

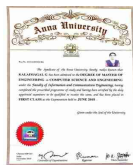


Name of the College	6118 - P.S.V.COLLEGE OF ENGINEERING AND TECHNOLOGY
Faculty ID	291760
Name of the Department	COMPUTER SCIENCE AND ENGINEERING
Name of the Degree & Course	B.E.-GENERAL ENGINEERING
Name of the faculty member	MS. KALAIMAGAL G
Regular Or Adjunct	Regular
Image	 <p>D.F.P. LAWRENCE,M.E.,Ph.D., PRINCIPAL P.S.V.COLLEGE OF ENGINEERING & TECHNOLOGY KRISHNAGIRI Dt-635 108.</p>
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	18/34,CHETTIYAM PATTI,AMBETHKAR NAGAR,
Line 2	KRISHNAGIRI,635001
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 9677378859
Email	KALAIMAGALESK@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	EAVPK2328L
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-43414085269
Date of Birth	03-10-1994
Age	30
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	COMPUTER SCIENCE AND ENGINEERING	2016	P.S.V.COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	73	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2018	P.S.V.COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.9	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

IV. Academic Experience :
(Start from the Current working Experience) *

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
P.S.V.COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	28-03-2022	05-02-2025	2	10	9
Total				2	10	14

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

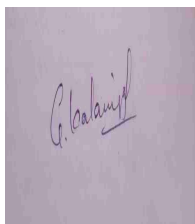
VI. C.O.E. Appointment Experience :

Capacity at which service is extended for the conduct of Examination during the last year

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of my knowledge.

Signature of the Faculty :

A handwritten signature in blue ink, appearing to read "G. Kalanithi", is written on a light-colored rectangular background.