



Management System Certification
Audit Summary Report
Доклад от одит на Система за Управление (СУ)

Organization: <i>Организация:</i>	Burgas Free University Бургаски Свободен Университет				
Address: <i>Адрес:</i>	62, San Stefano Str, ул.Сан Стефано 62, Burgas, 8000				
Standard(s): <i>Стандарт(и):</i>	ISO 9001:2008	Accreditation Body(s): <i>Акредитиращ орган:</i>	UKAS		
Representative: <i>Представител:</i>	Mrs. Evelina Dineva Доц. Евелина Динева				
Site(s) audited: <i>Одитуран(и) обект(и):</i>			Date(s) of audit(s): <i>Дата(и) на одита:</i>	12-13.09.2016	
EAC Code: <i>ЕАС Код:</i>	34.1, 37	NACE Code: <i>НАСЕ Код:</i>	73, 73.1, 73.10, 73.2, 73.20, 80.30 , 80.42	Technical Area code:	34.1, 37.2, 37.3
Effective No. of Personnel: <i>Ефективен брой персонал:</i>	156		No. of Shifts: <i>Брой смени:</i>	1	
Lead auditor: <i>Водещ одитор:</i>	Grozdan KRASDEV		Additional team member(s): <i>Допълнителни членове на одиторския екип:</i>		
Additional Attendees and Roles <i>Допълнителни участници и функции</i>	George KONSTANTINOV Yanna PETROVA				
This report is confidential and distribution is limited to the audit team, client representative and the SGS office. <i>Този доклад е поверителен и разпространението му е ограничено до членовете на екипа, клиента и офиса на SGS.</i>					

1. Audit objectives / Цели на одита

The objectives of this audit were:

Целите на този одит бяха:

To determine conformity of the management system, or parts of it with audit criteria and its:

Да определи съответствието на системата за управление, или части от нея с критериите на одита и нейната:

- ability to ensure applicable statutory, regulatory and contractual requirements are met, *способност да осигури, че приложимите закони, нормативни и договорни изисквания за спазени,*

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- effectiveness to ensure the client can reasonably expect to achieve specified objectives, and ефективност да осигури, че клиентът може да очаква, в рамките на разумното да постигне определените цели и
- to identify as applicable areas for potential improvement. да определи, където е възможно, области за потенциално подобрене.

2. Scope of certification / Обхват на сертификация

Education of students to be awarded Bachelor`s, Master`s and Doctoral degrees; scientific research activity, international cooperation in the area of higher education; qualification activity

Обучение на студенти за придобиване на бакалавърска, магистърска и докторска степен; научноизследователска дейност; международно сътрудничество в областта на висшето образование; квалификационна дейност

Exclusions from requirements of the Standard – par. 7.5.1f and par. 7.5.2

Has this scope been amended as a result of this audit? Yes No

Направени ли са корекции в обхвата на сертификация, в резултат от проведеня одит?

This is a multi-site audit and an Appendix listing all relevant sites and/or remote locations has been established (attached) and agreed with the client Yes No

За одитите, провеждани на повече от една площадка се попълва Приложение, описващо всички площадки и/или отдалечени райони, което се съгласува с клиента (приложено към доклада)

For integrated audits, confirm the current level of the client's IMS integration: N/A Basic High

За интегрирани одити, потвърдете настоящото ниво на интеграция на системата за управление:

неприложимо базово високо

3. Current audit findings and conclusions / Заключение от одита

The audit team conducted a process-based audit focusing on significant aspects/risks/objectives required by the standard(s). A sampling process was used, based on the information available at the time of the audit. The audit methods used were interviews, observation of activities and review of documentation and records.

The structure of the audit was in accordance with the audit plan included as an annexe to this summary report.

Одиторският екип осъществи одит, базиран на процесите в организацията и фокусиран върху важни аспекти/рискове/цели, изисквани от стандарта. Беше приложен извадков проход на основата на наличната информация по време на одита. Изполваните методи за проверка бяха интервюта, наблюдение на дейностите, и преглед на документацията и записите.

