Approved by
Chairman of the Management
Board - Rector of NLC "KTU"
_____M.K. Ibatov
Decision of the Academic
Council
No. 3 «11» 10 2021

DOCUMENTED PROCEDURE

MANAGEMENT OF DOCUMENTED INFORMATION

KTU DP II-01-2021

Developed by: Compliance officer
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Karaganda

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Effective date 2021 10 11
(year, month, day)

1 Scope

This documented procedure establishes the method and procedure for managing the documentation of the quality management system at the university.

The provisions of this procedure are mandatory for application by all employees of the departments of the NLC "Karaganda Technical University" (hereinafter referred to as the KTU) included in the quality management system.

This procedure is applied by all structural divisions of the KTU and is included in the documentation of the quality management system (QMS).

2 Regulatory references

In this documented procedure, references to the following regulatory documents are used:

ST RK ISO 9001-2016 (ISO 9001:2015) "Quality management systems. Requirements".

ST RK ISO 9000:2017 (ISO 9000:2015) "Quality management systems. Basic provisions and vocabulary".

GOST 2.301-68 "Unified system of design documentation. Formats with changes".

ST RK 1.12-2015 "Text documents. Design requirements".

ST RK 1.5-2013 "General requirements for the construction, presentation, design and content of standards".

3 Terms, definitions and abbreviations

In this documented procedure, terms, definitions and abbreviations are used in accordance with the ST RK ISO 9000:

Documented procedures are documents containing information about the established method and sequence of the implementation of an activity or process.

Job description is a document regulating the production powers and duties of an employee.

Methodological instructions are documents containing recommendations that help to carry out activities.

Quality policy – the general intentions and direction of the organization's activities in the field of quality, officially formulated by the top management.

The regulation on a structural subdivision is a local regulatory act that defines: the procedure for creating (forming) a subdivision; the legal position of the subdivision in the structure of the organization; the structure of the subdivision; tasks,

functions, rights, duties and responsibilities of the subdivision; the procedure for interaction of the subdivision with other structural units of the organization.

Regulations on the type of activity – a document describing the stages and method of implementation of the activity.

Rules are a document that establishes the conditions for performing a specific action that are mandatory for all participants.

A management system is a set of interrelated or interacting elements of an organization for the development of policies, goals and processes to achieve these goals.

Quality management system - part of the quality management system.

A standard is a document approved and applied by an organization in order to ensure the quality of products, performance of works, provision of services, and establishes the requirements and rules in force in the organization.

Quality goals – a quality-related goal.

- IRD – internal regulatory document;
- DAW – Department of Administrative Work;
- DAA – Department of Academic Affairs;
- JD – job descriptions;
- DP – documented procedure;
- KTU – Karaganda Technical University;
- MG – methodical guidelines;
- RTA – regulation on the type of activity;
- QMR – quality management representative;
- RD – regulations on divisions;
- R – rules;
- QM – quality manual;
- ST – standard;
- ST RK– standard of the Republic of Kazakhstan
- QMS – quality management system;
- QC – quality commissioner;
- CQM&A – center of quality management and accreditation.

4 Responsibility and authority

4.1 This documented procedure (DP) is approved at a meeting of the Academic Council.

4.2 Responsibility for the implementation of the procedure is borne by a Quality Management Representative (QMR) and the head of the center of quality management and accreditation (hereinafter CQM&A).

4.3 The developer of this procedure is a Compliance officer

4.4 Responsibility for the organization and coordination of activities for the implementation of specific stages of the documentation management process and the quality of the final results is borne by the heads of departments who are participants in the implementation of a specific stage.

4.5 Responsibility for the safety, unauthorized copying of quality management system (QMS) documents located in the department, and leakage of official information are the heads of departments.

5 General provisions

5.1 This procedure regulates the actions of managers and specialists involved in the management of QMS documentation.

5.2 This procedure establishes the procedure for managing the documentation used in the QMS.

5.3 This procedure defines the necessary QMS documentation management tools and establishes, in accordance with ST RK ISO 9001, the requirements for:

- accessibility and suitability for use where and when it is needed;
- ensuring security (for example, from loss of confidentiality, misuse or loss of integrity);
- ensuring distribution, access, issuance and application;
- ensuring the preservation of documents in proper condition, including the preservation of readability;
- ensuring change control (for example, version control);
- ensuring the establishment of the shelf life and methods of destruction;
- ensuring the identification and management of documented information of external origin recognized by the organization as necessary for the planning and functioning of the quality management system;
- ensuring the security of documented information from unintended changes, stored as a certificate of compliance.

