

Enclosure to audit report No. 3330 / 2KKH / H0

	Audit evidence and examples;
Requirement	Statements on implementation and evaluation
4 Context of the organi	Zation The requirements are: \[fulfilled partly fulfilled, see non-critical nonconformity No. not fulfilled, see critical nonconformity No. ; is closedyesno
4.1 Understanding the organization and its context	The company determined its external and internal issues. These are relevant to its purpose and strategic direction, affect the company's ability to achieve its intended results of the quality management system and are explained in Quality System Manual, KEK, 30.01.2019, rev.06, page 15-16 / 46 and Interested Parties-Context Form, FR.KYS.002, 12.07.2017, rev.00.
	The company monitors and reviews these issues once-a-year. Relevant interested parties are shown in FR.KYS.002. Samples:
	<u>External Issues:</u> Graduates Insurance companies
	Internal Issues: Infrastructure Academic and administration staff
4.2 Understanding the needs and the expectations of interested parties	 Interested parties' needs and expectations are listed in FR.KYS. 002. Samples: Infrastructure's needs and expectations are suitability and sufficiency Graduates' needs, and expectations are cooperation with university and industry, periodical seminars.
	Relevant interested parties and their relevant requirements are reviewed and monitored once in a year in the management review.
4.3 Determining the scope of the quality management system	Scope of the QMS is well defined, maintained as documented information base on ISO 9001:2015 standard in manual, page 18 / 46. There is no exclusion from the QMS. The company is active on higher education.
4.4 Quality management system and its processes	QMS is established, implemented, maintained and continually improved by the organization satisfactorily and this system includes the needed processes and their interactions base on standard requirements.
	 Processes of quality management system are determined and explained very well in Process Interaction Table, KEK-EK-B, 31.01.2019, rev.04, and this table also shows general process. Processes are explained in process flow charts and procedures, too. Samples: <u>Main processes:</u> candidate relationships, project realization <u>Management processes:</u> student council, rectorate.
	 <u>Supporting processes:</u> Purchasing, Quality management, HR and training.
5 Leadership	The requirements are: ☐ fulfilled ☐ partly fulfilled, see non-critical nonconformity No. ☐ not fulfilled, see critical nonconformity No. ; is closed ☐yes ☐no
5.1 Leadership and commitment 5.1.1 General	General top management is responsible of the leadership of the QMS and is commitment for standard requirements. Example of the requirements of the standard responsible; taking accountability for the effectiveness of the quality management system, ensuring that the quality policy and quality objectives are established for the quality management system and are compatible with the context and strategic direction of the organization, ensuring the integration of the quality management system requirements into the organization's business processes, promoting the use of the process approach and risk-based thinking; ensuring that the resources needed for the quality management system are available, communicating

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Requirement	Audit evidence and examples;
· ·	Statements on implementation and evaluation the importance of effective quality management and of conforming , etc. All 5 clauses requirements are explained in manual, page 20-21 / 46.
5.1.2 Customer focus	Top management is ensured statement about leadership and commitment with respect to customer focus. Customer focus training was given to staff.
5.2 Policy 5.2.1 Establishing the quality policy	 Quality policy, KEK-EK-A, 08.09.2017, rev.01, includes; The purpose and context of the organization and supports its strategic direction Provides a frame work for setting quality objectives. Includes a Commitment to satisfy applicable requirements and to continual improvement, etc.
	Quality policy is documented, issued and distributed very well and this documents revision is following effectively with its revision date, document number and issue date.
5.2.2 Communicating the quality policy	Policy is distributed announcement boards, internal notices and e-mail are the ways of internal communication system. Policy is announced for interested parties via web site (<u>www.okan.edu.tr</u>)
5.3 Organizational roles, responsibilities and authorities	Responsibilities and authorities are described in department basis job descriptions and assigned by the top management. Organization Chart, ŞM.INK.001, 10.01.2019, rev.11. Samples:
	 Editorial Department Expert Assistant, GT-INK.218, 18.12.2018, rev.00 Hiring and Organizational Improvement Manager, GT-INK.211, 14.11.2018, rev.00
	 Quality assurance management system representative is Prof. Dr. Güner Gürsoy-Rector Assistant, appointed on 06.12.2017 for: reporting on the performance of the quality management system and on
	 opportunities for improvement to top management; ensuring the promotion of customer focus throughout the organization; ensuring that the integrity of the quality management system is maintained when changes to the quality management system are planned and implemented.
	 Job description of Quality assurance management is checked in document: Quality management system representative, GT-INK.153, rev. 00
6 Planning	The requirements are: ⊠ fulfilled □ partly fulfilled, see non-critical nonconformity No. □ not fulfilled, see critical nonconformity No. ; is closed □yes □no
6.1 Actions to address risks and opportunities	QMS's risks and opportunities are determined base on give assurance that the quality management system can achieve its intended result, enhance desirable effects, prevent, or reduce, undesired effects, achieve improvement effectively.
	These risks and opportunities' actions were planned and these actions were integrated and implemented to the QMS processes satisfactorily and all so their evaluation of the effectiveness was explain and planned. Relevant process was explain in Risks and Opportunities Procedure PR.KYS.004.
	Hazard Identification and Opportunities Identifications are made with Risk Analyze Table.
	Risk evaluation ; Risk= Possibility x Impact
	Impacts are;
	Very High