Одитът беше организиран в съответствие с плана за одит, приложен към този доклад.

The audit team concludes that the organization has has not established and maintained its

Одиторският екип заключи, че е не е внедрила и поддържа организацията

management system in line with the requirements of the standard and demonstrated the ability of the system to systematically achieve agreed requirements for products or services within the scope and the organization's policy and objectives

система за управление съгласно изискванията на стандарта и демонстрира способността на системата систематично да реализира съгласуваните изисквания за продуктите или услугите, включени в обхвата, целите и политиката на организацията

Number of nonconformities identified: 0 Major 0 Minor

Брой на установените _____ Критични _____ Второстепенни

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несъответствия:

Therefore the audit team recommends that, based on the results of this audit and the system's demonstrated state of development and maturity, management system certification be:

Базирайки се на резултатите от този одит и показаното ниво на развитие на системата, одиторският екип препоръчва, сертификацията на системата за управление да бъде:

Granted / Continued / Withheld / Suspended until satisfactory corrective action is completed.

Разрешена Продължена Отказана Прекратена докато не се проведат задоволителни коригиращи действия.

4. Previous Audit Results / Резултати от предишния одит

The results of the last audit of this system have been reviewed, in particular to assure appropriate correction and corrective action has been implemented to address any nonconformity identified. This review has concluded that:

Резултатите от последния одит на системата бяха прегледани, за да се докаже, че подходящи коригиращи действия са били предприети за отстраняване на всички открити несъответствия. В следствие на това се заключи, че:

Any nonconformity identified during previous audits has been corrected and the corrective action continues to be effective. (Refer to Section 6 for details)

Всяко несъответствие, открито по време на предишни одити е коригирано и коригиращите действия са ефективни. (вж. точка 6 за подробности)

The management system has not adequately addressed nonconformity identified during previous audit activities and the specific issue has been re-defined in the nonconformity section of this report.

Откритите по време на предишния одит несъответствия не са отстранени и в резултат на това отново са записани като такива в настоящия доклад.

5. Audit Findings / Заключение от одита

The audit team conducted a process-based audit focusing on significant aspects/risks/objectives. The audit methods used were interviews, observation of activities and review of documentation and records.

Одиторският екип проведе одит, фокусирайки се върху значимите аспекти/рискове/цели. Използваните методи бяха интервюта, наблюдение на дейностите и преглед на документацията и записите.

The management system documentation demonstrated conformity with the requirements of the audit standard and provided sufficient structure to support implementation and maintenance of the management system.

Yes No
Да Не

Документираната система за управление демонстрира съответствие с изискванията на стандарта и осигурява база за внедряването и поддържането ѝ.

The organization has demonstrated effective implementation and maintenance / improvement of its management system and is capable of achieving its policy objectives, as well as and the intended results of the respective management system(s).

Yes No
Да Не

Организацията показва ефективно внедряване и поддържане / подобряване на системата си за управление и е в състояние да постигне целите на политиката си, както и желаните резултати на съответната система за управление.

The organization has demonstrated the establishment and tracking of appropriate key performance objectives and targets and monitored progress towards their achievement.

Yes No
Да Не

Организацията е поставила ключови цели и задачи за изпълнение, следи за тяхното спазване, и контролира процеса на постигането им.

The internal audit program has been fully implemented and demonstrates effectiveness as a tool for maintaining and improving the management system.

Yes No
Да Не

Програмата за вътрешни одити е напълно изпълнена и демонстрира ефективност при поддържане и подобряване на системата за управление.

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The management review process demonstrated capability to ensure the continuing suitability, adequacy and effectiveness of the management system. Yes No
Да Не

Прегледът от ръководството демонстрира способност да осигури непрекъснато съответствие, адекватност и ефективност на системата за управление.

Throughout the audit process, the management system demonstrated overall conformance with the requirements of the audit standard. Yes No
Да Не

По време на процеса на одита, системата за управление демонстрира пълно съответствие с изискванията на стандарта.

