## СИСТЕМА СЕРТИФИКАЦИИ РУССКОГО РЕГИСТРА RUSSIAN REGISTER CERTIFICATION SYSTEM



VCCKMM PETMCTP

## CERTIFICATE

This is to certify that the Quality Management System of

DON HONORIO VENTURA STATE UNIVERSITY VILLA DE BACOLOR, PAMPANGA 2001, PHILIPPINES

> has been assessed and found to be in accordance with the requirements of

> > ISO 9001:2015

In respect of Provision of Tertiary Education; Instruction, Research, Extension and Resource Generation Including Advanced Education, Secondary Education (Specific to Senior High School and Laboratory High School), Support to Operations and General Administrative Services

No. 19.2054.029

of 13" December 2019 AND SWORM TO BEFORE ME, THIS DEC AT CITY OF SAN FERNANDO, PAMPANCE

DOC. No. 2022

PAGE NOZ 77 Specification of the certification scope is provided in Annex. This certificate becomes invalid if conditions of EOO Xetyrication are not filfilled (http://www.rusregister.ru/doc/004.00-105.pdf). This certificate if property of

SERIES (Cartification Association "Russian Register"



r General hf/Certification ociation "Russian Register"

COMMIS

LAST OF THE COUNTRIES WHICH ARE REPRESENTED IN IAF AND ARE SHANATORIES OF THE MILLILATERAL AGRESSIST ON RECOGNITION IAF MLA\*:
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\* Las of MLA aguinese IAF members only Current Jac of MLA IAF member accordination besides in strailable on IAF serbate, wew infini

Certification Association "Russian Register": 101 Rimskogo-Korsakova Ave., 190121, Saint Petersburg, Russia



THE INTERNATIONAL CERTIFICATION NETWORK

Certification Association "Russian Register" has issued an IQNET recognized certificate that the organization

### DON HONORIO VENTURA STATE UNIVERSITY

VILLA DE BACOLOR, PAMPANGA 2001, PHILIPPINES

has implemented and maintains a

### Quality Management System

for the following field of activities

Provision of Tertiary Education; Instruction, Research, Extension and Resource Generation Including Advanced Education, Secondary Education (Specific to Senior High School and Laboratory High School), Support to Operations and General Administrative Services

JUBSCRIBED AND SWORWhich fulfils the requirements of the following standard I U BEFORE ME THIS LIFE 1 6 2019

AT CITY OF SAN FERNANDO, PAMPANGA

ISO 9001:2015

Registration Number: RU-19.2054.029

Issued on: 13th December, 2019

Validity date: 13th December, 2022

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ATTY, PEPITU A. SANCHEZ

UNTIL DECEMBER 31. 3

NOTARY PUBLIC

COMMISSION No. 19 19 PTR No. 2495087 1/19

IBP No.055200 11/2 CITY OF SAN FERNANDOLP)

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Alex Stoichitoiu President of IQNet

Arkady Vladimirtsev, Director General of Russian Register

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NOR Spain AFNOR Certification France Alle-Vincotte International Selgium AFCER Fortugal CCC Cyprus CISQ Naty CQC China CQM China CQS Crech Republic Cro Cert Groatio DQS Holding GmbH Germany of FONDONORMA Venezuelo ICONTEC Colombia IMNC Mexico Inspecta Certification Finland INTECO Congentina JQA Japan KFQ Koren MIRTEC Greece MSZT Hungary Nemico AS Norway NSAI Ireland PCBC Populity Austria Austria RR Russia SIGE Mexico SII Invael SIQ Slovenia SIRIM QAS International Malaysia SQB Surinerland SRAC Romania TEST St Peteraburg Russia TSE Turkey YUQS Serbia IQNet is represented in the USA by: AFNOR Certification, CISQ, DQS Holding GmbH and NSAI Inc.

