



GURU GOBIND SINGH INDRAPRASTHA UNIVERSITY
Sector 16-C, Dwarka, New Delhi-110078

FOR VISIT BY AUDIT COMMITTEE
ADMINISTRATIVE AUDIT (for Branches)

(For the Academic Session 20...-..)
(01.06.20...to 31.05.20...)

1. Name of the Branch/Section: _____

Telephone : _____

E-Mail : _____

2. Date and Time of Visit : _____

3. Members of the Visiting Audit Committee:

(i) _____

(ii) _____

(iii) _____

4. a) No of computers/printers in the branch:

b) Activities of the Branch:

S. N.	Name(s) of the Key Activities	Date of Introduction
(1)	(2)	(3)

5. No of Personnel working in the Branch and their Job Role:

S. No.	Employee Name	Temporary/ Permanent	Designation	Working in the branch since when	Job Role	Computer awareness

6. Which departments/Branches/USS/Colleges, the branch interacts with:

- Branches:
- USS: Yes/No
- Affiliated colleges: Yes/No
- Students: Yes/No
- Staff: Yes/No
- Faculty: Yes/No

7. List two Strengths of the Branch:

8. Process Flow in the Branch:

9. Challenges of the branch

10. What is the charter/timelines of the branch activities. Has it been approved and communicated to stakeholders through web notice? Please attach a copy.

11. What are the key indicators of the branch performance? Please give details of their achievements in the last three years in terms of their attainment.

12. Does the branch prepare annual report on its performance and new initiatives/innovations? If Yes, Please attach the report.

13. Is the report analysed? If Yes, provide Action Taken Report.

14. Any employee of the branch who has undergone training or attained higher education? Provide details.

Employee name	Program Type and its Title	Duration (from- to)	Campus/State/Outside Delhi

15. Any employee who is pursuing higher education? Provide details.

16. Any awards/recognition of any employee of the branch. Provide details.

17. Any showcause notice/Memo served on any employee of the branch? Provide details

18. Any deviations/deficiencies observed:

19. **Feedback from the Staff** (*Based on interaction with staff on parameters like leaves, infrastructural facilities, recognition of their contribution, promotions and overall environment.*)

Overall Observations and Recommendations

(_____)
Name :

(_____)
Name :

Note : may add additional sheet/s, if required.