APPROVED
President of
JSC «KazUTB named after K. Kulazhanov»
_____ E.T. Kulazhanov
«10» september 2026

POLICY
STUDENT SAFETY
JSC «KAZUTB NAMED AFTER K. KULAZHANOV»
KazUTB- DSD – 7.1.4-2026-19

AGREED
Rector of
JSC «KazUTB named after K. Kulazhanov»
_____ L.K. Baibolova
«10» september 2026

Astana, 2026

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1. TERMS AND DEFINITIONS

The term	Definition
KazUTB named after K. Kulazhanov JSC	Kazakh University of Technology and Business named after K. Kulazhanov Joint-Stock Company.
Student	A person enrolled in an educational programme of the University, including undergraduate, graduate and other categories covered by University rules.
Student safety	A condition and set of organizational, physical, educational, digital and social measures intended to prevent or reduce risks to students and protect their rights, health, dignity, personal data and learning environment.
Safety incident	An event or circumstance that caused or could cause injury, harm, threat, loss, disruption or violation of student rights.
Emergency situation	A situation requiring immediate coordinated action to protect people, property, information or the continuity of University processes.
Risk	The effect of uncertainty on objectives, including the possibility that a safety-related event may affect students, processes or the University's ability to provide educational services.
Preventive measure	An action intended to eliminate the cause of a potential nonconformity or undesirable event or reduce its likelihood or consequences.
Corrective action	An action to eliminate the cause of a detected nonconformity or incident and prevent recurrence.
Interested parties	Persons or organizations that can affect, be affected by, or perceive themselves to be affected by the University's decisions or activities.
KPI	Performance indicator of JSC «KazUTB named after K. Kulazhanov» or its structural divisions used to measure achievement of objectives in terms of effectiveness and efficiency.
QMS	Quality Management System of the University established and maintained in accordance with applicable ISO 9001 requirements.
EDM	Electronic document management system used by the University for controlled document registration, distribution and retention.

2. GENERAL PROVISIONS AND PROCEDURE DESCRIPTION

2.1 This Policy has been developed as part of the Quality Management System (QMS) of the University and establishes the University's general commitments and management principles for student safety.

2.2 The Policy defines a common framework for identifying, preventing, reporting, responding to and reviewing student safety risks and incidents.

2.3 The Policy supports the process approach and risk-based thinking of ISO 9001:2015 and is particularly related to requirements concerning the context of the organization, leadership, planning, resources, operational control, performance evaluation and improvement.

2.4 The Policy applies to all students, employees, teaching staff, administrative and support personnel, contractors and other interested parties whose activities may affect student safety at University premises or in University-organized activities.

2.5 The Policy applies to educational, laboratory, practical, research, sports, cultural, extracurricular, digital and other activities organized or controlled by the University.

2.6 The University shall establish and maintain conditions necessary for the effective operation of its processes, including appropriate physical, social, technological and organizational conditions for learning and student participation.

2.7 Student safety shall be managed through prevention, clear responsibilities, accessible reporting channels, timely response, documented information, monitoring and continual improvement.

2.8 Where this Policy overlaps with specialized University policies and procedures (including information security, academic integrity, anti-corruption, emergency response, occupational safety, personal data protection and inclusion), the requirements shall be applied in an integrated manner.

2.9 Where the requirements of applicable legislation of the Republic of Kazakhstan or binding regulatory requirements differ from this Policy, the applicable legal and regulatory requirements shall prevail.

3. GOAL AND OBJECTIVES

3.1 The purpose of this Policy is to establish a systematic approach to protecting students and maintaining a safe, respectful and reliable educational environment that supports the quality and continuity of educational processes.

3.2 The University considers student safety an integral condition for the quality of educational services and a shared responsibility of management, structural divisions, employees and students.

3.3 The objectives of the Policy are:

3.3.1 Prevent and reduce physical, social, digital, information and operational risks affecting students.

3.3.2 Ensure clear and accessible mechanisms for reporting safety concerns, incidents and violations of student rights.

3.3.3 Ensure timely assessment, escalation, response, investigation and corrective action for safety incidents.

3.3.4 Provide students with safety information, instructions and training relevant to their educational and extracurricular activities.