5.4 The structure of QMS documentation includes the following levels:

Level 1:

Strategic documentation

– Mission and Vision;

– Quality policy;

– Quality objectives;

– Quality targets.

Level 2:

System-wide and regulatory documentation describing the university's process model

– KTU Structure;

Level 3:

Documented procedures, organizational and reference documentation

– University Standards;

– Rules;

– Regulations;

– Methodical guidelines;

– Forms;

– Supporting QMS documents;

– Regulations on structural divisions;

– Job descriptions;

– Functional responsibilities.

Level 4:

Records

– Reports;

– Statements;

– Minutes;

– Acts;

– Journals;

– References and others.

5.5 QMS documentation is classified as follows:

a) by type:

1) documents establishing requirements; these include documents containing technical requirements;

2) documents containing recommendations or suggestions; these include methodological documents;

3) documents containing information on how to consistently perform actions and processes; such documents may include documented procedures, work instructions, and drawings;

4) documents containing data on the results achieved or evidence of the activities carried out; such documents include records.

b) by origin:

1) external;

2) internal;

c) by appointment:

1) organizational;

2) administrative;

3) regulatory;

4) technical;

5) recordings.

d) according to the approval for the following groups:

1) Documents to be approved by:

- the Board of NLC "Karaganda Technical University"

- the Academic Council of the NLC "Karaganda Technical University"
- Chairman of the Board - Rector of NLC "Karaganda Technical University"
- Supervising Vice-rectors, a representative of the Quality Management

2) Documents to be coordinated, without approval

5.6 Documentation management at the university is carried out in accordance with this standard in compliance with the requirements of the ST RK ISO 9001-2016 (ISO 9001:2015).

5.7 Management in accordance with this standard is subject to:

a) management in accordance with this standard:

1) administrative;

2) regulatory;

3) technical;

4) information and reference;

b) documentation of internal origin:

1) all-system;

2) organizational;

3) administrative;

4) regulatory;

5) technical;

6) recordings.

5.8 External QMS documents include documents establishing legislative and regulatory requirements for educational services, QMS processes and the system itself, as well as contractual requirements of consumers (customers).

5.9 The following groups of external documents are used for QMS:

a) Laws and Regulations of the Government of the Republic of Kazakhstan;

b) regulatory documents of the Ministry of Education and Science of the Republic of Kazakhstan, other ministries and departments;

c) state, interstate, international standards, classifiers and other regulatory documentation;

d) incoming organizational and administrative documentation.

6 Management of organizational documentation

6.1 Management of strategic documents

6.1.1 Requirements for the development and management of the Mission, Policy and Objectives in the field of quality are defined in KTU DP II-05 "Development of quality objectives and plans".

6.2 Managing documentation of external origin

6.2.1 External documentation management includes the acquisition of documentation, determination of the status of an incoming document, identification, distribution management, storage, updating, destruction.

6.2.2 It is necessary to transform the content of the incoming document into the input data of the procedure in a timely manner.

6.2.3 Incoming organizational and administrative documentation is managed by the Office in accordance with KTU R IV-03. The head of the Office is responsible.

6.3 Management of organizational documentation

6.3.1 Internal organizational documentation includes:

– Regulations on structural divisions;

– Job descriptions;

6.3.2 The procedure for developing, approving and approving the regulations on the subdivision is defined in KTU R IV-04.

6.3.3 The procedure for the development, approval and approval of the job description is defined in KTU R IV-05.

6.4 Management of internal regulatory documentation

6.4.1 The internal regulatory documentation includes:

– Documented procedures;

– University Standards;

– Methodical guidelines;

– Regulations on types of activities;

– Rules.

6.4.2 When developing and executing the internal regulatory documentation of the QMS used at the university, the unity of the structure, composition, design*, sequence and style of presentation should be ensured in accordance with the requirements of this DP.

** The rules are drawn up in a free form*.

6.4.2.1 Development, coordination, analysis, modification of internal regulatory documentation of the QMS of permanent application is carried out by responsible persons of structural divisions who are responsible for their timely updating and safety.

Main stages:

- organization of the development of the QMS document;
- development of the first edition of the QMS document;
- approval of the first edition of the document;
- development of the final version of the QMS document;
- production of the original of the QMS document;
- approval of the QMS document;
- replication and distribution of the QMS document;
- storage of the original QMS document.