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High impact Medium Impact Low impact Very Low Risk points are classified according to the following levels for actions; High (13-25) Medium (7-12) Low (1-6) Risks and opportunities are evaluated in Risk Evaluation Form FR.KYS.004 department based. Sample of risks and opportunities; Lost of educational equipment caused by delivering them without forms → 15 points (Unacceptable) Action: educational equipment are delivered to the persons with assigned minutes form. Not repaining the defected educational materials on time → 10 points (Significant) Action: Not repaining the defected educational materials on time → 10 points (Significant) Action: Not repaining the defected educational materials on time → 10 points (Significant) Action: Not repaint on of Docents for informing the related persons for defected educational materials The organization's quality objectives are established based on all processes, measurable, monitored, communicated, updated as appropriotetices were determined documented on PL-YGG.001, rev.03 and consider applicable requirements. Previous objectives of achievement are prepared, and current year objectives were determined based on this result. Last year objectives are analyzed effectively. Samples: Implementation of Docents for finability of CO-OP % 10 % 70 Increasing students profitability of CO-OP % 10 % 70 Increasing published conference, book etc for % 20 % 20 Average credit for every lecturer 420 573 Increasing published conference, book etc for % 20 % 20 Yeny lecturer Lation equipments are: <th>Requirement</th> <th>Audit evidence and Statements on implementat</th> <th></th> <th></th>	Requirement	Audit evidence and Statements on implementat				
High (13-25) Medium (7-12) Low (1-6) Risks and opportunities are evaluated in Risk Evaluation Form FR.KYS.004 department based. Sample of risks and opportunities ; Lost of educational equipment caused by delivering them without forms → 15 points (Unacceptable) Action: educational equipment caused by delivering them without forms → 15 points (Unacceptable) Action: educational equipment caused by delivering them without forms → 10 points (Significant) Action: educational equipment's are delivered to the persons with assigned minutes form. Not repairing the defected educational materials on time → 10 points (Significant) Action: educational equipment's are delivered to the persons for defected educational materials Cuality objectives and planning to achieve them planning to achieve them planning to achieve them planning to achieve them The organization's quality objectives are established based on all processes, measurable, monitored, communicated, updated as appropriate and maintained documented on PL VGG.001, rev 03 and consider applicable requirements. Previous objectives of achievement are prepared, and current year objectives were determined based on this result. Last year objectives are analyzed effectively. Samples: Objective 2018-2019 2018-2019 New program 1 doctorate ok Max. student number / class foreign lang; :20 ok Max. student number / class foreign lang; :20 ok Increasing published conference, book etc for % 20 % 20 Party lecturer 420 573		High impact Medium Impact Low impact Very Low Risk points are classified according to the following levels for actions; High (13-25) Medium (7-12)				
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Image: state of the second	Quality objectives and	monitored, communicated, updated as appropriate and maintained documented on PL.YGG.001, rev.03 and consider applicable requirements. Previous objectives of achievement are prepared, and current year objectives were determined based on this				
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6.3 Planning of changes 7 Support The requirements are: 		New program	1 doctorate	ok		
Increasing students' profitability of CO-OP % 10 % 70 program Increasing published conference, book etc for % 20 % 20 6.3 Planning of changes When the organization determines the need for changes to the quality management system, the organization are planned of changes. The organization is considered to ISO 9001:2015 requirements. QMS changes and other changes of processes are explained in manual, page 24 / 46. 7 Support The requirements are: fulfilled marry fulfilled, see critical nonconformity No. 1/2 not fulfilled, see critical nonconformity No. 1/2 not fulfilled marry fulfilled, see critical nonconformity No. 1/2 is closed lyes loo 7.1 Resources The organization determined and provided the resources needed for the establishment, implementation, maintenance and continual improvement of the quality management system based on at the capabilities of, and constraints on, existing internal resources, what needs to be obtained from external providers. These processes are explained in manual page 25 / 46. 7.1.2 Employees of the organization which is necessary for the effective implementation of its quality management system and for the operation and control of its processes the operation were determined and provided by the management. This process is explained in Training		Max. student number / class	bachelor's deg.: 30	ok		
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7.1 ResourcesThe organization determined and provided the resources needed for the establishment, implementation, maintenance and continual improvement of the quality management system based on at the capabilities of, and constraints on, existing internal resources, what needs to be obtained from external providers. These processes are explained in manual page 25 / 46.7.1.2 PeopleEmployees of the organization which is necessary for the effective implementation of its quality management system and for the operation and control of its processes the operation were determined and provided by the management. This process is explained in Training	7 Support	☐ fulfilled ⊠ partly fulfilled, see non-critical nor	nconformity No. 1 / 2 mity No. ; is closed 🖵	yes ⊡no		
Resourcesimplementation, maintenance and continual improvement of the quality management system based on at the capabilities of, and constraints on, existing internal resources, what needs to be obtained from external providers. These processes are explained in manual page 25 / 46.7.1.2 PeopleEmployees of the organization which is necessary for the effective implementation of its quality management system and for the operation and control of its processes the operation were determined and provided by the management. This process is explained in Training	7.1					
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Peoplequality management system and for the operation and control of its processes the operation were determined and provided by the management. This process is explained in Training						
		Employees of the organization which is necessary for the effective implementation of its quality management system and for the operation and control of its processes the operation were determined and provided by the management. This process is explained in Training				

