



Registration Certificate

This is to certify that

RNB GLOBAL UNIVERSITY

RNB GLOBAL CITY, GANGANAGAR ROAD, BIKANER - 334601,
(RAJASTHAN), INDIA.

has been assessed by RAPL and found to comply with the requirements of

ISO 50001 : 2018 Energy Management System

For the following activities:

PROVIDING EDUCATION IN UNDER GRADUATE (UG), POST GRADUATE (PG) AND PH.D IN
VARIOUS DISCIPLINES WITH EMPHASIS ON SKILL DEVELOPMENT, INDUSTRY
INTEGRATION AND HOLISTIC ECO-SYSTEM.

Certificate Number: E2024039040
Date of certification: 27/03/2024
1st Surveillance on or before: 26/03/2025
IInd Surveillance on or before: 26/03/2026
Certification Valid Until: 26/03/2027
Initial Date of certification: 16/02/2021



Director (Certification)
Royal Assessments Pvt. Ltd.



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This Certificate can be verified at www.royalapl.com

This Certificate remains the property of Royal Assessments Private Limited. Must be returned on request or if certificate is withdrawn. Validity of this certificate is subject to successful surveillance audits.



Audit Report

Client Name: RNB Global University

Audit Type: Re-Certification Audit

Disclaimer: The Auditing is based on a sampling process of the available information and consequently there is an element of uncertainty which may be reflected in the Audit findings. Those relying or acting upon the Audit results and conclusions to be aware of this uncertainty. The Audit recommendations are subject to an independent review, prior to decision.

Royal Assessments Pvt. Ltd.

EGAC Accredited Certification Body

Head Office: 623 A, Tower B, iThum, Plot No. A 40, Sector 62, Noida-201301, India

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| Royal Assessments Pvt. Ltd. Re-Certification Audit Report | | |
|--|--|--|
| 1. | Identification of Certification Body (ISO 17021-1:2015 Cl. 9.4.8.2 (a)) | Royal Assessments Pvt. Ltd. |
| 2. | Client Name (ISO 17021-1:2015 Cl. 9.4.8.2 (b)) | RNB Global University |
| 3. | Type of Audit (ISO 17021-1:2015 Cl. 9.4.8.2 (c)) | Re-Certification Audit |
| 4. | Audit Criteria (ISO 17021-1:2015 Cl. 9.4.8.2 (d)) | ISO 14001:2015 (EMS) and ISO 50001:2018 (EnMS) |
| 5. | Audit Objective (ISO 17021-1:2015 Cl. 9.4.8.2 (e)) | Evaluate the continuation implementation and effectiveness of management system for certification. |
| 6. | Audit Scope (ISO 17021-1:2015 Cl. 9.4.8.2 (f)) | Providing Education in Under Graduate (UG), Post Graduate (PG) and Ph. D. in Various Disciplines with Emphasis on Skill Development, Industry Integration and Holistic Eco-System. |
| 7. | Any deviations from audit plan observed (ISO 17021-1:2015 Cl. 9.4.8.2 (g)) | NA |
| 8. | Any significant issues impact on the audit programme observed (ISO 17021-1:2015 Cl. 9.4.8.2 (h)) | NA |
| 9. | Auditor Team Leader / Members / TE / Observer (ISO 17021-1:2015 Cl. 9.4.8.2 (i)) | Atul Kashyap |
| 10. | Date & Site of Audit / Additional site verified (ISO 17021-1:2015 Cl. 9.4.8.2 (j)) | Audit Date: 12-14/03/2024 (3 Man-Days); Audit Address: RNB Global City, Ganganagar Road, Bikaner-334601 (Rajasthan), India. |
| 11. | Observations & Findings (ISO 17021-1:2015 Cl. 9.4.8.2 (k)) | Mentioned at relevant clause in matrix given below. |
| 12. | Changes to management system since last audit (ISO 17021-1:2015 Cl. 9.4.8.2 (l)) | No changes to organization structure since stage 1 audit. Organization chart remains the same. |
| 13. | Any unresolved issues identified (ISO 17021-1:2015 Cl. 9.4.8.2 (m)) | None. |
| 14. | Whether the audit is combined, joint or integrated (ISO 17021-1:2015 Cl. 9.4.8.2 (n)) | Single System Audit. |
| 15. | Disclaimer (ISO 17021-1:2015 Cl. 9.4.8.2 (o)) | This audit has been conducted based on a sampling process of the available information. |
| 16. | Audit team recommendation (ISO 17021-1:2015 Cl. 9.4.8.2 (p)) | Recommended Continuation of Certification. |
| 17. | Control of Certificate, Logos (ISO 17021-1:2015 Cl. 9.4.8.2 (q)) | Verify Logo usage as per RAPL logo rules. |