6.4.2.2 Special attention should be paid to the coordination of the developed projects of the internal regulatory documentation of the QMS with the current documents, in particular, to prevent repetitions.

6.4.2.3 The term for the development of documents should be no more than two months.

6.4.3 Requirements for the construction of internal regulatory documentation of the QMS

6.4.3.1 The internal regulatory documentation of the QMS should contain the following structural elements**:**

- title page;
- table of contents;
- the name of the document located on the first sheet of the text;
- scope;
- regulatory references;
- terms, definitions and abbreviations;
- general provisions;
- responsibility and authority;
- description of the procedure (main part);
- coordination and implementation;
- replication and distribution of the document;
- storage;
- making changes to the document;
- removal and withdrawal of the document;
- ensuring accessibility;
- appendix;
- coordination sheet;
- familiarization sheet

6.4.3.2 Mandatory elements of QMS documents are:

- title page;
- scope;
- responsibility and authority (only for DP)
- description of the procedure (main part);
- coordination sheet;
- familiarization sheet;

6.4.3.3 Depending on the features of the document, structural elements other than those listed in clause 6.2.3.3.1 are provided if necessary, and additional elements may also be included.

6.5 Managing records

6.5.1 Records should be kept and maintained in working order to confirm the evidence of compliance with the requirements and the effectiveness of the quality management system.

6.5.2 Records should be clear, easily identifiable and recoverable.

6.5.3 The main requirement for this type of documents is to ensure their preservation in their original form and access to them for systematization, processing and subsequent analysis.

6.5.4 The records required by the quality management system must be managed and maintained to confirm compliance with the requirements and effective operation of the quality management system

6.5.5 Records must be made in accordance with the requirements of this documented procedure.

6.5.6 Recordings are made in the formats set by:

- GOST standards, SNIPS defining the form and content of records;
- templates of quality records.
- QMS records are performed in editors or software systems:
- MS Word;
- MS Excel and other systems accepted into the KTU;

6.5.7 It is possible to use records in a format that differs from the standard, if the author or co-author of the record is the customer.

6.4.8 The preservation of records in electronic and printed versions is provided at the direction of the head of the department.

6.5.9 Control over the preservation of records is carried out by the quality commissioner of the developer unit.

7 Design requirements

7.1 Text formatting

7.1.1 Internal and organizational documentation of the QMS are carried out on one side of a sheet of A4 paper (210x297 mm) according to GOST 2.301, it is allowed, if necessary, to use an A3 sheet (297x420 mm) when performing tables and illustrations.

7.1.2 The originals of text documents are carried out using printing and graphic devices of a computer (an electronic computer). Font - Times New Roman, size 14, line spacing - single, text alignment in width.

7.1.3 The margins should be left on all four sides of the sheet:

upper – 15 mm; left – 30 mm;
lower – 10 mm; right – 10 mm.

7.1.4 The paragraph indentation within the text should be 0.75 cm.

7.2 Footer

7.2.1 The internal and organizational documentation of the QMS must contain on all pages, including the title page, the header and footer, made with a font height of 10.

The header consists of the following elements (Figure 1):

- field 1: logo – NLC "Karaganda Technical University";

- field 2: name of the type of document: documented procedure, etc.; name of the document;

- field 3: identification number of the document according to clause 7.12 of this DP, version number, date of the last version, page sequence number and number of pages in the document.

7.2.1 The height of the footer is determined by the size of the header and must be at least 20mm.

field 1	at least 20	field 2	field 3
45		80	45

Figure 1- Requirements for the design of the header of documents QMS of continuous application except for Quality Policy and Objectives.

7.2.2 The footer is centered on the right edge of the page and contains the inscription: "Unauthorized copying of the document is prohibited".

7.3 Title page

7.3.1 The title page is the first page of the internal regulatory, organizational documentation of the QMS.

7.3.2 Title pages should consist of the following elements: header and footer (paragraph 7.2 of this DP), the stamp of approval of the document (paragraph 7.6 of this DP), the name of the type of document, the name of the document, identification number (paragraph 7.12 of this DP), copy number and copy number (affixed by the division). Registration of the title page of internal QMS documents and the Form (example) the title pages of the internal QMS documentation are given in Appendices A and B.

7.3.3 The form of the title pages of the organizational documentation of the QMS (JD and RD) are given in KTU R IV-04, KTU R IV-05.