3.3.5 Maintain safe infrastructure, laboratories, classrooms, common areas and digital learning environments within the University's responsibility.

3.3.6 Prevent bullying, harassment, violence, discrimination, retaliation and other behavior inconsistent with a safe educational environment.

3.3.7 Protect student personal data and confidentiality when safety concerns or incidents are reported.

3.3.8 Integrate safety risks into the University's QMS risk-management and continual-improvement processes.

3.3.9 Monitor student perceptions and objective safety indicators and use results to improve University processes.

3.4 Safety performance indicators

3.4.1 Student Safety Satisfaction Index — target to be established annually through student surveys and approved University targets.

3.4.2 Coverage of students with mandatory safety briefings/training — 100% for activities where briefing is required.

3.4.3 Registration and review of reported safety incidents — 100% of registered cases reviewed according to the applicable procedure.

3.4.4 Timeliness of initial response to reported safety incidents — target established by incident category and internal procedure.

3.4.5 Completion of corrective actions arising from safety incidents — target not lower than 95% within approved deadlines.

3.4.6 Recurrence rate of significant safety incidents — monitored with the objective of continual reduction.

3.4.7 Accessibility of student safety information and reporting channels — 100% availability through designated University communication channels.

KPI values may be refined annually based on risk assessment, baseline data, applicable legal requirements and management review.

4. MAIN DIRECTIONS OF IMPLEMENTATION

4.1 PHYSICAL AND ENVIRONMENTAL SAFETY

4.1.1 Maintain classrooms, laboratories, workshops, libraries, sports facilities, common areas and other University spaces in a condition appropriate for their intended use.

4.1.2 Identify and control hazards associated with buildings, equipment, laboratories, practical training and other activities.

4.1.3 Provide appropriate access controls, warning signs, evacuation routes, emergency information and other preventive measures within the University's responsibility.

4.1.4 Conduct inspections, maintenance and corrective actions in accordance with applicable requirements and internal procedures.

4.1.5 Ensure safety requirements are communicated before students participate in activities presenting specific risks.

4.2 EMERGENCY PREPAREDNESS AND RESPONSE

4.2.1 Maintain arrangements for responding to fire, medical, security, technological and other emergency situations relevant to University operations.

4.2.2 Ensure students and employees know the principal emergency communication and evacuation arrangements applicable to their location or activity.

4.2.3 Provide coordination and escalation mechanisms for incidents requiring involvement of responsible University officials or competent external services.

4.2.4 Review significant emergencies and exercises to identify lessons learned and improvement actions.

4.3 LABORATORY, PRACTICAL, RESEARCH AND SPORTS SAFETY

4.3.1 Access to higher-risk laboratories, workshops and equipment shall be subject to applicable competence, briefing and authorization requirements.

4.3.2 Students shall receive relevant instructions before practical or laboratory activities and shall use required protective equipment where applicable.

4.3.3 Supervisors and responsible employees shall stop or restrict an activity where an immediate safety risk is identified.

4.3.4 Research, internship, fieldwork and off-campus activities organized by the University shall include safety requirements proportionate to identified risks.

4.4 PSYCHOLOGICAL, SOCIAL AND BEHAVIORAL SAFETY

4.4.1 The University maintains zero tolerance for violence, bullying, harassment, intimidation, discrimination and retaliation connected with University activities.

4.4.2 Students shall have accessible channels for raising concerns and seeking assistance without unreasonable barriers.

4.4.3 Reports shall be handled with respect for dignity, confidentiality and procedural fairness, subject to legal and safety requirements.

4.4.4 Preventive activities may include awareness campaigns, orientation, educational sessions, peer-support initiatives and access to appropriate support services.

4.4.5 Where a conflict or complaint is received, the University shall use the applicable internal process and escalate matters according to severity and competence.

4. MAIN DIRECTIONS OF IMPLEMENTATION (CONTINUED)

4.5 DIGITAL AND INFORMATION SAFETY

4.5.1 The University shall promote safe use of learning platforms, information systems, networks and digital services.

4.5.2 Student personal data shall be processed and protected in accordance with applicable legislation and the University's information-security and personal-data requirements.