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| 18. | Previous audit findings, effectiveness of corrective action (ISO 17021-1:2015 Cl. 9.4.8.2 (r)) | None |
| 19. | Statement of conformity by audit team (ISO 17021-1:2015 Cl. 9.4.8.3 a,b,c)) | The management system audited is found to be effective and in compliance with requirements of ISO 14001:2015 and ISO 50001:2018 except the findings mentioned at relevant clause. System is found to be capable of meeting applicable requirements and expected outcomes. Internal audit and management review process is effective. Refer to details given in clause wise cross reference matrix at relevant clauses. Scope is adequately defined and found appropriate. Based on the outcome it is confirmed that audit objectives have been fulfilled. |

Clause Wise Cross Reference Matrix

4.1 Understanding organization and its context

Procedure of Context of Organization is identified. Internal & External issues identified and documented in-RGU/ISO-01/4.1.

Internal issue:

- 1) Passing Average of Students
- 2) Stability of Teachers which is less than 90%
- 3) Adequate Space & Teaching Resources
- 4) Competence-Top Level Management is competent & Middle Level Management is competent
- 5) Values-Defined and implemented

External issue:

- 1) Competition among similar institutes
- 2) Government regulations and changes in the laws

4.2 Understanding the needs and expectations of interested parties

Interested parties identified and documented in-RGU/ISO-01/4.2. Needs and Expectations also documented. Eg:

- 1) 46+ full time employees, salary, insurance.
- 2) Domestic suppliers,

Reference:

| Internal Parties | Requirements |
|---|--|
| Staff including Teachers (Faculties), Students, Administration. | Terms & Conditions Better Teaching & Resources Growth & Rewards Top of the Ranking Safe Working Conditions |
| Contractors | Adherence to Agreements |
| External Parties | Requirements |
| Legal | Government Registration Department |
| Suppliers | Adherence to Payment Terms |

4.3 Determining the scope of EMS

Scope defined in RGU/ISO-01/B as- "Providing Education in Under Graduate (UG), Post Graduate (PG) and Ph. D. in Various Disciplines with Emphasis on Skill Development, Industry Integration and Holistic Eco-System." Non-Applicability Claimed-None.

4.4 EMS / EnMS and its processes



| |
|---|
| <p>Process matrix chart documented in RGU/ISO-01/4.4 processes defined, 1. Administration, 2. HRM, 3. Academics, 4. Examination, 5. Purchasing, 6. QC, 7. Internal Audit, 8. Management Review, 9. Environment, 10. Energy Management, 11. Maintenance;</p> <p>11 processes have their inputs and outputs defined.</p> <p>Eg: Academics→ Input: Faculty, Adequate Spaces, Facility Output: Examination, Result, Institute Growth</p> <p>Internal Audit→ Inputs. Audit Plan / Auditors, Output. Audit Report, NC Reports.</p> <p>Human Resource→ Input: Training Plan, Resources Planning Sheet, Recruitment Form, Output: Competent Manpower, Effectiveness of Resources, Training Record;</p> <p>All processes have WIs, Procedures defined, for example of process Internal Audit which use Procedure: RGU/PS/03 as guidelines. All processes have resources defined, Eg: Academics → Faculty, Spaces (Classrooms, Computer Facility, Library). Process outcome evaluated during management review.</p> |
| <p>5.1 Leadership and commitment</p> <p>Top management commitment is visible, signed records of management review etc. Records evident for audit opening / closing meetings with attendance signatures of Top Management Team. Policy and related objectives documented in RGU/ISO-01/EP. Signatures of Top Management evident for approval. All process (including Teaching & Marketing) has been done under the guidance of Top Management.</p> |
| <p>5.2 EMS and EnMS Policy</p> <p>Environment policy established and documented in RGU/ISO-01/EP. Policy is displayed in workplace. Verified record of trainings. Policy includes commitment to satisfy requirements related to all interested parties (Internal/External) and continual improvement of EMS. Interviewed two staff for awareness about policy; Dr. Bajrang Singh Rathore (Professor), Dr. Ashok Prem (Associate Professor), found adequately aware. Policy communicated to all interested parties via print on letter head.</p> |
| <p>5.3 Organization roles, responsibilities and authorities</p> <p>Organization chart documented in file RGU/MGT/D/01, Job descriptions are also defined and documented, Staff provided with charter of duties. Processes documented with responsible person;</p> <p>Eg: Teaching→ Teacher</p> <p>Interviewed Dr. Arpit Chopra (Assistant Professor), Dr. Vinay Nain (Assistant Professor), found adequately aware about their roles and responsibilities.</p> |
| <p>6.1 Action to address risk and opportunity</p> <p>Procedure for Risk Analysis & Management-RGU/PS/07;</p> <p>Risks & opportunities from internal and external sources considered;</p> <p><u>Verified risk assessment & mitigation Sheet-RGU/MGT/Rec/05:</u></p> <p>Process-Teaching;</p> <p>Objective-To delivered best training to student;</p> <p>Indicator-Result of students in different courses;</p> <p>Risk-Incompetent Techers hired;</p> <p>Category-High;</p> <p>Mitigation-Analysis Result take feedback from students about Teacher performance;</p> |
| <p>6.2 Environment & Energy objectives, targets and planning to achieve them</p> <p>Process wise measurable Environment objective defined. Progress discussed in management review,</p> <ol style="list-style-type: none"> Students Satisfaction (Target-95%) Latest Digitalized Service Delivery (Target-95%) Parents Complain (Target <02%) <p>Interview with two faculties Mr. Ashok Prem & Ms. Vatsala Gaur about Environment objectives found satisfactory. Progress of objectives is discussed during management review.</p> |
| <p>6.3 Planning of changes</p> <p>Procedure for Change Management-RGU/PS/08. No record of any change evident since system implementation.</p> |
| <p>6.3 Energy Review (EnMS)</p> |