7.4 Content

7.4.1 The contents of the document are placed after the title page, starting from a new page, and, if necessary, continue on subsequent sheets.

7.4.2 The word "content" is written in the middle of the first line with a capital letter, highlighted in bold.

7.4.3 The content of the document includes the serial numbers and names of sections (if necessary, subsections) and the designations of appendices and their titles indicating the page number on which they begin.

7.4.4 The names included in the content are written in lowercase letters, starting with an uppercase letter.

7.5 Name

7.5.1 The name of the document is placed on the title page of the document.

7.5.2 The name of the document should be printed in capital letters and consists of the following elements:

- names of the type of document (documented procedure, rules, etc.);
- name of the document (the name of the document is separated by two solid

lines, an example of the design is given in Appendix B).

7.5.3 The name of the document should be concise and accurately characterize the object to which the document applies, and ensure the correct identification of documents.

7.5.4 Abbreviations, Roman numerals, mathematical signs, Greek letters are not allowed in the name of the document.

7.5.5 The name of the document, if it is part of a set of documents united by a common purpose, may consist of a title and a subtitle.

7.5.6 The title of the document should be printed in capital letters, highlighted in bold, and the subtitle in lowercase letters, with the first uppercase.

Example: **EDUCATIONAL AND METHODICAL COMPLEX**

Working program of the discipline

7.6 Approval stamp

7.6.1 For approved documents, the approval stamp consists of the word "Approve", the full name of the position of the person approving the document, a personal signature, its transcript and the date of approval.

7.6.2 For documents approved by the Board, the stamp is used:

Approved by
By the decision of the Board of
NLC "KTU"
No.__ «___» _____

7.6.3 For documents approved by the Chairman of the Management Board, the Rector uses the stamp:

Approved by
Chairman of the Management
Board - Rector of NLC "KTU"
Doctor of technical science,
professor,
_____M.K. Ibatov
«___»_____20___

7.6.4 For documents approved by the Academic Council, the stamp is used:

Approved by
Chairman of the Management
Board - Rector of NLC "KTU"
_____M.K. Ibatov
Decision of the Academic
Council
No.___ «___»_____20___

7.6.5 For documents approved by the PRK, the stamp is used:

Approved by

Quality Management
Representative
_____ G.S. Zhetessova
«____» _____ 20___

7.6.6 For documents approved by the First Vice-Rector, the stamp is used:

Approved by
First Vice-Rector
_____ «full name»
«____» _____ 20___

7.6.7 The agreed documents are carried out in accordance with paragraph 8.1.

7.6.8 The effective date is made out in Arabic numerals in the following sequence: year, month, day of the month, placed on the first page (after the content). The year is written in four Arabic numerals, and the month and day of the month are two pairs of Arabic numerals separated by a dot. For example: the date January 5, 2021 should be issued as 2021.01.05.

7.7 Regulatory references

7.7.1 The structural element "Normative references" contains a list of normative documents (standards), documents to which references are given in the text of the document.

7.7.2 The list of reference documents begins with the words: "In this documented procedure, references to the following normative documents are used:".

7.7.3 The list includes designations and names of regulatory documents in ascending order of registration numbers of designations in the following sequence:

- state standards, classifiers of technical and economic information, standards of scientific and technical, engineering societies and other public associations;
- interstate standards, classifiers of technical and economic information;
- international, regional standards and classifiers of technical and economic information, national standards, standards of foreign countries allowed for use in the territory of the Republic of Kazakhstan;
- QMS documents.

7.7.4 The laws of the Republic of Kazakhstan, administrative documents of public administration bodies and other documents other than those listed in 6.2.10.3 should be given in the appendix "Bibliography".

7.8 Terms, definitions and abbreviations

7.8.1 The structural element "Terms, definitions and abbreviations" contains a list of terms, definitions, designations and abbreviations used in the document.

7.8.2 The list of terms, definitions and abbreviations begins with the words:

"In this *title of the QMS document*, the following terms are used with appropriate definitions and abbreviations"

or

"In this *title of the QMS document*, terms, definitions and abbreviations are used in accordance with

_____

the designation of standards and documents is indicated

7.8.3 The abbreviations are recorded in the order in which they are given in the text of the document with the necessary transcription and explanations.

7.9 Responsibility and authority

7.9.1 The structural element "Responsibility and authority" is given only for the DP, in which it should be defined:

- the official approving the document;
- persons (heads of development departments) responsible for the implementation of the requirements specified in the document;
- persons (heads of departments) responsible for the development of QMS documents (DP);
- the person responsible for managing the document in accordance with the QMS heads of departments.

