned with the FO-305 plan.	
Monitoring and measurement of products	<input checked="" type="checkbox"/> not audited/reason:
Process: Evidence: It is not planned with the FO-305 plan.	
Control of nonconforming products	<input type="checkbox"/> not audited/reason:
Process: Quality Management process All customer complaints are recorded and dealt with as soon as possible. There were no complaints to suppliers during 2015. Evidence:	
Analysis of data	<input type="checkbox"/> not audited/reason:
Process: Management / Quality Management process SWOT analysis was made 2014. Analysis of the realization of the enrolment quotas. Results of the analysis of process and plans are listed in the Annual Report. All employees are aware of their responsibility for the realization of the objectives and processes. Evidence: Last self-evaluation was conducted for the period 2008 - 2012, and in preparation is new for period 2012 – 2015.	
Improvement (continual improvement, corrective action, preventive action)	<input type="checkbox"/> not audited/reason:
Process: Management / Quality Management process Evidence: Established Procedures: Corrective actions edition 4/2014 Preventive actions edition 4/2014 Since last year there were no corrective actions.	
Additional information/statements	
Process: Evidence:	

13. Report relevant attachments

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