| |
|---|
| <p>Energy Analysis carried out and data prepared responsible person.</p> <p>Purpose</p> <ul style="list-style-type: none"> • Details and reference period; • Analysis of electricity consumption; • • Analysis of the powers involved; • Power factor analysis; • Electricity consumption by activity; • Energy Performance Indices; |
| <p><u>6.4 Energy performance indicators (EnMS)</u></p> <p>A breakdown by General Services has been analysed in the tables:</p> <ul style="list-style-type: none"> - Consumption during the reference period - Energy Driver - General performance indication (PGI) - Specific performance indicator (IPS) - Benchmark value Adjustment factors are defined. <p>EnPIs to provide information on the energy performance of operations and update EnPIs when economic activities or reference consumption have changes that affect the importance of EnPIs. EnPIs are reviewed and compared with reference consumption as appropriate in the management review and annually in the MOD POE energy objectives planning document.</p> |
| <p><u>6.5 Energy baseline (EnMS)</u></p> <p>The organization has determined EnPI that appropriate to measure and monitor its energy performance. Internal baselines have been defined to close the observation of the previous year. In the event that the energy performance indices no longer reflect.</p> |
| <p><u>6.6 Planning for collection of energy data (EnMS)</u></p> <p>Percentage consumption is weighted by the following categories:</p> <p>0 – 10% → weight 1;</p> <p>10 – 25% → weight 2;</p> <p>>25% → weight 3.</p> <p>Seen excel table report in consumption trend of GAs, electric energy general trend and yearly specific detail (per kind of use / application)</p> |
| <p><u>7.1 Resources</u></p> <p>Adequate resources provided by top management. Resource requirement and utilization discussed during management review.</p> |
| <p><u>7.2 Competency, 7.3 Awareness</u></p> <p>Each process has identified responsible person. Full time employees available for executing processes. Personnel found qualified and experienced as per competency matrix, training needs identified and recorded in RGU/HRR/03;</p> <p>Verified Record of Trainings in RGU/HRR/01;</p> |
| <p><u>7.4 Communication</u></p> <p>Communication Management Procedure–RGU/PS/17, Internal communication methods include meetings, emails and memos to employees. Communication Matrix: Doc No: RGU/CM/Rec/01.</p> <p>Type of information (internal or external) to be shared, responsible person and process documented.</p> <p>Eg:</p> <p>Information–Complaints</p> <p>Type–External</p> <p>Responsible Person–Mr. Raj Rajesh</p> <p>Procedure–Complaint Management (RGU/PS/16)</p> |
| <p><u>7.5 Documented Information, 7.5.2 Creating and updating, 7.5.3 Control</u></p> |



Procedure for Control of documented information—RGU/PS/01. Each document well identified with number, revision, date & approving authority. Distribution record is maintained in sheet RGU/MR/L/02, with a list of documents Distributed, Rev. distributed and signature of the user who received the copy. Verified master list of documents—RGU/MR/L/01, verified 2 documents (RGU/MR/Rec/01, Rev 00, RGU/MR/L/02, Rev 00), all current versions under use. Doc. RGU/MR/L/01 requires all changes in documents to be reviewed and approved by respective responsible person. Approved changes are distributed, record of distribution maintained—RGU/MR/L/01. Retention period defined.

8.1 Operational Planning & Control

Institute's Process Flow defined and adequately documented. Requirements related to faculty training, and students teaching services.