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Requirement	Audit evidence and examples; Statements on implementation and evaluation						
	and academic staff	hiring process flowchart, A					
	training and HR act	training and HR activities.					
	Human resource process responsible is Kağan Abitağaoğlu Staff individual files based on national labor law (4857) are checked for:						
		Head Office	Kadıköy	Bahçelievler			
	Name	Müge Çimen	Selin Aslantaş	Kübra Aksoy			
	Job	Faculty of Dentistry Assistant Professor	OH&S Lecturer	Students affair officer			
	Hiring Date	16.04.2018	09.04.2018	01.10.2015			
	Graduation	Ph doctorate 27.06.2013,	Bachelor's degree	License			
7.1.3 Infrastructure	 Maintenance and repairing responsible is Özgür Şahin, who has 3 years of work experience and mechanical engineering graduation. The organization's infrastructure is determined, provided and maintained for the infrastructure necessary for the operation of its processes and to achieve conformity of products and services. Office Devices and machines maintenances and periodical controls are done by the maintenance and repairing responsible. The organization do not think any investment for the company in this year. Maintenance process is documented on Maintenance Procedure, PR.BIS.002, rev.04, 20.04.2018. Maintenance plan and instruction manuals are checked and found adequate. Annual Maintenance Plan PL.YAP.001 is used to identify the machines and their periodica maintenance activities. All maintenance, except air conditioning maintenance, is performed by the device / equipment manufacturer service and their reports are kept by construction work departmer Samples: 						
	Maabina Nama	Flovetor	Chim				
	Machine Name Date	Elevator 15.05.2019		ney cleaning 5.2019			
		15.05.2019	02.05				
	Date		02.05	5.2019 Baca Temizliği			
	Date Maintained By Service Form Nr	15.05.2019 Etaş Asansör 04537	02.05 Star	5.2019 Baca Temizliği			
	Date Maintained By	15.05.2019 Etaş Asansör	02.05 Star	5.2019 Baca Temizliği			
	Date Maintained By Service Form Nr Machine Name	15.05.2019 Etaş Asansör 04537 Elevator 31.05.2019	02.05 Star	5.2019 Baca Temizliği			
	Date Maintained By Service Form Nr Machine Name Date Breakdown Repair	15.05.2019 Etaş Asansör 04537 Elevator 31.05.2019 Connection ru Rubbers were	02.05 Star 0591 ubber were deformed. e changed	5.2019 Baca Temizliği 23			
	Date Maintained By Service Form Nr Machine Name Date Breakdown	15.05.2019 Etaş Asansör 04537 Elevator 31.05.2019 Connection ru Rubbers were	02.05 Star 0591 Jbber were deformed.	5.2019 Baca Temizliği 23			
	Date Maintained By Service Form Nr Machine Name Date Breakdown Repair Repaired By Bahçelievler Camp	15.05.2019 Etaş Asansör 04537 Elevator 31.05.2019 Connection ru Rubbers were Etaş Asansör	02.05 Star 0591 ubber were deformed. e changed -Service Form Nr: 007	5.2019 Baca Temizliği 23 43			
	Date Maintained By Service Form Nr Machine Name Date Breakdown Repair Repaired By Bahçelievler Camp Machine Name	15.05.2019 Etaş Asansör 04537 Elevator 31.05.2019 Connection ru Rubbers were Etaş Asansör	02.05 Star 0591 ubber were deformed. e changed -Service Form Nr: 007	5.2019 Baca Temizliği 23 43			
	DateMaintained ByService Form NrMachine NameDateBreakdownRepairRepaired ByBahçelievler CampMachine NameDate	15.05.2019Etaş Asansör04537Elevator31.05.2019Connection ruRubbers wereEtaş AsansörDus:Elevator25.06.2019	02.05 Star 0591 ubber were deformed. e changed -Service Form Nr: 007 Gene 02.05	5.2019 Baca Temizliği 23 43 43			
	DateMaintained ByService Form NrMachine NameDateBreakdownRepairRepaired ByBahçelievler CampMachine NameDateMaintained By	15.05.2019 Etaş Asansör 04537 Elevator 31.05.2019 Connection ru Rubbers were Etaş Asansör Ous: Elevator 25.06.2019 Etaş Asansör	02.05 Star 0591 ubber were deformed. e changed -Service Form Nr: 007 Gene 02.05 Star	5.2019 Baca Temizliği 23 43 43 erator 5.2019 Baca Temizliği			
	DateMaintained ByService Form NrMachine NameDateBreakdownRepairRepaired ByBahçelievler CampMachine NameDate	15.05.2019Etaş Asansör04537Elevator31.05.2019Connection ruRubbers wereEtaş AsansörDus:Elevator25.06.2019	02.05 Star 0591 ubber were deformed. e changed -Service Form Nr: 007 Gene 02.05	5.2019 Baca Temizliği 23 43 43 erator 5.2019 Baca Temizliği			