4.5.3 Students shall be informed, where relevant, about responsible use of accounts, passwords, authentication, devices, online communication and reporting of suspected information-security incidents.

4.5.4 Information-security incidents affecting students shall be managed under the University's applicable information-security incident-management arrangements.

4.6 SAFETY OF STUDENT EVENTS AND UNIVERSITY ACTIVITIES

4.6.1 Organizers of University events shall consider expected attendance, venue, access, emergency arrangements, crowd management and other relevant risks.

4.6.2 Activities involving external locations, transportation, equipment or third-party providers shall include proportionate safety controls.

4.6.3 Responsible organizers shall ensure that safety information is communicated to participants where required.

4.7 STUDENT AWARENESS, TRAINING AND COMMUNICATION

4.7.1 Safety requirements relevant to students shall be communicated during onboarding/orientation and periodically thereafter as appropriate.

4.7.2 Mandatory briefings shall be documented where required by law, internal procedure or risk assessment.

4.7.3 Safety information shall be communicated in a form accessible to the intended student audience.

4.7.4 The University shall provide clear information on where and how students can report an incident, hazard or safety concern.

4.8 INCIDENT REPORTING AND RESPONSE

4.8.1 Any student, employee or other participant may report a safety concern or incident through the University's designated channels.

4.8.2 Reports shall be registered and assessed according to the applicable incident category and severity.

4.8.3 Immediate threats to life, health, security or critical University operations shall be escalated without delay to the competent responsible persons and, where required, to external emergency services.

4.8.4 The University shall protect the reporting person from retaliation to the extent provided by law and internal rules.

4.8.5 Significant incidents shall be investigated to determine causes, contributing factors, required corrective actions and opportunities for prevention.

4.8.6 Incident records shall be maintained as controlled documented information with access restricted according to their sensitivity.

4.9 RISK MANAGEMENT AND CONTINUAL IMPROVEMENT

4.9.1 Student safety risks shall be identified and evaluated within relevant University processes and risk registers.

4.9.2 Controls shall be selected according to the nature and significance of the risk and shall be reviewed when conditions, activities, infrastructure or requirements change.

4.9.3 Trends in incidents, complaints, near misses, student feedback and audit findings shall be considered when planning improvement actions.

4.9.4 Lessons learned from incidents, exercises and internal audits shall be incorporated into training, procedures and risk controls where appropriate.

5. RESPONSIBILITY AND ACCOUNTABILITY

5.1 The President and Rector provide leadership and allocate resources necessary for implementation of this Policy within the University's governance framework.

5.2 The Strategic Development Department (DSR) is the document owner and is responsible for coordinating the review and improvement of this Policy within the QMS framework.

5.3 Structural divisions are responsible for implementing safety requirements within their areas of responsibility, identifying relevant risks, maintaining required records and initiating improvement actions.

5.4 Heads of structural divisions shall ensure that employees and students receive safety information relevant to their activities and that identified deficiencies are addressed.

5.5 Employees and teaching staff are responsible for complying with applicable safety requirements, promptly reporting hazards and incidents, and taking reasonable preventive action within their authority.

5.6 Students are responsible for following safety instructions, using facilities and equipment as intended, reporting hazards and incidents, and refraining from actions that could endanger themselves or others.

5.7 The information-security function and other competent functions shall participate in matters within their respective areas of competence.

5.8 The University may designate responsible persons, commissions or working groups for particular categories of student safety in accordance with internal regulations.

5.9 Monitoring, reporting and management review

5.9.1 Safety performance shall be monitored using approved KPIs, incident statistics, student feedback, audit results and other relevant information.

5.9.2 Significant trends and unresolved risks shall be escalated through the University's management and QMS review mechanisms.

5.9.3 Results shall be used to determine corrective actions, preventive measures, resource needs and opportunities for continual improvement.

6. FINAL PROVISIONS

6.1 This Policy is mandatory for all structural subdivisions of JSC «KazUTB named after K. Kulazhanov» within the scope of its application.

6.2 The Policy shall be communicated to relevant employees and students through established University communication and document-management channels.