Certification claims are accurate and in accordance with SGS guidance and the organization is effectively controlling the use of certification documents and marks. N/A Yes No
Не е приложено Да Не

Позоваването на сертификацията е в съответствие с процедурите на SGS и организацията ефективно контролира използването на сертификационните документи и знаци.

6. Significant Audit Trails Followed / По-важни одитирани процеси

The specific processes, activities and functions reviewed are detailed in the Audit Planning Matrix and the Audit Plan. In performing the audit, various audit trails and linkages were developed, including the following primary audit trails, followed throughout:

Прегледът на специфичните процеси, дейности и функции е детайлизиран в Матрица за Планиране на Одита и в План за Одита. По време на одита са разгледани следните по-важни процеси и следните по-важни документи:

- Relating to Previous Audit Results / *Свързани с резултатите от предходен одит:*

There are no non-conformity from last audit

- Relating to this Audit, including any significant changes (eg: to key personnel, client activities, management system, level of integration, etc.);/
- *Свързани с настоящия одит, включително всякакви значителни промени (напр. основен персонал, дейност на фирмата, система за управление, степен на интегрираност и т.н.):*

Management responsibility Management review - Management representative, Rector

Prof. Hristozova, Mrs.Dineva explained the application of the rules. The rules and responsibilities are defined in QM and Rules for activity in BFU.

Appendix 4 Organisation Structure dated 11.06.2010

Reviewed records:

Protocol – meeting of academic council – 24.06.2016

Protocol – meeting of academic council – 26.06.2015

Management review report from the management representative dated 24.06.2016;

Management review report from the management representative dated 26.06.2015;

Report for results of last SGS recertification audit conducted on 02.09.2015

Report for decision from last management review – 24.06.2016

Report for the control of MMD dated 20.06.2016

Report for maintenance of equipment dated 20.06.2016

Report for completion of the annual quality plan – 2015/2016

Report for claims to suppliers dated 20.06.2016

OD 08.01-03 Internal audits summary report dated 23.06.2016

Report for meeting of academic council – 2015/2016 – protocols 5/06.10.2015, 6/04.12.2015, 1/29.01.2016, 2/11.03.2016, 3/27.05.2016, 4/26.06.2016

Report for realization of training plan - 2015

Report for the customer feedback for 2015/2016 academic year

Order for team of QMS – 50/15.04.2014

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Quality objectives 2016/2017 approved on academic council 05.10.2015

Training plan 2016

OD 08.01-01 Internal audit schedule for 2016

Plan for repair, maintenance and sanitation of University for 2016

Plan for repair and maintenance of machines and equipment of heating and ventilation system for 2016

List of MMD dated 18.08.2015

OD NK. 01-01 – Quality policy – dated 10.06.2010 – reviewed, but not change

Quality plan and Quality objectives for 2015/2016 – reporting of implementation of target on management review 24.06.2016

Internal audits. Corrective and preventive actions. Analysis of data

The rules concerning monitoring, measuring and improvements are defined in Quality manual/ 10.06.2010 in par. 8

Appendix 5 Description of processes

Appendix 6 Criteria and evaluation of processes

The rules and responsibilities for internal audits are defined in QM DP 08.01 - internal audit and DP 08.03. Mrs.Dineva explained the application of the rules. There are 9 trained internal auditors

Reviewed records:

OD 08.01-01 Internal audit schedule for 2015

OD 08.01-01 Internal audit schedule for 2016

OD 08.01-02 Audit program – 22.10.2015 (CUN) – OD 08.01-03 Report concerning the corrective actions after internal audit of department – 22.10.2015 (report from internal audit)

OD 08.01-02 Audit program – 11.12.2015 (UMO) – OD 08.01-03 Report concerning the corrective actions after internal audit of department – 11.12.2015 (report from internal audit)

OD 08.01-02 Audit program – 29.02.2016 (CIUN) – OD 08.01-03 Report concerning the corrective actions after internal audit of department – 29.02.2016 (report from internal audit)

OD 08.01-02 Audit program – 24.03.2016 (CITN) – OD 08.01-03 Report concerning the corrective actions after internal audit of department – 24.03.2016 (report from internal audit)