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	Audit evidence and examples Statements on implementation and e		
Date	31.01.2019		
Breakdown	Oil leakage		
Repair	Sensor was squeezed, engir	he covers were isolated by	
	applying liquid seal. Oil was		
Repaired By	Idea Jeneratör-Service Form		
Repaired by Idea Jenerator-Service Form Nr. 0032			
Kadıköy Campus:			
Machine Name	Elevator	Generator	
Date	11.06.2019	22.05.2019	
Maintained By	Etaş Asansör	Aksa Jeneratör	
Service Form Nr	0497	067182	
		Γ	
Machine Name	Water treatment device	Elevator	
Date	29.01.2019	18.04.2019	
Breakdown	Leakage	Mirror was broken	
Repair	Device was changed	Mirror was mounted	
Repaired By	Woongjin eversky	Etaş Asansör-Service form nr: 00754	
Inspection samples:	n number: 1660-1669.		
Inspection samples: Machine	Sprink system	Elevator 04 03 2019	
Inspection samples: Machine Date	Sprink system 08.03.2019	04.03.2019	
Inspection samples: Machine Date By Report nr Bahçelievler Campus:	Sprink system 08.03.2019 Uzman Muayene Gözetim SA-19.0526	04.03.2019 IQNorm I-004400	
Inspection samples: Machine Date By Report nr Bahçelievler Campus: Suitable lighting, ventilat security infrastructure. 1 a year by the supplier. L 25.04.2018, invoice num Elevator's last periodical Kadıköy Campus: Suitable lighting, ventilat	Sprink system 08.03.2019 Uzman Muayene Gözetim SA-19.0526 tion is provided for the area. Compar 4 fire tubes are available, they are a atest checks are realized by AVK Senber: 595. I inspection was on 04.07.2018, and tion is provided for the area. Compar	04.03.2019 IQNorm I-004400 hy has a high-tech electronic ccessible and inspected once ervis ve Bakım Hizmetleri, on result is not conforming.	
Inspection samples: Machine Date By Report nr Bahçelievler Campus: Suitable lighting, ventilat security infrastructure. 1 a year by the supplier. L 25.04.2018, invoice num Elevator's last periodical Kadıköy Campus: Suitable lighting, ventilat security infrastructure. 5 a year by the supplier. L	Sprink system 08.03.2019 Uzman Muayene Gözetim SA-19.0526 tion is provided for the area. Compare a stest checks are realized by AVK Sember: 595. I inspection was on 04.07.2018, and tion is provided for the area. Compare a stest checks are realized by AVK Sember: 595. I inspection was on 04.07.2018, and a fire tubes are available, they are a atest checks are realized by Seçkin	04.03.2019 IQNorm I-004400 ny has a high-tech electronic ccessible and inspected once ervis ve Bakım Hizmetleri, on result is not conforming. ny has a high-tech electronic ccessible and inspected once Ticaret, on 15.05.2019.	
Inspection samples: Machine Date By Report nr Bahçelievler Campus: Suitable lighting, ventilat security infrastructure. 1 a year by the supplier. L 25.04.2018, invoice num Elevator's last periodical Kadıköy Campus: Suitable lighting, ventilat security infrastructure. 5 a year by the supplier. L Machine	Sprink system 08.03.2019 Uzman Muayene Gözetim SA-19.0526 tion is provided for the area. Compare 4 fire tubes are available, they are a atest checks are realized by AVK Set ber: 595. I inspection was on 04.07.2018, and tion is provided for the area. Compare 3 fire tubes are available, they are a atest checks are realized by Seçkin	04.03.2019 IQNorm I-004400 hy has a high-tech electronic ccessible and inspected once ervis ve Bakım Hizmetleri, on result is not conforming. hy has a high-tech electronic ccessible and inspected once	
Inspection samples: Machine Date By Report nr Bahçelievler Campus: Suitable lighting, ventilat security infrastructure. 1 a year by the supplier. L 25.04.2018, invoice num Elevator's last periodical Kadıköy Campus: Suitable lighting, ventilat security infrastructure. 5 a year by the supplier. L Machine Serial Nr	Sprink system 08.03.2019 Uzman Muayene Gözetim SA-19.0526 tion is provided for the area. Compare 4 fire tubes are available, they are a atest checks are realized by AVK Sember: 595. I inspection was on 04.07.2018, and tion is provided for the area. Compare 3 fire tubes are available, they are a atest checks are realized by Seçkin Generator 21380482	04.03.2019 IQNorm I-004400 ny has a high-tech electronic ccessible and inspected once ervis ve Bakım Hizmetleri, on result is not conforming. ny has a high-tech electronic ccessible and inspected once ervis, on 15.05.2019. Expansion tank -	
Inspection samples: Machine Date By Report nr Bahçelievler Campus: Suitable lighting, ventilat security infrastructure. 1 a year by the supplier. L 25.04.2018, invoice num Elevator's last periodical Kadıköy Campus: Suitable lighting, ventilat security infrastructure. 5 a year by the supplier. L Machine Serial Nr Capacity	Sprink system 08.03.2019 Uzman Muayene Gözetim SA-19.0526 tion is provided for the area. Compare 4 fire tubes are available, they are a atest checks are realized by AVK Sember: 595. I inspection was on 04.07.2018, and tion is provided for the area. Compare 3 fire tubes are available, they are a atest checks are realized by Seçkin Generator 21380482 110 kva	04.03.2019 IQNorm I-004400 hy has a high-tech electronic ccessible and inspected once ervis ve Bakım Hizmetleri, on result is not conforming. hy has a high-tech electronic ccessible and inspected once result is not conforming. hy has a high-tech electronic ccessible and inspected once Ticaret, on 15.05.2019. Expansion tank - 323,9 kw – 500 I	
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Requirement	Audit evidence and examples; Statements on implementation and evaluation					
	Bahçelievler Campus Bahçelievler campus	s fire tubes' last periodic cor s elevators' periodic inspecti	ntrol has not been performed. on result is not suitable, but			
	the non-conformance has not been eliminated.					
	Cause: Lack of planning.	we at a second like a second second				
	Corrective action: All the co will be made.	rrections will be performed,	and more effective planning			
7.1.5	will be made.					
Monitoring and measuring resources	Laboratory Equipment Maintenance and Calibration Procedure PR.LAB.002, rev.01, 31.05.2017, is documented.					
	Measurement Equipment List measurement and monitoring		he calibration status of the			
	Equipment Name	Plaster cutting machine	Flask washing device			
	Serial Nr	DHF-B02-08 / 3	DHF-B02-01			
	Date	09.03.2019	24.05.2019			
	Calibrated By	Optomed Kalibrasyon	Optomed Kalibrasyon			
	Cert no Department in use	915.210 Mechanical laboratory	915.203 Plastic and acrylic Lab			
7.1.6	Department in use	Mechanical laboratory	Flastic and act yild Lab			
Organizational knowledge	this knowledge from; corrective	e actions suppliers' feedback, k, etc. Knowledge of the organ and to achieve conformity of p rotected and made available to o how to achieve any necessa	nization which are necessary for roducts and services. This the extent necessary. The ry additional knowledge and			
7.2 Competence	Staff competencies are docum and skills separately.	nented in Job descriptions as e	ducation, training, experience			
	Also, Orientation Training recording for all training for rel		ing card which is used also			
	Annual training plan for 2018-2	2019 year is checked.				
	Training Participation Form FF effectiveness of the trainings is					
		ion Methods / 19-20.04.2019 /	Trainer: Ayşen Laçinel			
	-	4.2019 / Trainer: Irmak Ildır system) / 10.04.2019 / Trainer:	Nihan Güneş			
	Participants: Banu Bayrak-Quality S	Specialist				
	 Gülcan Kargın-Faculty 	•				
	 Feride Dizdar- Faculty 					
	-	nservatory Secretary-Kadıköy				
		e-Licence Secretary-Bahçeliev	vler			
	 Trainings are evaluated on FR.INK.016, checked for: Effective communication methods / 05-06.04.2019 / Trainer: Ayşen Laçinel. Result: 5 / 5 					
7.3. Awareness	Orientation training are record last period:	ed on FR.INK.015. 2 new hired	d staffs for Head Office since			