7.10 Requirements

7.10.1 Requirements for documentation objects, depending on their specifics, are set in documented procedures and other QMS documentation.

7.11 Designation of documents

7.11.1 Assignment of a unique identification number to an internal QMS document depends on the type of document, its serial number within the classification group, as well as on the name of the official who approved the document (from the group of documents) (Table 1, 2).

Table 1

Document Group	**Classification group code**
Documents to be approved:	
By the Board of NLC "Karaganda Technical University"	I
By the Academic Council of the NLC "Karaganda Technical University"	II
Chairman of the Board - Rector of NLC "Karaganda Technical University"	III
The first Vice-rector, Quality Management Representative	IV

Table 2

Letter designation	**Type of document**	**Division**
Ch	Charter of NLC "Karaganda Technical University	Rector

C	Corporate Governance Code of NLC "Karaganda Technical University	Rector
DP	Documented procedure	CQM&A
ST	Standard	Developer Divisions
MG	Methodical guidelines	Developer Divisions
RTA	Regulation on the type of activity	Developer Divisions
R	Rules	Developer Divisions
RD	Regulations on divisions	DAW
JD	Job descriptions	DAW
F	Form	CQM&A

7.11.2 The internal documentation of the QMS (DP, ST, R, RTA, MG, IRD) must have the format of an identification designation:

XX KTU KK – NN - YYYY

- YYYY — Year of approval of the introduction of the document
- NN — Serial number by type of document (Table 2) in its classification group (Table 1) (issued by the CQM&A)
- KK — The code of the classification group of the document depending on the level of approval in accordance with Table 1 (determined by the developer)
- KTU — Name of the higher educational institution
- XX — The letter designation of the type of the NLC "KTU" document in accordance with Table 2

Example No.1: The identification designation of the document "Management of documented information", where:

DP KTU II-01-2021:

- 2021 — Year of approval of the introduction of the document
- 01 — Serial number by type of document (Table 2) in its classification group (Table 1) (issued by the CQM&A)
- II — The document approved by the Academic Council of the NLC "Karaganda Technical University"
- KTU — NLC "Karaganda Technical University"
- DP — Documented procedure

Example No.2: Identification designation of the document "Qualification standard of teaching staff of the NLC "Karaganda Technical University", where:

ST KTU IV-01-2021:

- Year of approval of the document introduction
- Serial number by type of document (Table 2) in its classification group (Table 1) (issued by the CQM&A)
- The document approved by the First Vice-rector of the NLC "Karaganda Technical University"
- NLC "Karaganda Technical University"
- Standard

Example No. 3: The identification designation of the document "Regulations on the Compliance Control Commission", where:

RTA KTU III-08-2021:

- Year of approval of the introduction of the document
- Serial number by type of document (Table 2) in its classification group (Table 1) (issued by the CQM&A)
- The document approved by the Chairman of the Board - Rector of NLC "Karaganda Technical University"
- NLC "Karaganda Technical University"
- Regulation on the type of activity

7.11.3 Identification designation of internal documents (programs, plans, etc.) not included in the list of Table 2:

Example: Identification designation of the document "Risk Management", where

IRD KTU _I 01 – 2021

- Year of approval of the introduction of the document
- Serial number by type of document (Table 2) in its classification group (Table 1) (issued by the CQM&A)
- Document approved by the Board of the Karaganda Technical University
- NLC "Karaganda Technical University"
- Internal regulatory document

7.12 Appendixes

7.12.1 The material supplementing the document is allowed to be placed in appendices. Such applications can be graphic material, large format tables.

7.12.2 Applications can be mandatory and informational.

7.12.3 The mandatory application contains the requirements that are mandatory to fulfill. And have the format of the identification designation of the record forms:

F. XX-KK-NN-УУ

- End-to-end numbering in its classification group (Table 1)
- The sequential number of the document to which the record belongs
- The code of the classification group of the document to which the record belongs
- The letter designation of the type of document to which the record belongs to (according to table 2)
- Document belonging to record forms

Example: The form of the "Familiarization sheet" relating to the document KTU DP II-01-2021 has the following identification number:

F. DP-II-01-04

- End-to-end numbering of formulas
- The sequential number of the document to which the record belongs
- The code of the classification group of the document to which the record belongs
- The letter designation of the type of document to which the record belongs to (according to table 2)
- Document belonging to record forms

7.12.4 The exception is the format of the identification designation of applications of this DP.

7.12.5 The information appendix contains material of a recommended or reference nature that does not contain mandatory requirements.

