



POLICY DOCUMENT OF ACADEMIC AND ADMINISTRATIVE AUDIT (AAA)

Title : Policy Document of Academic and Administrative Audit (AAA)

Policy Code : MITSU/AAA/POL/2025/01

Version No. / Effective Date : Version 1.0 / 14th November 2025

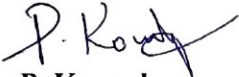
Prepared By : Mrs.P.Kowsalya,
IQAC Document Manager

Reviewed By : Dr. K. Sathesh
IQAC Coordinator

Approved By : Registrar

Disclaimer: *This document is proprietary to MITS DTBU and developed by IQAC for institutional use. It shall not be reproduced or used outside the Institution without prior approval.*

1. Policy Metadata

Field	Details / Signature
Policy Title	Policy Document of Academic Administrative Audit
Policy Code	MITSU/AAA/POL/2025/01
Version / Date	Version 1.0 / 14 th November 2025
Prepared by	 Mrs. P. Kowsalya, IQAC Document Manager
Reviewed by	 Dr. K. Sathesh IQAC Coordinator IQAC Co-ordinator Madanapalle Institute of Technology & Science MADANAPALLE - 517325.
Approved by	 Dr. D. Pradeep Kumar Registrar (I/c) REGISTRAR Madanapalle Institute of Technology & Science (Deemed to be University) MADANAPALLE - 517 325, A. P.
Next Review Date	November 2027

2. Policy Preamble

Madanapalle Institute of Technology & Science (MITS), now a Deemed to be University (MITS DTBU) under Section 3 of the UGC Act, 1956, is committed to maintaining and enhancing Academic and Institutional excellence through a structured, evidence-based Quality Assurance mechanism. Academic and Administrative Audit serves as a critical instrument to assess, monitor and continually improve the quality of Teaching-learning, academic processes, and the administrative systems that support them.

This policy applies University-wide to all Schools, Departments and Faculty, ensuring a systematic review of instructional methods, curriculum effectiveness, student engagement, Faculty performance and administrative governance and support services. Audit process assesses compliance with accreditation and regulatory bodies such as NAAC, NBA and the ISO 21001:2018 Educational Organizations Management System (EOMS) and is monitored through the Internal Quality Assurance Cell (IQAC).

Institutional Rationale

With its transition to Deemed-to-be-University status, MITS DTBU has integrated its previous Department-level Academic and Administrative Audit practice into a unified, University-wide audit framework governed by IQAC. This framework brings together four pillars of audit and continuous improvement- ISO 21001:2018 EOMS, Academic Audit, Administrative Audit and Quality Enhancement & Continuous Improvement operating on the guiding principle that “an Audit does not judge an Institution; it strengthens the Institution.”

3. Vision & Mission Linkage

Vision

Academic and Administrative Audit serves as a pivotal IQAC mechanism for translating the institutional vision into practice by ensuring systematic quality assessment, continuous improvement, accountability and excellence in academic and administrative processes, thereby advancing MITS DTBU towards global academic distinction and societal impact.

Mission (as relevant to Audit)

- Conducting regular assessment and audit of the University/Institute, its Schools/Departments and Administrative Sections.
- Fostering an academic atmosphere that enhances the quality of teaching, learning and research
- Promoting self-evaluation, accountability, autonomy and innovation

- Engaging stakeholders such as Students, Faculty, Parents, Alumni and Employers in the evaluation, promotion and sustenance of quality.

Alignment with NEP 2020

- Audit framework reinforces NEP 2020 priorities by verifying the institutionalization of Outcome-Based Education (OBE), multidisciplinary and flexible curricula, active/student-centric pedagogy, credit-framework compliance and continuous Faculty development, auditing not just compliance, but the lived practice of these reforms in classrooms and departments.

Contribution to UN Sustainable Development Goals (SDGs)

Policy directly advances SDG 4 (Quality Education) by institutionalizing continuous quality review and indirectly supports SDG 16 (Strong Institutions) and SDG 17 (Partnerships) through transparent governance, stakeholder collaboration and evidence-based institutional accountability.

4. Objectives

The overarching objective is to evaluate and enhance the quality of academic and administrative processes through systematic, evidence-based audits across the University, and to ascertain the presence, adequacy, applicability and effectiveness of quality assurance procedures governing inputs, processes and outputs.