OD 08.01-02 Audit program – 07.04.2016 (HR) – OD 08.01-03 Report concerning the corrective actions after internal audit of department – 07.04.2016 (report from internal audit)

OD 08.01-02 Audit program – 30.05.2016 (CUN) – OD 08.01-03 Report concerning the corrective actions after internal audit of department – 30.05.2016 (report from internal audit)

OD 08.01-02 Audit program – 03.06.2016 (University Library) – OD 08.01-03 Report concerning the corrective actions after internal audit of department – 03.06.2016 (report from internal audit)

OD 08.01-03 Internal audits summary report dated 23.06.2016

OD 08.03-01 Corrective/preventive action request

There are no registered corrective and preventive action for last year

There are no registered customer claims for last year

Chief of UO (education activities) department, Inspectors

Rules are defined in DP 04.01, DP 04.02, Rules for organization of educational activity in BFU 28.06.2013, Rules for admission of students for 2016/2017 year. Internal rules for creating, usage and maintenance of university archive, issued with No. 93-00-1125/19.11.2003.

Mrs. Dimitrova explained the application of the requirements. The requirements are generally followed and the records are available.

Reviewed records:

Reviewed Education plans for master degree: Custom intelligence and investigation, Iconomic and marketing of tourism, Preschool and Primary School Education and social consulting and psychology; Education programs

Filled Register of issued diplomas - reviewed Mrs. Reni Radeva - 1620847651 – master degree in Management of Banks, and Mrs. Hache Ibryam Siuleiman – 1620317650 – master degree in Business administration;

Students personal file for Mrs. Teodora Ivanova, form for registration of students No 86/406, 15411006,

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diploma of high school No 3811-47/10.06.2015, Bill for tax payment;
 Students personal file for Mr. Kristian Vladimirov, form for registration of students No 270/401, 14411002, diploma of high school 7901-96/18.06.2014, Bill for tax payment
 Students personal file for Mrs.Galya Dimova, form for registration of students No 98/406, 13411024, diploma of high school 324-2/25.06.2013, Bill for tax payment
 Education plans and Catalogue for the alternative courses
 Order for receiving of blanks for Diplomas (valuable documents), reg. No 1620017606-615
 General register book "CITN" No.15311001/02.11.2015 – records for Mrs. Plamena Nikolova No 15311031, recorded evaluation from Protocols of examination - 24.06.2016, 12.02.2016, 29.01.2016
 General register book "CITN" No.15311001/02.11.2015 – records for Mrs. Kremena Kovacheva No 15311069, recorded evaluation from Protocols of examination - 24.06.2016, 18.06.2016, 10.06.2016
 Application Form post-secondary education №419/2016 of Mrs. Denica Apostolova, diploma of high school 11142-85/16.06.2016

International cooperation department

The rules and responsibilities of the Management and personnel of International cooperation department are defined in QM par. 7.5.1.3, Rules for International cooperation activity and Rules for selection of applicants for students and teachers mobility in ERAMUS. The main activities are correlated with contacts with other University, application in International programs for exchange of experience, organization of conference.

Mrs. Pavlova explained the application of the requirements.

Reviewed records:

System for evaluation of the conducting in Program ERAMUS +

Bilateral agreement № D 61 /28.02.2014 for the Academic Years 2014/2021: Key Action 1 – Mobility for learners and staff Higher Education Student and Staff Mobility with Universidade Nova De Lisboa

Application Form for ERASMUS + №ADB299A051360ECB

Project for Mobility for learners and staff Program ERAMUS+

Contract №2015-1-BG01-KA103-013730 permission for Mobility for learners and staff Program ERAMUS +

Order № MC-128 dated 24.09.2015 for determining the Committee for administrating and control of Mobility for learners and staff Program ERAMUS + 2015/2016

Order № MC-129 dated 24.09.2015 for determining the selection Committees for defining of the evaluation criteria and choice of applicants (students and lecturers) of Mobility for learners and staff Program ERAMUS + 2015/2016