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Requirement	Audit evidence and examples; Statements on implementation and evaluation
	 Ümit İnci, Driver, 06.05.2019. Orientation: 06.05-20.06.2019 By: Oğuzhan Hıdırlar, Burhanettin Demirci
7.4 Communication	Announcement boards, users, internal notices and e-mail are the ways of internal communication system, detailed in all separated process flow chart. last management review 07.06.2018 via e-mail, on 01.06.2018.
	Communication Table, FR.KYS.006, Rev.00, is used to control communication process.
7.5. Documented information	Quality management system manual is details general framework of management system and approved by General Manager. General elements are defined with implementations and procedure references. 2015 system was adapted to the QMS.
7.5.1 General 7.5.2 Creating and updating	 Document and Quality Records Control procedure, PR.KYS.001, rev.08, 16.02.2018 is used. Document Master and Distribution List, LS.KYS.001 is used to trace the distribution. Procedures, instructions and plan lists are used to trace revision status of the documents. The company documents were update to the new standard of ISO 9001:2015. Samples: Document and Quality Records Control procedure, PR.KYS.001, rev.08 Back-up Procedure, PR.BIS.014, rev.02, 13.10.2016
	 External documents are listed and controlled on External and Legal Documents List, LS.KYS.003. Samples: Labor law-4857 Personal protective equipment regulation -26361
7.5.3 Control of documented	Document and Quality Records Control procedure, PR.KYS.001, rev.08, 16.02.2018, is used.
information	 Quality Record List, LS.KYS.02 is used to define responsibilities, retention time of the records. Samples: PL.İNK.001 annual training plan 1+5 years. FR.KPG.008 seminar evaluation form 1+5 years LS.LAB.001 measurement equipment list 1+5 years.
	Electronic documents control, and backup system is identified in Back-up Procedure, PR.BIS.014, rev.02, 13.10.2016, as well.
	The entire system documentation including internal and external correspondence can be accessed and tracked via the EBYS (Electronic document management system)
8 Operation	The requirements are:
8.1 Operational planning and control	Offer and quotation are reviewed by candidate relationship manager. Project plan form is prepared to launch service activity as well as defined in quality system and national regulation. Project planning and realization procedure is implemented and identified in operation process plan.
8.2 Requirements for products and services	Press and public relations, digital communication and publications procedure, PR.KIT.001, 02.05.2018, rev.03. is documented to regulate the management of the customer related processes. Computerized package program is used effectively to planning of project.
8.2.1 Customer communication	When a new student comes, Student Affairs Responsible evaluates the application's feasibility.