Specific Objectives

- Define the main focus areas central to quality assurance and enhancement in teaching, learning and administration
- Identify the processes and procedures used by Schools/Departments and administrative units for quality assurance in each focus area
- Appraise the adequacy and effectiveness of existing quality assurance processes and procedures
- Make actionable recommendations for continuous improvement of processes and procedures
- Guide methods for continuous quality improvement in line with NAAC, NBA, AICTE and other regulatory requirements

Audits Enable To

- Strengthen Quality Assurance systems University-wide
- Ensure academic and administrative effectiveness
- Promote evidence-based decision making
- Identify gaps and improvement opportunities

- Drive corrective action and follow-up to closure
- Build a sustained culture of continuous improvement

5. Scope

This policy is University-wide in application and covers all Schools & Departments, Cells and administrative sections including Ph.D. programmes.

Applicability

- **Faculty:** Teaching and reporting responsibilities under Academic Audit
- **Staff** : Administrative, Technical and support-service functions under Administrative Audit
- **Students:** as primary stakeholders of Teaching-Learning quality, feedback and grievance mechanisms
- **External Stakeholders:** Parents, Alumni, Employers and Industry/International experts, through the Stakeholders' Feedback and AICTE 360° Feedback mechanisms

6. Definitions

- **Academic Audit:** A structured process designed to review and improve the quality of academic functions within institutions of higher education.
- **Administrative Audit:** A systematic evaluation of the efficiency and effectiveness of administrative operations, including policies, decision-making processes, procedures, strategies, feedback systems and overall governance mechanisms.
- **Audit:** A review process that assesses an institution or programme to ensure accountability and determine whether stated objectives — related to curriculum, faculty, infrastructure and other key aspects — are being effectively and optimally achieved.
- **Internal Audit:** A structured approach involving the collection of administrative data, student and graduate feedback, and facilitated discussions with faculty, staff and students, leading to a comprehensive self-assessment report.
- **External Audit:** An evaluation conducted by an independent agency or experts who gather and analyze data, information and evidence about an institution, unit or core activity to assess overall quality.
- **Quality Assurance:** The process of demonstrating, through evidence, that all quality-related activities are executed effectively, fostering trust and confidence among stakeholders.

- **Quality Enhancement:** A continuous process of improving and refining institutional quality to achieve better outcomes.
- **EOMS:** Educational Organizations Management System - ISO 21001:2018 standard certifying MITS AU/DTBU's quality management system for educational service delivery.
- **SWOC:** Strengths, Weaknesses, Opportunities and Challenges- the analysis framework applied to audit findings at Department and Institutional levels.
- **NCR:** Non-Conformance Report- a documented instance of deviation from a defined process, standard or requirement identified during audit.
- **ATR:** Action Taken Report - the documented response and corrective action submitted by a Department/Unit in response to audit findings or NCRs.
- **DQAC:** Department Quality Assurance Cell- Departmental nodal point for audit compliance and IQAC coordination.

7. Policy Statement

MITS DTBU shall maintain a structured, evidence-based, and continuously improving Academic and Administrative Audit mechanism spanning four integrated pillars (i) ISO 21001:2018 EOMS Audit, (ii) Academic Audit, (iii) Administrative Audit, and (iv) Quality Enhancement & Continuous Improvement coordinated by the IQAC. Every audit cycle shall proceed through the institutionalized Audit → Assess → Action → Improve → Excellence continuum, ensuring that findings translate into documented corrective and preventive action, and that the University sustains compliance with NAAC, NBA, AICTE, UGC-DTBU and ISO 21001:2018 EOMS requirements.

PLAN → IMPLEMENT → AUDIT → EVIDENCE → FINDINGS → ACTION → FOLLOW-UP → IMPROVEMENT

8. Governance & Composition

Academic and Administrative Audit (AAA) at MITS DTBU shall be governed by the Internal Quality Assurance Cell (IQAC) as the designated Institutional body responsible for quality assurance and continuous quality improvement. IQAC, in association with Dean Academics & the PAARC Team plan, coordinate and monitor the audit process across all Schools, Departments and Administrative Units. Audit team shall undertake the review of academic and administrative processes, evaluate compliance with institutional quality standards, identify areas for improvement, and submit recommendations for corrective and

preventive action. Audit findings and Action Taken Reports (ATRs) shall be reviewed by IQAC and reported to the competent authorities for continual quality enhancement, institutional effectiveness, and accreditation preparedness.