Defined evaluation criteria for choice of applicants (students from CITN faculty (department)) of Mobility for learners and staff Program ERAMUS + 2015/2016 dated 28.09.2015

Application to the Dean of CITN Faculty (department) from Mr. Artem Tatikyants – for participation in Mobility for learners and staff Program ERAMUS + 2015/2016 dated 14.10.2015

Decision protocol from the selection Committee (CITN Faculty (department)) dated 30.10.2015 – approving Mr. Artem Tatikyants

Filled application form – ERASMUS + dated: 10.11.2015 for period february – June 2016 of Mr. Artem Tatikyants – Universidade Nova De Lisboa

Letter of acceptance from Universidade Nova De Lisboa dated 14.12.2015

Contract for students mobility № OU 11/08.02.2016 and learning agreement: period of education in Universidade Nova De Lisboa - 29.02.2016 till 28.06.2016 (Mr. Artem Tatikyants)

Certificate Duration of studies at host Institution dated 28.06.2016

Official Academic Record from Universidade Nova De Lisboa dated 08.08.2016 for the examination results (marks) of Mr. Artem Tatikyants

Decision protocol from the selection Committee (CITN Faculty (department)) dated 16.08.2016 – accepting the examination results (marks) of Mr. Artem Tatikyants

Application of lecturer (teacher) Associated Prof. D. Urozova dated 11.01.2016 for participation in Mobility for learners and staff Program ERAMUS + 2015/2016

Staff Mobility for teaching mobility Agreement - Mobility for learners and staff Program ERAMUS + 2015/2016 year of Associated Prof. D. Urozova (29.08. -02.09.2016)

Decision protocol from the selection Committee dated 25.01.2016 – approving Associated Prof. D. Urozova

Contract for teachers' mobility № OU 52/24.06.2016 and teaching agreement: period of teaching in Universidade Nova De Lisboa – 29.08 -02.09.2016 (Associated Prof. D. Urozova)

Certificate of participation in Mobility for learners and staff Program ERAMUS + 2015/2016 for Associated

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Prof. D. Urozova for the period 29.08 -02.09.2016 from Universidade Nova De Lisboa dated 02.09.2016

Planning of the education process- Vice-rector. Education activities

Rules are defined in Quality manual, Rules for application of students in Burgas Free University and Rules for organization of education process, Rules for candidate students company. Mrs. Dineva explained the application of the requirements.

Reviewed records

List of education specialties – Bachelor’s degree – 20 specialties (in the University Intranet)

List of education specialties – Master’s degree – 18 specialties (in the University Intranet)

Education plan with Public communication and social psychology (Bachelor’s degree) – (in the University Internet site)

Weekly schedules – e.g. (CHN) – Bachelor’s degree (part time) – 3 semester – Public communication and social psychology (27.09-11.10.2016)

Quality management system planning. Control of documents and records

Quality policy and Quality objectives are established in QM and are communicated in “Mission” and “Quality Management” on Website of BFU (www.bfu.bg).

Rules for the control of documents and records are defined in DP 04.01 – Control of documents, DP 04.02 – Control of records, Rules for activity in BFU. Mrs. Dineva explained the application of the requirements. The BFU has subscription for APIS with software for automatically updated of modification of current legislation. The BFU has subscription for State newspaper

Appendix 3 List of Documented Procedures dated 11.06.2010

Appendix 9 List of actual University’s manuals, Internal rules, instructions and external documents

Reviewed records:

Order №RD-61/08.06.2015 for assignation of responsible person for updating of actual University’s manuals, Internal rules, instructions and external documents

OD 04.01–01 – List of subscribers of QM and QMS procedures – last update – 07.04.2014

OD 04.01–02 – Distribution of documents – 07.04.2014

OD 04.01–03 – Registration lists for change of QMS documents

OD 04.01–04 – Preposition for change of QMS documents – dated 23.06.2014

OD 04.01–05 – Register of changes in QMS documentation – last records dated 23.06.2014

OD 04.02–02 – Register of quality records – last update 11.06.2010

Quality department

Rules are defined in Quality manual ver.03/11.06.2010, p. 8.2.3, DP 08.03, and System for quality management of the education and the Academic staff of BFU.