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Requirement	Audit evidence and examples; Statements on implementation and evaluation					
	Student communication is provided via e-mail, face to face communication and CRM Software. Customer complaints are recorded and followed by CRM Software. Samples:					
		Head Office	Bahçelievler	Kadıköy		
	Student	Serkan Ağaç	Özcan Duman	Meryem Öksüz		
	Date	26.02.2019	23.01.2019	20.02.2019		
	Complaint	Lunch is cold	Master's degree	Engineering		
			notes' entering	Faculty's computers		
			wasn't completed.	are old		
8.2.2	Action	Catering company	Students Affair	New computers		
Determining the		warning	Department was	were purchased.		
requirements for products	Olasian Data	00.00.0040	warned	07.04.0040		
and services	Closing Date	28.02.2019	24.01.2019	27.01.2019		
	Information obtained t	hrough various channe	ls (fairs referrals and c	country surveys) and		
8.2.3				ions, the risk department		
Review of the		conducting the necessa				
requirements for products	According to the prepa	ared report, the custom	er representative and t	he related department		
and services	manager are present	for the customer and de	ealer			
		by the relevant custome m is prepared to initiate				
		egulations. Computerize				
	production planning.		ed package program is			
	p					
		ing process plan SR-02	2 has been documented	d to regulate customer-		
	related processes.					
	When a new custome	r order is received, the	sales manager is evalu	ating the feasibility of		
	the claim.					
8.2.4	The order tracking form is used effectively for order tracking.					
Changes to requirements						
for products and services	They have indicated to	o the customers the tec	chnical information and	their use in product		
	catalogs.					
8.3 Design and development						
of products and services		e kept in student files as				
	responsible is informe	ed to relevant staff abou	it changing of the produ	act requirements.		
8.3.1 General						
General	 8.3 clause will 	I be audited at next per	iod.			
8.3.2		· · · · · · · · · · · · · · · · · · ·				
Design and development						
planning						
8.3.3						
Design and development						
inputs						
8.3.4						
Design and development						
controls						
0.05						
8.3.5 Design and development						
outputs						
-						
8.3.6						