Net partners is valid at the time of issue of this corollant. Under the Colombia Colombia SIRIM Cast Colombia Colombia SIRIM Cast Colombia Colom AENOR Spain AFNOR Certification France AIB-Vis

The list of IQNet partners is valid at the time of issue of this occuficate. Update



101 Firmwago-Konskova prospect, office 1, 190121 Saint-Petenburg, Fusika Phone: +7 (812) 670-9000, 670-9001 Fax: +7 (812) 670-9032 E-mail: m-hesdiFrusregoter.nu; www.nurregoter.nu

### MS SURVEILLANCE AUDIT REPORT № 20.03000.353

Date: 20.11.2020

Standard(s): ISO 9001:2015

Additional standards:

Agreement /	RR/AE/201910-S271	Stage	SURVEILL	
The second section and section			NCE 01	

Request: Audit dates:

10-12 11 2020

Audit scope					
Adequacy audit. Conformity audit					
Follow-up audit			⊠		
Organization:	DONH	IONORIO VEI	NTURA STATE UNIVERSITY		
(full name)					
Address: (actual)	CABAMBANGAN, BACOLOR, PAMPANGA				
EAC code:	34, 37		1110-12		
Number of employees (in the scape):		90	Number of shifts:	01	
Audit team leader:	Shahid I	Mushtaq			
Auditors:					
Auditors-in-training:					
Technical expert: Accompanying people <sup>1</sup> :					
Organization's representative:	Anna Liza Nacion				
Reviewed and Ful approved:	l name		Date		

Observers, interpreters

3/27/2019 DURE	00	DHVSU-QM-008	INTERNAL AND EXTERNAL COMMUNICATION PROCE-
3/27/2019	00	DHVSU-QM-009	CONTEXT OF THE ORGNIZATION PROCEDURE
3/27/2019	00	DHVSU-QM-010	RISK MANAGEMENT PROCEDURE

Conclusion: no changes made the MS documents. QMS documents required by ISO 9001:2015 are adequate and developed to the full extent.

#### Audit of nonconformity elimination upon the previous audit results.

No nonconformity was to review.

#### Conformity audit.

DURING THE AUDIT THE FOLLOWING MANAGEMENT SYSTEM PROCESSES/ELEMENTS WERE AUDITED:

- PROCESSES: "CONTROLS OF QMS", "ADMINISTRATION PROCESS", "STUDENT AFFAIRS PROCESS", "LIBRARY PROCESS", "RESEARCH AND DEVELOPMENT PROCESS", "EDUCATION / TRAINING MANAGEMENT", "CUSTOMER FEEDBACK".
- ELEMENTS: UNDERSTANDING THE ORGANIZATION AND ITS CONTEXT. UNDERSTANDING THE NEEDS AND EXPECTATIONS OF INTERESTED PARTIES. DETERMINING THE SCOPE OF THE QUALITY MANAGEMENT SYSTEM, QUALITY MANAGEMENT SYSTEM AND ITS PROCESSES. LEADERSHIP AND COMMITMENT. POLICY, ORGANIZATIONAL ROLES, RESPONSIBILITIES AND AUTHORITIES. ACTIONS TO ADDRESS RISKS AND OPPORTUNITIES. QUALITY OBJECTIVES AND PLANNING TO ACHIEVE THEM. PLANNING OF CHANGES. MONITORING AND MEASURING RESOURCES, ORGANIZATIONAL KNOWLEDGE, COMMUNICATION, DOCUMENTED INFORMATION, OPERATIONAL PLANNING AND CONTROL OVER THE LIFE CYCLE STAGES OF A PRODUCT, REQUIREMENTS FOR PRODUCTS AND SERVICES, DESIGN AND DEVELOPMENT OF PRODUCTS AND SERVICES, PROVISION, RELEASE OF PRODUCTS AND SERVICES. CONTROL OF NONCONFORMING PROCESS OUTPUTS, CUSTOMER SATISFACTION, ANALYSIS AND EVALUATION, INTERNAL AUDIT, MANAGEMENT REVIEW, NONCONFORMITIES AND CORRECTIVE ACTIONS. CONTINUAL IMPROVEMENT.

ALL THE ACTIONS SPECIFIED IN THE AUDIT PLAN HAVE BEEN REALIZED IN FULL SCOPE.

### Management commitment, planning (policy, objectives and tasks), management review, continual improvement

It is required to specify the following information:

- MANAGEMENT IS COMMITTED TOWARDS EFFECTIVENESS OF THE MANAGEMENT SYS-TEM FOLLOWING DOCUMENTS HAVE BEEN REVIEWED DURING THE AUDIT:
- INTERNAL AND EXTERNAL ISSUES IDENTIFIED FOR ALL PROCESS INCLUDING THE ADMISSIONS, ADMINS SERVICES, MOTORPOOL, INSTRUCTION, ADMINISTRATION SERVICES.
- RISK AND OPPORTUNITIES ARE IDENTIFIED AND REVIEWED IN THE MANAGEMENT REVIEW MEETING DATED 11.06.2020
- QUALITY POLICY REVIEWED AND COMMUNICATION OF THE POLICY ENSURED THROUGH THE ORGANIZATION THROUGH TRAININGS AND TOOLBOX TALKS,

quired in the course of work conduction, as well as of the conclusions, characterizing condition of the Organization's management system.