Mrs. Hadzhieva explained the application of the requirements. The requirements are generally followed and the records are available.

Reviewed records:

SOPKO (System for evaluation and maintenance of quality of education), issued with No. 93-00-255/26.06.2015

General Report - Evaluation by the students of the quality of education Y2015, their attitude and evaluation of the University, based on personal evaluation by teacher and discipline.

Checked evaluation for Mr. S. Chernev – Professor, “CUN”

Checked evaluation for Mrs. Svetla Margaritova – docent, “CUN”

Checked evaluation for Mrs. Penka Georgieva – assisting, “CITN”

General Report from the evaluation by the candidate students, Y01-06/2016

General Report from the evaluation by the students who are graduating the University in May and December 2015 concerning their evaluation of the University and their realization in the professions

Filled enquiry cards from evaluation of students (of lectures – G.Kirova, doc.Dineva, Yordanka Nikolova, Evgeni Mosinov, doc. Pashov, doc.Kurteva, doc.Jecheva and Associated Prof. Orozova) summer term of 2015/2016

General Report from the evaluation of the students’ satisfaction from the administrative conditions in the University for 2014/2015

General report for realization of students graduated Y2013, prepared 07/2016

Information service department

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The rules and responsibilities for this activity are defined in QM, DP 04.01 and University regulations for Information service department dated 17.06.2010, Internal rules for computer hall, Internal rules for using Internet services 17.06.2010.

Mrs. Mavrodieva explained the application of the requirements. The requirements are generally followed and the records are available. All electronic records are appropriate archived. All used software are licence.

Reviewed records:

Excel file: Register of computer techniques

Excel file: Register for new techniques

Excel file: Register of installed software by computers- reviewed for hall 29

Excel file List of IP address and user with access rights.

Excel file Register with e-mail address

Register for condition of computer hall №29 – last record 12.09.2016 – change of Operational system Windows 10

Agreement № D01-4305/09.08.2013 between Microsoft and Ministry of Education and Science for using of licensed software

Contract for subscription to APIS - legal requirements -information system valid till 20.12.2016

Filled OD 06 02-01 Register with computer techniques with internal number actual to 21.01.2016

Filled OD 06 02-03 Register of maintenance- last records 22.05.2016 general maintenance of Rack № 1, Rack № 2, Rack № 3, Rack № 4 and Rack № 5

Filled OD 06 02-04 Reported card for performed repairing- 22.06.2016 - change of switching power supply

List of actual external documents last updated 06.01.2016

Assistant rector (administrative director) – Purchasing, infrastructure and work environment. Control of MME

Rules are defined DP 04.01, DP 04.02, DP 06.02, DP 07.01, QM – par. 6.4 and 7.6,

Mr. Iudov explained the application of the requirements. The management of the infrastructure conforms to the standard requirements. The required records are available.

Reviewed records:

Application 8 to QM – description of infrastructure

Plan for periodical medical checks for 2016

Plan for reduce of risk for 2016

Report for the carried out maintenance of equipment - 2016

Protocol for control of lightings – 552/23.03.2015

Plan for control of work environment - 2016

Protocol for control of safety electric equipment – 551/23.03.2015

Lists of suppliers – OD 07.01-02 – last updates dated 20.06.2014

Offer for supply of power supply from EVN dated 24.08.2016

Offer for supply of power supply from Future Energy dated 01.09.2016

Offer for supply of power supply from Acspo PLC dated 25.08.2016

Comparison table for evaluation and choice of suppliers

Protocol for choice of supplier for above tender - 09.09.2016

Report for choice of new supplier dated 09.09.2016

Application 7 to QM – list of MME

Plan for control of MMD – 2016

Check protocol № TP-576 for valve 27.07.2016 – 0576

Check protocol № TP-576 for valve 27.07.2016 – 0577

Check protocol № TP-576 for valve 27.07.2016 – 0578

Check protocol № TP-576 for valve 27.07.2016 – 0579

Contract for borrow of thermo hygrometer – 26.03.2014 – Veber 2002

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Certificate for calibration of thermo hygrometer – 7901/11.07.2013
 Check protocol (internal check) of thermo hygrometers – 19.06.2014
 List of equipment
 Plans for maintenance of equipment - 2016
 Plan for maintenance of ventilation system – 2016
 Filled OD 07.01-01 – Inquiries for purchase