9. Terms of Reference (ToR)

Objectives

To institutionalize a recurring, evidence-based audit mechanism that verifies academic and administrative effectiveness and drives continuous quality improvement across the University.

Functions

- Plan and schedule Internal and External Academic & Administrative Audits and ISO 21001:2018 EOMS Internal/Surveillance Audits
- Verify Course Files, Laboratory Files, Departmental records and administrative documentation against defined checklists
- Compile Audit findings, raise Non-Conformance Reports (NCRs) and track Action Taken Reports (ATRs) to closure
- Conduct SWOC analysis at Department and Institutional level and recommend corrective/preventive measures

Reporting Hierarchy

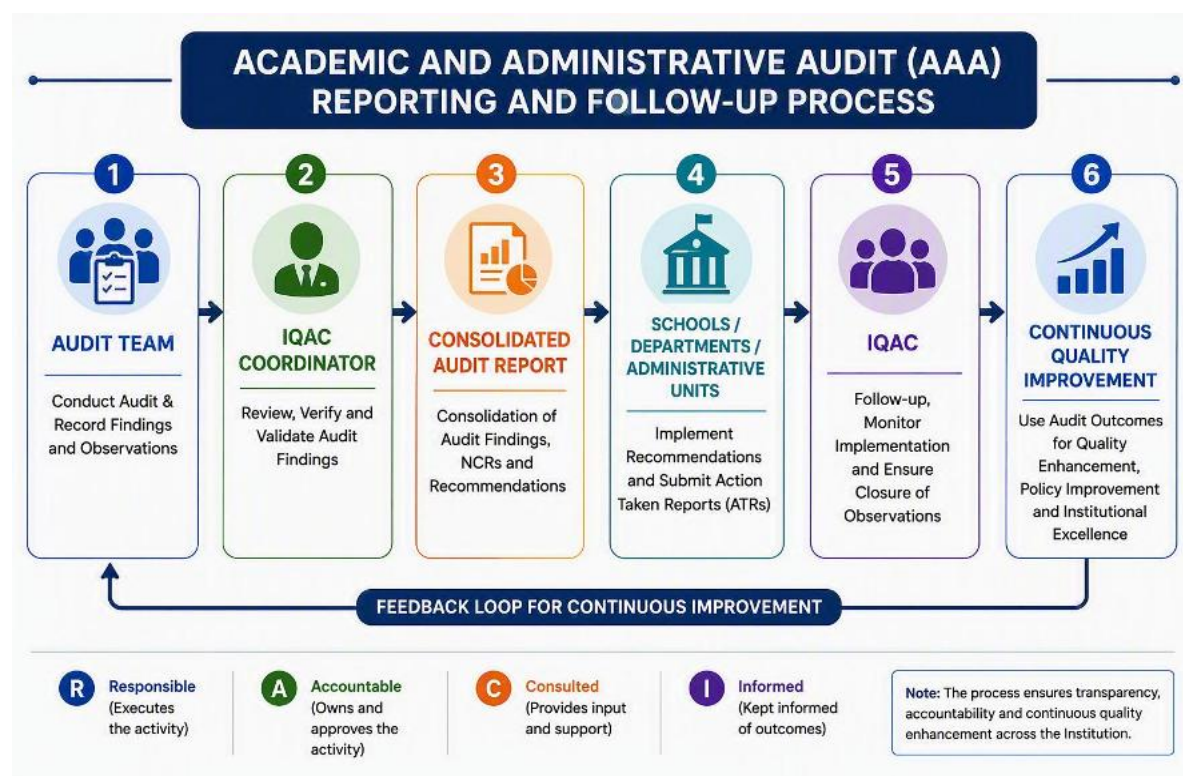


Figure 1. Reporting Hierarchy

Meeting / Audit Frequency:

Activity	Frequency
Internal Academic & Administrative Audit(as per ISO 21001:2018 EOMS Standards)	Twice a year (once per semester)
External Academic & Administrative Audit	Once a year, by an external Peer Team
ISO 21001:2018 EOMS Surveillance / Certification Audit	Annually / per certification cycle, by external certifying body

10. Roles & Responsibilities

IQAC coordinate and monitor the Academic and Administrative Audit process, while the Audit Team Dean Academics, PAARC & IQAC Team) shall conduct audits, verify records, document findings and submit audit reports. Heads of Departments and Administrative Section In charges ensure compliance with audit requirements and implement corrective actions. DQAC Coordinators shall facilitate Departmental audit activities, coordinate documentation and submit Action Taken Reports (ATRs) to IQAC.