6.3 Issues not regulated by this Policy shall be resolved in accordance with applicable legislation of the Republic of Kazakhstan and relevant internal University documents.

6.4 If changes in legislation or binding requirements cause provisions of this Policy to conflict with such requirements, the applicable requirements shall prevail until the Policy is revised.

6.5 This Policy shall be reviewed when material changes occur in legislation, University processes, infrastructure, risk profile, organizational structure or QMS requirements, and at least within the review cycle established for controlled QMS documents.

6.6 Amendments shall be approved, registered, communicated and controlled in accordance with the University's document-control procedure.

7. PROCESS RISKS AND RISK PREVENTION ACTIVITIES

Risk / potential consequence	Risk prevention and control actions	Monitoring / evidence
Physical injury or unsafe conditions	Inspections, maintenance, safety instructions, access controls, emergency arrangements, corrective actions.	Inspection records; incident statistics; corrective-action records.
Fire or emergency response failure	Emergency planning, evacuation information, drills/exercises where applicable, escalation and communication arrangements.	Exercise results; emergency records; action plans.
Laboratory/practical incident	Risk assessment, briefing, supervision, competence/authorization, protective equipment and equipment controls.	Briefing records; access/authorization records; incident reports.
Bullying, harassment, violence or discrimination	Zero-tolerance requirements, reporting channels, awareness, confidential handling, escalation and corrective measures.	Reports; response times; case review records; student feedback.
Digital or information-security incident	Awareness, access controls, authentication, information-security procedures and incident response.	Training coverage; incident records; audit findings.
Failure to report or delayed response	Accessible reporting channels, defined responsibilities, escalation rules and awareness.	Response-time KPI; complaints; audit findings.
Reputational damage / loss of trust	Transparent governance, timely response, confidentiality, documented decisions and continual improvement.	Student satisfaction; complaint trends; management review.
Noncompliance with legal or QMS requirements	Periodic review of requirements, internal audits, controlled documentation and corrective actions.	Audit results; compliance reviews; corrective-action status.

8. PRIVACY

8.1 This Policy is an internal regulatory document of JSC «KazUTB named after K. Kulazhanov» and is subject to controlled access and distribution in accordance with the University's document-management rules.

8.2 Safety incident information, complaints, personal data and investigation materials shall be accessed only by persons authorized for the relevant purpose and competence.

8.3 Disclosure of information to third parties shall be carried out only where legally required, necessary for the protection of persons or University interests, or otherwise authorized under applicable requirements.

8.4 Information used for monitoring and reporting should be aggregated or anonymized where this is sufficient for the intended purpose.

8.5 During certification or external assessment of the QMS, relevant controlled information may be made available to certification bodies or other authorized assessors to the extent necessary for the audit and in accordance with confidentiality requirements.

Normative basis: ISO 9001:2015 and applicable legislation and regulatory requirements of the Republic of Kazakhstan. The University shall maintain a current register of applicable external requirements within the relevant QMS processes.

F. DSD - 7.5 – 2026 – 01 - 02 (mandatory)

APPROVAL SHEET

Position	Full name	Date	Signature
Vice-Rector for AA	Askarbekov E.B.	08.09.2026	
Vice-Rector for R&I	Aibuldinov Y.K.	08.09.2026	
Vice-Rector for SA&SD	Berdigaliuly S.	08.09.2026	
Director of the DSD	Orazalina D. K.	08.09.2026	
Head of the QSMD	Ernst A.	09.09.2026	

F. DSD - 7.5 – 2026 – 01 - 03 (mandatory)

FAMILIARIZATION SHEET

Position	Full name	Date	Signature

F. DSD - 7.5 – 2026 – 01 - 04 (mandatory)

CHANGE REGISTRATION SHEET

Change Number	Change Notice Number	Number of sheets (pages)				Total sheets (after changes)	Date of entry	Full name of the person making the changes	Signature of the person who made the changes
		modified	replaced	new	cancelled				

F. DSD - 7.5 – 2026 – 01 - 05 (mandatory)

PERIODIC INSPECTION RECORD SHEET

Verification Date	full name of the person, who performed the check	Signature who performed the Verification	Formulation Comments