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Requirement		Audit evidence and examples tatements on implementation and e		
Design and development changes				
8.4 Control of externally provided processes, products and services				
8.4.1 General	• 8.4 clause will be audited at next period.			
8.4.2 Type and extent of control				
8.4.3 Information for external providers				
8.5 Production and service provision	The service realization is PR.EOG.001.	performed according to Education	and Training Procedure	
8.5.1 Control of production and service provision	Education) and the acade	ms which are approved by the YOK emically schedules which are prepa enate are the main guides for servi	red by the university and	
	Academically boards prep 2547.	pare the annual schedules accordin	ng to the YOK regulation no	
8.5.2 Identification and traceability		on the online system. Identification the student records are Tuzla Cam		
	Student Name	Zeynep Taşdemir	Dilara İslam	
	Student Nr	140904035	171123052	
	Department	Faculty of Health Sciences Physical Therapy Department	Pre-License Department of Health Services	
	Applying Date	01.09.2014	15.08.2017	
	Approval Date	01.09.2014	15.08.2017	
	Applying criteria	University examination point High-school diploma	University examination point High-school diploma	
	Studying Period	2014-2015 / 2018-2019	2017-2018 / 2018 / 2019	
	Graduation Date	31.05.2019	17.06.2019	
8.5.3 Property belonging to customers or external providers 8.5.4 Preservation	Customer property syster reporting of relevant situa know-how Stock inventory is provide	n is identified in quality manual. Co tion is defined effectively. Custome ed by using computerized package se Övet, who has 10 years of work o	ntrol of customer property and er property can be technical data, program effectively. This	
8.5.5 Post-delivery activities	Archiving area is very we	Il designated in the university. Stud dent's data and graduation status.	ent Folder Label, FR.OGR.001	



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	Audit evidence and examples;				
Requirement	Stater	nents on implementation and e			
8.5.6 Control of changes 8.6	Core, sub and supporting processes are defined in Continual Improvement and Process Performance Monitoring Plan QM. Performance criteria are defined and measured for all core processes. Performance results are analyzed by statistical tools and evaluated by management during management review meetings. Quality Control activity is detailed in quality control procedure. Banu Bayrak is quality control				
Release of products and services	responsible.				
	 Related Documents when reg Commitment: FR.OG 				
	Residence Document				
	Criminal Record: FR.				
	Military Service Status	s Declaration Form: FR.OGR.0	04		
	Student Name	Zeynep Taşdemir	Dilara İslam		
	Student Nr	140904035	171123052		
	Department	Faculty of Health Sciences Physical Therapy Department	Pre-License Department of Health Services		
	Applying Date	01.09.2014	15.08.2017		
	Approval Date	01.09.2014	15.08.2017		
	Applying criteria	University examination	University examination		
		point	point		
	Studying Period	High-school diploma 2014-2015 / 2018-2019	High-school diploma 2017-2018 / 2018 / 2019		
	Graduation Date	31.05.2019	17.06.2019		
	Graduation Criteria	Local and European Credit	Local and European Credit		
	Graduation CriteriaLocal and European Credit completion separately General note average 2,78 / 4 = % 71,53 Min 2,00 / 4,00 Recorded on Transcript,Local and European Credit completion separately General note average 2,37 / 4 = % 61,96 Min 2,00 / 4,00 Recorded on Transcript,				
8.7 Control of nonconforming outputs	FR.OGR.014 FR.OGR.014 Management of Nonconformities Procedure, PR.KYS.002, rev.01, 16.02.2018 describes the control of NC services, separation from the confirming services. They record to Corrective Actions Form if any deviation occurs and separate the NC services.				
9 Performance evaluation		s been detected and reported a			
5 Ferrormance evaluation	Ition The requirements are:				
9.1 Monitoring, measurement, analysis and evaluation	Implementation of measurement, collection and validation of data is effective. Measurement of performance of the organization's processes includes; capability of processes, satisfaction of customer and other interested parties.				
9.1.1 General	criteria are defined and meas	Core, sub and supporting processes are defined in process interaction table. Performance criteria are defined and measured for all core processes. Performance results are analyzed by statistical tools and evaluated by management during management review meetings.			
9.1.2 Customer satisfaction		ent satisfaction is done by appl Procedure, PR.OLD.001, 31.09			