Content of this report shall be deemed confidential and shall not be communicated to any third party without the Organization's written permission, except for information needed by accreditation bodies for assessment and required by current law, court sentence, in legal proceedings, upon request of State administration bodies.

Ownership of the Audit report remains with the Certification Body.

#### NONCONFORMITIES

During the audit the non-conformity categories recognized by Russian Register were used. The formulations of non-conformities are defined using the terms of the audit criteria requirements, conformity to which was audited.

The Organization shall eliminate all non-conformities within three months since the date of the closing meeting. These actions shall include nonconformity cause analysis, development of corrections and/or corrective actions and assessment of their effectiveness.

Correction and corrective action plan shall be developed by the Organization within 1 month since the date of the closing meeting. Corrective actions shall be effective enough to ensure confidence in elimination of nonconformity causes and prevention of recurrence.

Recommendations on certification can be given only after receipt of evidence that corrective actions are implemented for all major nonconformities and approval of correction and corrective action plan for all minor nonconformities by the audit team leader. Effectiveness of corrective actions for minor nonconformities will be audited within the framework of the following audit.

According to the Audit team leader's recommendations (see "Conclusion") assessment of corrective actions effectiveness may require additional follow-up audit in departments of the Organization or it may be enough to present documented objective evidence of the implementation of corrective actions.

#### CERTIFICATE AND CONFORMITY MARK

During the audit it was verified that the Organization observes RR Certification conditions, rules and procedures for use of the Certificate and certification mark. No violations were revealed. Certification mark are adequately used by the organization.

#### CONCLUSION

During the audit it was identified that the management system is maintained, developed according to the continual improvement principle, evidence of the management system ability to conform to the applicable requirements and expected outcomes, and evidence of internal audit and management review processes are provided in this report and management. Management system is effectively implemented and the requirements of QMS are addressed.

Audit objectives ar	re achieved:	Yes 🗵	No 🗌	
Applied scope of o	ertification may be confirmed:			
Yes 🛭	No 🗌	With clarific	With clarification	
Management system is effective:		Yes 🗵	No .	

Management system conforms to audit criteria:	Yes 🗵	No _
Re-issue of certificate is required:	Yes	No ⊠
Clarification of Audit program is required:	Yes	No 🖂

Total number of identified nonconformities (only for IMS specify certification pro- gram):		Non-conformity report numbers: (only for IMS separately specify common ones and on specific character of each program)  Observation report numbers: 20 03001,353 20 03002,353 20 03003,353	
Major	Y		
Minor	00		
eliminated during the audit:	00		
Number of observations:	03		
The need to conduct additional audit in sub to verify nonconformity elimination:	divisions	of the Organization Yes No 2	0
Recommendations of the Audit team leader The certificate of conformity may/may not it		Confirmed S Issued	j
Next audit date: (month, year)	Novembe	er 2021	

Sampling technique is applied during the audit; non-identification of any nonconformity does not imply absence thereof.





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which fulfils the requirements of the following standard

ISO 9001:2015

Issued on: 31st December, 2019 Validity date: 31" December, 2022

Registration Number: RU-19.2573.026

Alex Stoichitoiu President of IONet Arkady Vladimirtsev, Director General of Russian Register

IQNet Partners\*:

AENOR Spain AFNOR Certification France AlB-Vincotte International Belgium APCER Portugal CCC Cyprus CISQ Italy CQC China CQM China CQS Coech Republic Cro Cert Croatia DQS Holding GmbH Germany FCAV Brazil FONDONORMA Venezuela ICONTEC Colombia IMNC Mexico Inspecta Certification Finland INTECO Costa Rica IRAM Argentina JQA Japan KFQ Korea MIRTEC Greece MSZT Hungary Nemko AS Norway NSAI Ireland PCBC Poland Quality Austria Austria RR Russia SIGE Mexico SII Israel SIQ Slovenia SIRIM QAS International Malaysia SQS Suntzerland SRAC Romania TEST St Petersburg Russia TSE Turkey YUQS Serbia IQNet is represented in the USA by: AFNOR Certification, CISQ, DQS Helding GmbH and NSAI Inc.

\* The list of IQNet partners is valid at the time of issue of this certificate. Updated information is available under www.iqnet-certification.com