11. Functions of the Committee

IQAC conducts Academic and Administrative Audits pertaining to academic and administrative processes against established criteria, verifies supporting evidence and records, identify strengths and areas for improvement, recommends corrective and preventive measures, monitor compliance with quality standards and facilitate continuous quality enhancement across the University.

12. Standard Operating Procedures (SOPs)**MITS IQAC Continuous Improvement Cycle**

AUDIT	ASSESS	ACTION	IMPROVE	EXCELLENCE
Review & Evaluate	Analyse Evidence & Findings	Corrective & Preventive Measures	Implement, Monitor & Strengthen	Institutional Quality & Sustainable Performance

MITS Audit-to-Excellence Journey:

PLAN → IMPLEMENT → AUDIT → IDENTIFY GAPS → CORRECT → FOLLOW-UP → IMPROVE → EXCEL

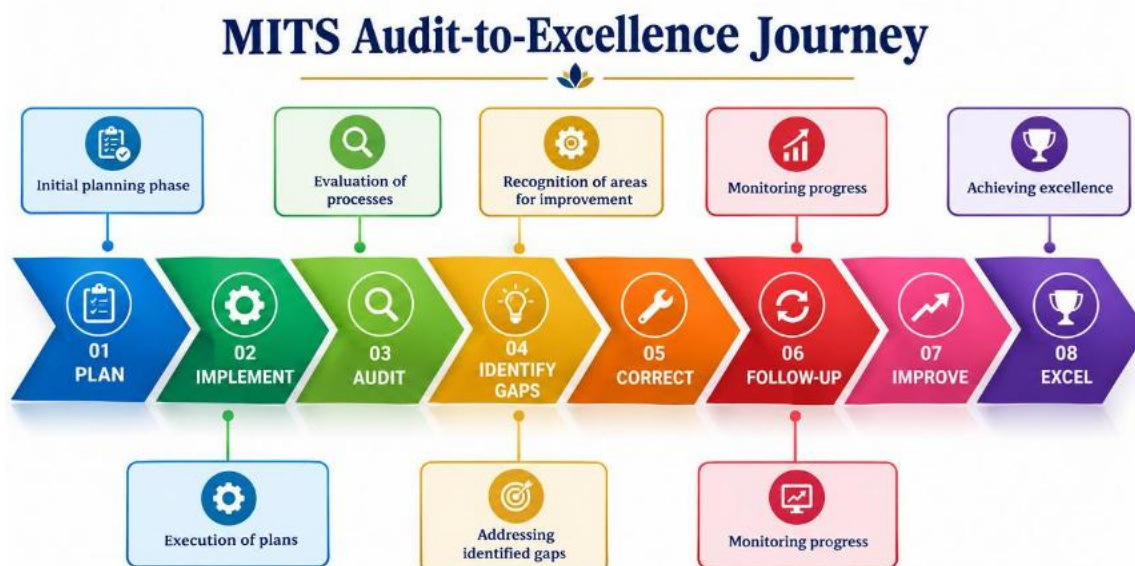


Figure 2. MITS Audit to Excellence Journey

Academic Audit Process (Internal)

- IQAC establish the audit schedule and disseminate it through an official Circular issued by the Registrar to the respective Schools, Deans, Heads of Departments, and Administrative In-charges.
- A standardized pro forma is issued to all Heads of Departments at least one month before the internal audit begins
- IQAC conducts the Academic Audit as per ISO 21001:2018 EOMS standards with a peer team once per semester; the audit is completed within a week
- Departments submit an Action Plan on the recommendations/observations raised
- Within two weeks of audit completion, the audit team compiles a detailed Internal Audit Report and presents it to the Principal/Registrar
- IQAC prepares a comprehensive findings report with SWOC analysis and actionable recommendations
- A Non-Conformance Report (NCR), where applicable, is circulated through DQAC Coordinators, who submit an Action Taken Report to IQAC after consultation with the Head of Department.

External Academic & Administrative Audit

- Conducted at least once every academic year by a Peer Team of eminent academicians / subject-matter experts, nominated in consultation with IQAC and finalized by the Principal/Registrar.

