

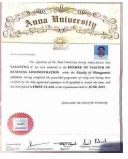


Name of the College	6118 - P.S.V.COLLEGE OF ENGINEERING AND TECHNOLOGY
Faculty ID	314891
Name of the Department	MASTER OF BUSINESS ADMINISTRATION
Name of the Degree & Course	M.B.A.-MASTER OF BUSINESS ADMINISTRATION
Name of the faculty member	MRS. VASANTHA C
Regular Or Adjunct	Regular
Image	 <p>Dr.P. 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	2/289,AKKAPPAN NAGAR ,POOSARI PATTI,
Line 2	KRISHNAGIRI,635001
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 6369397220
Email	VASANTHAVASANTHALA@GMAIL.COM
Gender	FEMALE
Community	MBC
PAN Number	CDUPV1700P
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-AUC000000
Date of Birth	21-06-1990
Age	35
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.COM.	COMMERCE	2011	OTHERS - ARINYAR ANNA COLLEGE OF ARTS AND SCIENCE	PERIYAR UNIVERSITY	6.2	FIRST CLASS	
P.G.	M.B.A.	MASTER OF BUSINESS ADMINISTRATION	2015	P.S.V.COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.24	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	08-01-2025	06-02-2025	0	0	30
Total				0	0	0

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
ABC FRUITS	ACCOUNTANT	ACCOUNTANT	01-06-2021	12-02-2024	2	8	12
Total					2	8	15

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)	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.

A handwritten signature in black ink, appearing to read 'C. Vapindha', is centered within a light gray rectangular box.

Signature of the Faculty :