7.12.6 Applications are designated as follows: a letter of the Russian alphabet, starting with A, with the exception of the letters Ё, 3, И, О, Ч, Ь1 Ъ, Ь. After the word "Appendix" follows a letter denoting its sequence.

7.12.7 It is recommended to start each application from a new page with the word "Appendix " and its designation at the top in the middle of the line, and under it in brackets for a mandatory application write the word "mandatory", and for informational "recommended" or "reference".

7.12.8 The application must have a title that is written symmetrically relative to the text with a capital letter in a separate line.

7.12.9 The appendices should have end-to-end page numbering in common with the rest of the QMS document.

7.12.10 In the text of the document, all appendices should be referenced, except for the appendix "Bibliography". The degree of mandatory applications with links in the text is not indicated.

7.12.11 Appendices are arranged in the order of references to them in the text of the document, with the exception of the information appendix "Bibliography", which is located last. An example of the design of the "Bibliography" is given in Appendix D.

7.12.12 All QMS documents, except for record forms, must have the following structural elements:

- "Coordination sheet", where a record of approval is made with authorized persons specified in specific QMS documents. The form of the "Approval sheet" is given in Appendix E;
- "Familiarization sheet", where a record of familiarization with a specific QMS document is made, the form of the "Familiarization sheet" is given in Appendix E;

7.12.13 The above listed structural elements are located after the appendices available in the document and must meet the requirements for "Appendixes".

7.13 Requirements for the presentation of documents

7.13.1 The text of the document should be concise, precise, not allowing for different interpretations, logically consistent, necessary and sufficient for the application of the document in accordance with its scope of application.

7.13.2 The text of documents should be divided into sections and subsections, which are assigned ordinal numbers within the entire document, denoted by Arabic numerals without a dot at the end and written with paragraph indentation.

7.13.3 Subsections may, if necessary, be divided into paragraphs, and paragraphs into sub-paragraphs with the designation of their number in Arabic numerals.

Sections should have headings. Subsections, paragraphs and sub-paragraphs may not have headings. The headings should clearly and concisely reflect the content of the sections. Headings should be printed with a capital letter, bold, without a dot at the end, without underlining. Hyphenation of words in headings is not allowed.

7.13.4 If the document has sections, subsections and paragraphs, then the numbering of subsections should be within the section; the numbering of paragraphs - within the subsection; the numbering of sub-paragraphs - within the paragraphs and consist of the number of the section, subsection, paragraph and subparagraph separated by dots.

Example:

1 Personnel management in the QMS

1.1 Aspects of personnel management

1.1.1

1.1.2

1.2 Determining the need for staff training
1.2.1 Preparation planning
1.2.1.1
1.2.1.2
1.2.2 Scope of training
1.2.2.1
1.2.2.2

7.14 Requirements for the text of the document

7.14.1 Depending on the features and content of the document, the requirements are set out in the form of text, tables, graphic material (drawings, diagrams, diagrams) or their combinations.

7.14.2 The document should use the terms, definitions, designations and abbreviations established by applicable standards or legislative acts.

7.14.3 If the terms, definitions and abbreviations adopted in the document are not established by other standards or new definitions of these terms have already been adopted in the prescribed manner, then they are given in the structural elements of the document. "Terms, definitions and abbreviations" with reference to an official source (if available).

7.14.4 The requirements for the design of formulas, illustrations and tables, as well as other requirements not specified in this DP must comply with ST RK 1.5 and ST RK 1.12.

8 Coordination, approval and implementation of internal regulatory documentation

8.1 The internal regulatory documentation of the QMS must necessarily be coordinated with the QMR (except for documents approved by the QMR), with the supervising vice-rector. In the part where there is a financial need, they agree with the chief accountant. The document is also coordinated with officials according to the hierarchical subordination "from the bottom up". The decision on the officials with whom it is necessary to coordinate a specific document is made by the document developer.

8.2 The term of consideration of the QMS document should not exceed five working days from the date of their receipt. All comments to the QMS documents must be justified and be of a specific nature.

