

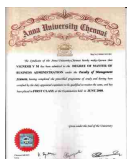


Name of the College	6118 - P.S.V.COLLEGE OF ENGINEERING AND TECHNOLOGY
Faculty ID	271207
Name of the Department	MASTER OF BUSINESS ADMINISTRATION
Name of the Degree & Course	M.B.A.-MASTER OF BUSINESS ADMINISTRATION
Name of the faculty member	MR. VIGNESH V M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	9/38 KASPA A MAIN ROAD
Line 2	AMBUR-635802
District	TIRUPATHUR
Telephone number	-
Mobile number	+91 - 9791512739
Email	VMVIGNESH.MADAN@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	APQPV9910B
Passport Number	
Faculty code given by C.O.E.	6118339
Faculty code given by A.I.C.T.E.	1-44724021427
Date of Birth	19-12-1984
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.B.A.	BUSINESS ADMINISTRATION	2006	OTHERS - MAZHARUL ULOOM COLLEGE	THIRUVAL LUVAR UNIVERSITY	60	SECOND CLASS	
P.G.	M.B.A.	MASTER OF BUSINESS ADMINISTRATION	2008	PRIYADARSINI ENGINEERING COLLEGE	ANNA UNIVERSITY	64	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	12-08-2024	07-02-2025	0	5	27
Total				0	5	29

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
EMCUS TECHNOLOGIES	MARKETING MANAGER	MARKETING	11-11-2021	24-07-2024	2	8	14
Total					2	8	17

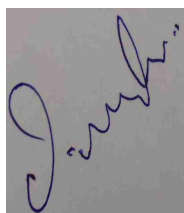
VI. C.O.E. Appointment Experience :

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)

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 be 'J. Singh', is written on a light-colored background.