Apply for admission by filling the application form through online & offline—verification of applicant eligibility status through the form by office—having met the minimum entry requirements—for chosen courses—admission—signing the declaration—Classes start—Quarterly Examination—Result—Analysis & Evaluation.

Evidence of planning, to meet customer requirements in from of various records is evident. Environment plan Services Verification Adequate system in place.

Process Flow Diagram are evident and found ok as Doc. No.—RGU/PFD/F/01

8.2 Emergency preparedness and response

Seen all Site—specific emergencies are identified and emergency response plan is prepared. ERT is defined and emergency numbers are displayed. Awareness verified with First Aider. Natural and Manmade emergencies are identified as Fire, Fall from Height and Incident. Seen Mock Drill Report – Found Appropriate. Verified Records for the Same, Found Satisfactory.

8.2 Design (EnMS)

All the activity related to customer interface and determination of the requirements area managed by procedures certified at POI 8.2 and related Job Instructions use related processes are monitored through specific activities defined in the Energy Manual.

Through which the maintenance and controls of plants, equipment, systems and processes that use energy are managed in order to ensure that the relative energy performance is in line with that expected.

Consequently, more significant processes, plants and equipment are defined as activities and controls monitored through the excel sheet.

Maintenance is managed in an integrated way with other systems.

8.3 Procurement (EnMS)

The activities do not provide for particular energy consumption, the very nature of the services provided by the university do not provide for electricity consumption. The monitoring system installed provides for the evaluation of electricity. Activity integrated with the 9001 system.

9.1 Monitoring, measurement, analysis and evaluation / energy performance and the EnMS

Processes to be measure based on, objectives through review and customer satisfaction through feedback. Feed backs received from customers are analyzed and action plan for improvement (if any) determined, present level of Students satisfaction is 90 %. Fixed Target was 95%, the Environment Objective is not changed. Customer satisfaction measured on the basis of Feedback from RGU/MM/Rec/12 available for all Students.

Analysis & Evaluate is done against Student satisfaction which includes complaint, feedback and Environment Checks address risk & opportunities & also do against characteristics define in the QSP.

9.1.2 Evaluation of Compliance

Some of the EMS Legal Requirements are:

1. Register Under Ram Bajaj Foundation Society, Bikaner;
2. UGC Letter: F.8-20/2015(CPP-I/PU) Dated: 03.11.2022;
3. Rajasthan Gazette Extraordinary Letter No. 2 (20) Vidhi/2/2015, Dated: 24.04.2015;

All the Evidence was verified such as Consent for Water, Air, Noise from Pollution Control Board. Legal Compliance – 100%;



9.2 Internal Audit

Procedure-RGU/PS/03; Frequency-Half Yearly

Audit plan-RGU/MR/Rec/03; Audit checklist-RGU/MR/Rec/05

Date of Last Audit-As per Planned Schedule.

Summary: All EMS processes are covered in internal audit schedule, 2 minors' non-conformities were raised in internal audit & all are suitably addressed. Verified internal audit non-conformity reports in work format RGU/IQA/Rec/15. Internal Auditor is independent of all functions. All non-conformities suitably addressed and subsequently closed out.

9.3 Management Review

As per procedure for management review RGU/PS/05, management review is done bi-annually after internal audit.

MR Participants: Dr. Gajendra Singh Rathore (President), Dr. Anil Kaushik (Professor & Dean), Dr. Surendra Singh Shekhawat (Dean), Dr. Rakesh Bhargava (Professor & Dean – Research), Dr. Dipali Gupta (Professor & Registrar), Dr. Brijesh Dutta Sharma (Professor & Dean), Mr. Chaturbhuj Ojha (Manager), Ms. Rekha Sharma (Hostel Warden); Verified minutes of review-RGU/PS/05; All other agenda points adequately discussed including resource requirements and outcome of internal audit.

10.1 Improvement-General

List of opportunities-RGU/QI/Rec/013 & Relevant Improvement is Defined in Documents.

10.2 NC & Corrective action

Procedure for complaint management-RGU/PS/16; Responsible authority-Manager

Procedure for non-conforming Services-RGU/PS/04; Responsible authority-Manager

Verified record of compliant and corrective action found Satisfactory.

10.3 Continual Improvement

Management review decisions being worked upon. Process KPI's monitored and measured Customer satisfaction measure.

Audit Conclusion (Tick the applicable)

☒ Recommended Re-Certification

SIGN OFF

The contents of this report are confidential between the client and RAPL. No information contained herein will be disclosed by RAPL to any third party except where required by a recognized accreditation body in order to establish compliance with accreditation requirements. If you wish to distribute copies of this report to anyone outside the organization then complete report must be distributed.

Signed:

Atul Kashyap

Atul Kashyap

Position: Lead Auditor / Auditor