Dean and Vice-dean of CUN Faculty (department)

The rules and responsibilities of the Management and personnel of CUN Faculty are defined in QM and regulations for university activity. In Bachelor programs are two specialities: Low and Public administration. In Master Programs are 3 specialities: Customs Intelligence and Investigation, Administration and management of national security system, Tax administration
 Mrs. Guneva explained the application of the requirements. The requirements are generally followed and the records are available.

Reviewed records:

Educational plan for specialty “Customs Intelligence and Investigation”- approved (updated) with solution of academic counsel with protocol No 4/24.06.2016.
 Educational plan for specialty “Administration and management of national security system” - approved (updated) with solution of academic counsel with protocol No 5/05.10.2015
 Educational plan for specialty “Tax administration” - approved (updated) with solution of academic counsel with protocol No 3/29.03.2013
 Training programs for all specialities available on internet site of the University
 Protocol № 09 dated 24.06.2015 from conducted faculty management meeting
 Protocol № 10 dated 05.10.2015 from conducted faculty management meeting

Dean of CIUN Faculty (department), Vice-dean of CIUN Faculty (department)

The rules and responsibilities of the Management and personnel of CIUN Faculty are defined in QM and regulations for university activity. Mrs. Anastasova explained the application of the requirements. The requirements are generally followed and the records are available. There are 6 bachelor specialty: Finance, Accounting, Marketing, Business administration, International economic relations and Economic and marketing of tourism. In Master Program: Bank Management

Reviewed records:

Training programs for all specialities available on internet site of the University
 Educational plan for “Finance” bachelor degree – No 4/last updated 28.06.2013
 Educational plan for “Accounting” bachelor degree – No 4/ last updated 28.06.2013
 Educational plan for “Marketing” bachelor degree – No 3/ last updated 22.05.2015
 Educational plan for “Business administration” bachelor degree – No4/ last updated 28.06.2013
 Educational plan for “Bank Management” master degree – No3/ last updated 27.04.2012
 Protocol № 14/ 26.05.2016 for Council of CIUN
 Protocol № 15/ 23.06.2016 for Council of CIUN
 List of lecture for attestation for 2015/2016
 Filled analysis of enquiry cards from evaluation of students for 2015
 Attestation card of Assistant Mr. Luizov - 10.2015
 Attestation card of Doc. Dr. Mrs. Kurteva - 01.2016

7. Nonconformities / Несъответствия

NonConformity N° of Major Minor
Несъответствие *Критично* *Второстепенно*
 Department / Standard Ref.:

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Function:
Отдел / Функция:
Document Ref.:
№ на документа:

№ на клауза от
стандарта:
Issue / Rev.
Status:
Издание /
Ревизия.
Статус:

Details of
Nonconformity:
Детайли на
несъответствието:

Client Proposed Action to Address Minor Non-Conformances Raised at this Audit: / Предложени от клиента действия за отстраняване на второстепенните несъответствия от настоящия одит:

•

Nonconformities detailed here shall be addressed through the organization's corrective action process, in accordance with the relevant corrective action requirements of the audit standard, including actions to analyse the cause of the nonconformity and prevent recurrence, and complete records maintained.

По изброените в настоящия доклад несъответствия трябва бъдат предприети действия, съгласно процеса на коригиращи действия на организацията, съобразно съответните изисквания на стандарта, включително действия за анализ на причината за възникването им и предотвратяване на повторението им, и поддържане на пълни записи.

Corrective actions to address identified major nonconformities shall be carried out immediately including a cause analysis, and SGS notified of the actions taken within 30 days. An SGS auditor will perform a **follow up visit** within 90 days to confirm the actions taken, evaluate their effectiveness, and determine whether certification can be granted or continued.