- ISO 21001:2018 Surveillance Audit is conducted annually by TUV-SUD.
- Scope of work, schedule and logistics are finalized and communicated to all Heads of Departments and administrative in-charges at least two weeks before the audit
- The Peer Team compiles a comprehensive audit report with SWOC analysis and submits it to the Principal within two weeks of completing the audit

Meeting Governance: Quorum, Agenda & Minutes

- **Quorum for IQAC/Audit review meetings:** as prescribed in the IQAC Composition order for the academic year
- **Minutes of Meeting (MoM)** are recorded using the standardized MoM format (Cell/Department) and archived by IQAC
- **Action Taken Report (ATR) mechanism:** every audit finding and every MoM action item is tracked to documented closure before the next review cycle

13. Policy Review & Updating

This policy shall be reviewed annually by IQAC to ensure continued alignment with institutional objectives, national accreditation standards and evolving educational best practice. Each review shall incorporate:

- University-wide scope covering all Schools, Departments and Administrative sections.
 - Composition and responsibilities updated to current statutory requirements
 - Terms of Reference: objectives, functions, reporting hierarchy and meeting frequency
 - Alignment with NEP 2020 reforms and relevant UN SDGs
 - A RACI chart (Responsible, Accountable, Consulted, Informed) for each audit function
- Legend:**
- **R** – Responsible (Executes the activity)
 - **A** – Accountable (Owns and approves the activity)
 - **C** – Consulted (Provides input and support)
 - **I** – Informed (Kept informed of outcomes)

Audit Function	IQAC	Audit Team	Deans & Heads/ Administrative In charges	DQAC Coordinators
Audit Policy & Framework Development	A/R	I	I	I
Preparation of Audit Schedule	R	I	I	I
Constitution of Audit Team	R	I	I	I
Communication of Audit Schedule	R	I	I	I

Department/Section Self-Assessment & Documentation	I	I	A	R
Conduct of Academic Audit	C	R	C	C
Conduct of Administrative Audit	C	R	C	-
Verification of Records & Evidence	I	R	C	C
Preparation of Audit Report	C	R	I	I
Presentation of Audit Findings	R	C	I	I
Review of Audit Outcomes	R	I	I	I
Issue of NCRs / Observations	R	R	I	I
Submission of ATRs	I	I	A	R
Monitoring of Corrective Actions	R	I	A	R
Closure of Audit Findings	A	I	R	R

14. Implementation Framework

Academic and Administrative Audit (AAA) through a structured and continuous quality assurance mechanism is implemented by the Internal Quality Assurance Cell (IQAC). The framework shall encompass Audit planning, self-assessment, evidence-based review, reporting of findings, implementation of corrective actions, monitoring of Action Taken Reports (ATRs), and follow-up review. Audit outcomes are utilized for quality enhancement, institutional planning and continuous improvement of academic and administrative processes across the University. Framework is exhibited in Figure.3.