8.3 In the absence of comments, the relevant officials under clause 8.1 sign the QMS documents.

8.4 To the final version of the document, the QMS, CQM&A assigns an identification number in accordance with this DP.

8.5 The draft document signed by the developer and the matching signatures is submitted by the developer for approval.

8.6 The introduction of internal regulatory documentation is carried out in accordance with the order of the QMR.

8.7 The date of introduction of the document is determined based on specific conditions and can be set:

- in the order;
- from the moment of approval (signing) of the document.

8.8 After approval, the document is transferred to the division for storage in accordance with Table 3 in PDF format and on paper.

Table 3

Type of document	Division
Documented procedures	CQM&A
Regulations on divisions, job descriptions	Department of Administrative Work
Standard	CQM&A
Methodical instructions	CQM&A
Regulations on types of activities	CQM&A
Rules	CQM&A

9 Replication and distribution of the document

9.1 Providing the department with working copies of documents other than RD, JD, Goals and Quality Policy of the University is carried out by posting on the website.

9.2 The departments are provided with working copies of the documents of the JD, RD, Goals and Quality Policies of the University in accordance with the mailing addresses specified in specific documents by the relevant department (Table 1), which fills out the mailing list in the form (Appendix F), taking into account all users whose activities are regulated by the QMS document.

9.3 Copies of documents issued by the printing method (in printing and multiplying workshops) should be issued in a format of 143×215 mm and issued in accordance with KTU R IV-06.

9.4 If there are more than three copies, reproduction must be carried out through the multiplying workshops of the KTU. The order for the reproduction of the document must be issued by the department that distributes the document.

9.5 Information about updating documents is posted on the University's website.

10 Storage

10.1 After receiving the electronic version of the internal regulatory documentation, the performers get acquainted with it and put their signature on the familiarization sheet (Appendix F), which is mandatory for all documents. At departments and divisions, the head of the department and/or the head of the department is responsible for familiarizing employees with the received documents.

10.2 In divisions, internal regulatory documentation should be stored in ascending order of designations. The head of the department is responsible for the replication, accounting of copies, unauthorized use and preservation of the document.

10.3 The full electronic version of the document is stored in electronic form, and the title page and the familiarization sheet are printed.

10.4 Storage of organizational documentation (JD and RD) is carried out in accordance with KTU R IV-04, KTU R IV-05.

11 Analysis and updating

11.1 Verification, analysis and updating of QMS documents:

- when changing the university's strategy, policy and goals in the field of quality;
- when introducing new specialties (new types of educational services);
- when reengineering processes and changing the life cycle model of educational services;
- when process developers detect inconsistencies, during internal and/or external audits;
- in case of changes in legislative, regulatory and contractual requirements for educational services or university management processes.

11.2 Verification (review) of QMS documents should be carried out once a year.

11.3 Responsibility for the analysis and updating of documents is borne by:

- Quality policy and objectives - QMR;
- DP - QMR, head of CQM&A and heads of processes regulated by these documents;
- regulations, job descriptions – Department of Administrative Work.
- Standards- developer
- MG - developer
- IRD - developer
- Rules - Developer

11.4 Updating of documentation should be carried out by the executors appointed by the responsible persons according to clause 11.3, within no more than 5 working days from the date of receipt of new information.

11.5 The availability of appropriate versions of the document in the places of their application is ensured:

- electronic;
- printed versions of documents.

11.6 The provision of the university departments with the appropriate versions of the registered working copies should be carried out in accordance with clause 9.1 of the CQM&A, DAW or another department that is charged with this duty by order of the rector or by instructions in the structural element (section) of the QMS document "Distribution". This section of the document specifies the distribution locations.

11.7 The provision and responsibility for the availability of valid versions of copies of working copies of documents at workplaces in departments is assigned to the heads of departments. The control of the availability of versions of documents in the divisions is carried out by the QC for the QMS of the division and the head of the CQM&A.

12 Amendments to the internal regulatory documentation of the QMS

12.1 The decision to amend the documents is made by the QMR.

12.2 Amendments to the originals of QMS documents (Quality Policy and Objectives) are carried out by the QMR. CQM&A informs all interested departments about the changes within no more than 5 days.

12.3 Amendments to the originals of internal regulatory documents of the QMS are carried out by the developer.

12.4 Amendments to the originals of QMS documents (regulations on divisions, job descriptions) and to working copies of documents located in divisions are carried out with the gift of.

12.5 When making changes, the QMS document in the footer is assigned a different version number in order and the date of introduction of the version.

