



Name of the College	6118 - P.S.V.COLLEGE OF ENGINEERING AND TECHNOLOGY
Faculty ID	290801
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.E.-ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the faculty member	MR. SENTHIL V
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3/207 ,MAANKARANKOTTAI, SOLAI KOTTAI
Line 2	DHARMAPURI,636704
District	DHARMAPURI
Telephone number	-
Mobile number	+91 - 9994270300
Email	SENTHIL.VLSI84@GMAIL.COM
Gender	MALE
Community	MBC
PAN Number	DDWPS9120P
Passport Number	
Faculty code given by C.O.E.	5109078
Faculty code given by A.I.C.T.E.	1-3379572752
Date of Birth	22-08-1984
Age	40
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.	ELECTRONICS AND COMMUNICATION ENGINEERING	2007	R.M.D. ENGINEERING COLLEGE (AUTONOMOUS)	ANNA UNIVERSITY	74	FIRST CLASS	
P.G.	M.E.	VLSI DESIGN	2010	ANNA UNIVERSITY REGIONAL CAMPUS, COIMBATORE	ANNA UNIVERSITY	7.99	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	20-07-2023	04-02-2025	1	6	16
GLOBAL INSTITUTE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	15-06-2012	31-10-2016	4	4	16
J.K.K.NATARAJA COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	14-06-2010	18-05-2012	1	11	5
J.K.K.NATARAJA COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	07-11-2016	31-05-2023	6	6	24
Total				14	5	4

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 Exmination during the last year

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days) 3	Central Evaluation (No. of scripts Evaluated) 300	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 : 