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Requirement	Audit evidence and examples;
1	Statements on implementation and evaluation
	Customer Satisfaction is made online.
	Customer satisfaction questionnaire is applied to graduate students. The survey consists of 3 sections and 33 questions. Total has been applied to 955 students. Likert type scale was used. It is average.
	Lecturer assessment questionnaire is applied to current students. A total of 66.360 questionnaires were administered using 10 questions and 5-point likert scale. The average is 4,15 / 5 (I agree + I fully agree).
9.1.3 Analysis and evaluation	Quality management representative Prof. Dr. Güner Gürsoy-Rector Assistant is responsible for data analysis activities. Sampled topics: • Customer satisfaction • Quality objectives • NCP • CA
	 Risk and opportunities analyses Internal and external expectations Trainings Customer demands / complaints
	Employee suggestionsSupplier performance evaluation
9.2. Internal audit	 Planning, conducting and reporting results of the internal audit are provided and the respective records are retained. Internal Audits Procedure, PR.ICD.001, Rev.02, 08.02.2018 is established and implemented. It is appropriately maintained and contains: The responsibilities and requirements for planning and conducting audits, reporting of results and retaining associated records; The determination of audit criteria, scope, frequency and methods
	Internal audit plan PL.ICD.001 covers all departments and environmental processes of the company. Internal audit questionnaire LS.ICD.001 is prepared and covers all clauses of ISO 9001:2015. Internal audit results are recorded on Internal Audit Report, RP.ICD.001.
	Some of trained internal auditors are: Banu Bayrak, Elif Ovaz Demir and Serap Evcil. Impartial auditors are selected.
	Last internal audit was held on 06-22.05.2019.
	<u>Tuzla Campus</u> : Last internal audit was held on 06-13.05.2019. 20 departments are audited, and 16 non-conformances are detected.
	Mecidiyeköy Campus: Last internal audit was held on 20.05.2019. 5 departments are audited, and 0 non-conformance is detected.
	Bahçelievler Campus: Last internal audit was held on 22.05.2019. 4 departments are audited, and 0 non-conformance is detected.
	<u>Kadıköy Campus</u> : Last internal audit was held on 19.04.2018. 4 departments are audited, and 0 non-conformance is detected.
	Non-critical NC 2 / 2: Kadıköy campus' internal audit records were not seen. Cause: Workload. Corrective Action: Related campus' internal audit will be performed and responsible will be notified about the non-conformance.



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Requirement	Audit evidence and examples; Statements on implementation and evaluation				
9.3.	Management review				
Management review	Management review procedure PR.OKN.001, rev. 04, 29.01.2018 is documented and implemented for realization of management review meetings.				
9.3.1 General	Inputs (internal audit results, customer feedbacks, corrective actions, performance evaluation results, improvement suggestions etc.) met the standard and documented in management review meeting agenda with 4 participants. Samples:				
9.3.2		udit results	articipants. Camples.		
Management review inputs		meeting decisions			
	 Student survey results 				
		suppliers' performances	, etc.		
9.3.3 Management review outputs	requirement. Meeting meeting. Last manage • Near miss	eeded, product and syst report, FR.OKN.001, re ement review meeting w s forms use will be appli ng regulation will be revi	ev.00 is checked for evid vas held on 12.06.2019. ed	dence and decisions of	
10 Improvement	•	e requirements are:			
•		fulfilled partly fulfilled, see non-crit not fulfilled, see critical not	ical nonconformity No. nconformity No. ; is clo	osed yes no	
10.1		d improvement procedu			
General	available for regulation of corrective actions. Actions implemented after internal & external audit non-conformances, etc. are recorded on Corrective Actions Form, FR.KYS.001 and followed with Corrective Actions Follow-up Form, LS.KYS.006. Due dates, relevant departments, actions and results are seen on it.				
10.2 Nonconformity and corrective action	initiated and closed a	actions (31 from Tuzla, t last period from genera d just for NC. Samples:		om Kadıköy) were r complaints. Corrective	
		Head Office	Head Office	Bahçelievler	
	Action Nr	2019-09	2019-ŞK-01	2019-ŞK-05	
	From	Internal audit	Control	Student complaint	
	Opening Date	13.05.2019	10.01.2019	23.01.2019	
	NC	Purchasing Order Form FR.MAI.012, is not used.	Archive department's cipher device is broken.	Master's degree notes' entering wasn't completed	
	Action Staff was warned about the related form's use. Device was repaired, and archive department is always locked. Students Affair Department was warned				
	Closing Date	31.05.2019	12.01.2019	30.01.2019	
10.3 Continual improvement	Management reviews demonstrate the cont	, objectives, internal au inual improvement.	dits, corrective and prev	ventive actions	

Date

Technical expert

Duran

Lead Auditor

Date