Коригиращите действия за отстраняване на критични несъответствия, включително анализ на причините, трябва да бъдат предприети незабавно и в рамките на 30 дни да бъде изпратено уведомление за отстраняването им до SGS. Одитор от SGS ще осъществи последваща проверка до 90 дни, с цел одобрение на предприетите коригиращи действия, оценяване на тяхната ефективност и вземане на решение за сертификация или продължаване на сертификацията

Corrective actions to address identified major nonconformities shall be carried out immediately including a cause analysis, and records with supporting evidence sent to the SGS auditor for close-out within 90 days.

Трябва да бъдат предприети коригиращи действия, отнасящи се до установените критични несъответствия, включително анализ на причините, както и да бъдат изпратени записи с придружаващи доказателства до одитора на SGS за закриването им до 90 дни

Corrective Actions to address identified minor non conformities including a cause analysis, shall be documented on a action plan and sent by the client to the auditor within 90 days for review. If the actions are deemed to be satisfactory they will be followed up at the next scheduled visit.

Коригиращите действия за отстраняване на второстепенни несъответствия, включително анализ на причините, трябва да бъдат документирани в план за действие и да бъдат изпратени за преглед от одитора от SGS в рамките на 90 дни. В случай, че одиторът от SGS одобри коригиращите действия, изпълнението им ще бъде проверено по време на следващия планиран одит.

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- Corrective Actions to address identified minor non-conformities including a cause analysis, have been detailed on an action plan and the intended action reviewed by the Auditor, deemed to be satisfactory and will be followed up at the next scheduled visit.
Коригиращите действия за отстраняване на второстепенни несъответствия, включително анализ на причините, бяха документирани в план за действие и бяха прегледани от одитора. Одиторът одобри коригиращите действия и изпълнението им ще бъде проверено по време на следващия планиран одит
- Appropriate cause analysis and immediate corrective and preventative action taken in response to each non-conformance as required.
Подходящ анализ на причините и незабавни коригиращи и превантивни действия, предприети в отговор на всяко несъответствие

Note:- Initial, Re-certification and Extension audits – recommendation for certification cannot be made unless check box 4 is completed. For re-certification audits the time scales indicated may need to be reduced in order to ensure re-certification prior to expiry of current certification.

Забележка: При Първоначален, Ре-сертификационен и одит за Разширяване на обхвата – решение за сертификация не може да бъде взето, ако не е попълнена четвъртата кутийка. За ресертификационни одити посочените срокове могат да бъдат съкратени, за да бъде възможно ресертификационния процес да приключи преди изтичането на валидния сертификат.

Note: At the next scheduled audit visit, the SGS audit team will follow up on *all* identified nonconformities to confirm the effectiveness of the corrective actions taken.

По време на следващия одит, одиторският екип на SGS ще провери всички установени на предишния одит несъответствия, с цел да потвърди ефективността на предприетите коригиращи действия.

8. General Observations & Opportunities for Improvement / Наблюдения и Възможности за Подобрене

General Observation / *Наблюдение:*

Opportunity for Improvement / *Възможност за Подобрене:*

1. Добре би било да се актуализира списъка с одобрени доставчици и да се добавят всички нови оценени доставчици (ЕВН)
2. Добре би било да се актуализират идентификационните номера в списъка и плана за проверка на СНИ.

Please submit your opinion for this audit on / Моля изразете мнението си за този одит на:

<https://www.surveymonkey.com/r/CSSSSC2016>

9. Opening and Closing Meeting Attendance Record / Списък с присъстващи на откриваща и закриваща среща

Name / Име	Position / Длъжност	Opening Отриване	Closing Закриване
Mrs. Evelina Dineva	Vice Rector	Yes	Yes
Mrs. Draina Koleva	Head of UO	Yes	Yes

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Mrs. Elka Mavrodieva	Head of Information Department	Yes	Yes
Mrs. Svetla Hadzhieva	Quality Management Department	Yes	Yes
Mrs. Valya Pavlova	International Relations Department	Yes	Yes

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