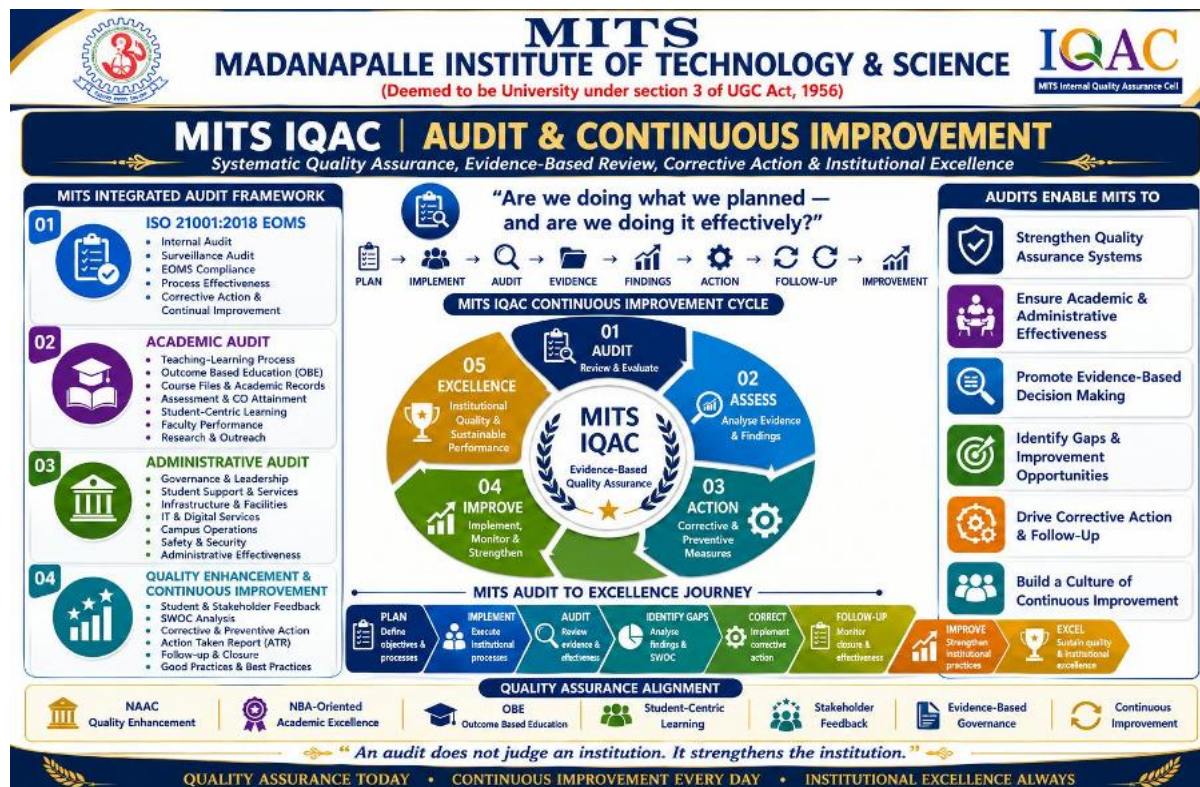


Figure.3. Implementation Framework

15. Training & Awareness

IQAC organize training and awareness programs for Faculty, DQAC Coordinators through meetings and auditors to ensure effective implementation of the Academic and Administrative Audit process. Programs focus on Audit procedures, Documentation practices, Quality assurance mechanisms and continuous improvement practices

16. Compliance & Legal Requirements

- National Assessment and Accreditation Council (NAAC), *NAAC Academic and Administrative Audit (AAA)* – Note, available at: [NAAC Official Document](#)
- NBA Tier-I Self-Assessment Report (SAR) norms for UG and PG Programmes
- ISO 21001:2018 Educational Organizations Management System (EOMS) clauses

17. Review & Revision Mechanism

IQAC review this Policy initiate an **out-of-cycle review** whenever there is a material change in applicable regulatory, statutory or institutional requirements. IQAC initiate the review process and prepare the revised draft, as necessary. All revisions shall be submitted to the **Registrar for review and approval** and shall take effect only upon such approval.

18. Documentation & Record-Keeping

IQAC maintain a centralized repository of all Audit-related documents, including Audit schedules, checklists, Reports, Non-Conformance Reports (NCRs), Action Taken Reports (ATRs) and quality improvement initiatives. All records shall be preserved in physical and/or digital form in accordance with Institutional policies and shall be made available for quality Assurance, accreditation, certification, and statutory review purposes

19. Reporting & Audit

- Internal and External Audit Reports, together with Action Taken Reports are submitted to IQAC and the Principal/Registrar.
- IQAC conducts an annual internal compliance review of audit closure status across Departments and Units
- Statutory/external audits (ISO 21001:2018 EOMS Surveillance/Certification Audit) are conducted by the respective certifying/accrediting bodies as applicable.

20. References

- National Assessment and Accreditation Council (NAAC), *NAAC Academic and Administrative Audit (AAA) – Note*, available at: [NAAC Official Document](#)
- NBA UG/PG Self-Assessment Report (SAR) manuals and Tier-I guidelines & ISO 21001:2018 — Educational Organizations Management System standards
- MITS Strategic Plan (2022-23 to 2026-27) and Strategic Plan Implementation / Gap Analysis Reports
- MITS Institutional Development Plan (IDP)

21. Annexures

Annexures are hosted and made accessible through the [IQAC](#) webpage on the University website.

- 1) MITS EOMS Theory Course File Audit ISO 21001
- 2) MITS EOMS Laboratory Course File Audit ISO 21001
- 3) MITS Laboratory EOMS Audit Notes ISO 21001
- 4) MITS EOMS Department Checklist ISO 21001
- 5) MITS EOMS Non-Conformity Report ISO 21001
- 6) Performance on MITS Objectives, Goals & Actions