13 Document protection and recovery

13.1 The card ensures the confidentiality of the content of the information and documents provided to it. To ensure the security and confidentiality of information in the map, computer networks based on dedicated servers are used. Server administration is performed by qualified specialists, anti-spam software is used to check incoming mail, antivirus software is used to combat malware both on the server and on workstations, servers are protected by uninterruptible power supplies.

13.2 Recovery of documents in case of emergency situations should be carried out by processing copies recorded on electronic media.

14 Cancellation and withdrawal of the document

14.1 The decision to cancel the QMS document and release a new version of the document is made in the following cases:

- in connection with the termination of educational services in a particular specialty;
- when developing a new document to replace this one;
- when making changes, the volume of which is more than 50 percent of the text.

14.2 The document is canceled on the basis of revision (development of a new document to replace the current one).

14.3 When a new version of the document enters into force, the original of the previous version of the document is canceled. Cancelled or replaced documents are withdrawn from all structural divisions and places of their application and destroyed. Cancelled documents are destroyed in any acceptable way (tearing, cutting, burning) that does not allow restoration. Electronic copy files are deleted from electronic media.

14.4 The control of the seizure of documents is carried out by the heads of departments.

15 Ensuring the availability of documents

15.1 Working copies of QMS documents are stored electronically in all departments where activities are carried out, on which the effectiveness of the functioning of QMS documentation depends.

Appendix
(mandatory)

F.01-2020

Registration of the title page of internal QMS documents

Stamp of approval
According to clause 7.6

95mm

< TYPE OF INTERNAL QMS DOCUMENT >

< NAME OF THE DOCUMENT >

55mm

XX KTU KK – NN - YYYY
(identification designation of the document)

Developed by:_____

140mm

Karaganda

Appendix B
(mandatory)

F.02-2020

Example of the title page of a documented procedure

Approved by
Chairman of the Management
Board - Rector of NLC "KTU"
_____M.K. Ibatov
Decision of the Academic
Council
No.___ «___»_____20___

DOCUMENTED PROCEDURE

MANAGEMENT OF DOCUMENTED INFORMATION

KTU DP II-01-2021

Developed by:_____

_____

Karaganda

Appendix C
(mandatory)

F.03-2020

Example of the design of the first sheet of text

Effective date _____
(year, month, day)

1 Scope

2 Regulatory references

Appendix D
(mandatory)

Example of the design of the appendix Bibliography

Bibliography

[1] Grazhdanskiy kodeks Respubliki Kazakhstan. Obshchaya chast (s izmeneniyami i dopolneniyami po sostoyaniyu na 21.01.2019 g.)7

[2] Zakon Respubliki Kazakhstan «Ob obrazovanii» ot 27 iyulya 2007 goda № 319-III s izmeneniyami i dopolneniyami po sostoyaniyu na 04.07.2018 g.

[3] Zakon Respubliki Kazakhstan «O nauke» ot 18 fevralya 2011 goda № 407-IV s izmeneniyami i dopolneniyami po sostoyaniyu na 04.07.2018 g.

[4] Trudovoy kodeks Respubliki Kazakhstan ot 23 noyabrya 2015 goda № 414-V ZRK s izmeneniyami i dopolneniyami po sostoyaniyu na 21.07.2018 g.

[5] Pravila organizatsii uchebnogo protsessa po kreditnoy tekhnologii obucheniya. Prikaz MON RK ot 20 aprelya 2011 goda № 152

[6] Tipovyye pravila deyatelnosti organizatsiy, realizuyushchikh obrazovatelnyye programmy vysshego professionalnogo obrazovaniya. Postanovleniye Pravitelstva Respubliki Kazakhstan ot 17 maya 2013 goda № 499.

[7] Ustav KarTU

[8] Pravila vnutrennego rasporyadka KarTU

Appendix E
(mandatory)

Form of the coordination sheet

F.04-2020

Coordination sheet

Position	Name	Date	Signature

Form of the familiarization sheet

F.05-2020

Familiarization sheet

Position	Name	Date	Signature

Appendix F
(informative)

Form of the distribution list of QMS documents

Distribution list

	Department name	Instance number	Date of receipt	Signature and decryption of the signature of the official	Note

Appendix G
(обязательное)

F.04-2020

Coordination sheet

Position	Name	Date	Signature
QMR	Zhetessova G.S.	06.10.2021	
Head of the CQM&A	Zhunussova G.Ye.	05.10.2021	

Appendix H
(mandatory)

F.05-2020

Familiarization sheet

Position	Name	Date	Signature