





Name of the College	6118 - P.S.V.COLLEGE OF ENGINEERING AND TECHNOLOGY
Faculty ID	290221
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-PHYSICS
Name of the faculty member	DR. ARIVAZHAGAN R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3/243C, KODIYUR ,THIPPANAPALLI VILLAGE ,
Line 2	KRISHNAGIR,635115
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 9787161750
Email	RARIVAZHAGAN1988@GMAIL.COM
Gender	MALE
Community	MBC
PAN Number	AQTPA8713B
Passport Number	
Faculty code given by C.O.E.	6118332
Faculty code given by A.I.C.T.E.	1-43838762123
Date of Birth	05-04-1988
Age	36
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.SC.	OTHERS - PHYSICS	2009	OTHERS - ARIGNAR ANNA COLLEGE ARTS AND SCIENCE	PERIYAR UNIVERSITY	76.5	FIRST CLASS	
P.G.	M.SC.	OTHERS - PHYSICS	2012	OTHERS - SELVAMM ARTS AND SCIENCE COLLEGE	PERIYAR UNIVERSITY	74.5	FIRST CLASS	
PH.D.	PH.D.	PHYSICS	2023	OTHERS - THIRUVALUVAR GOVERNMENT ARTS COLLEGE	PERIYAR UNIVERSITY	AWARDED		
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - PHYSICS	2013	OTHERS - SELVAMM ARTS AND SCIENCE COLLEGE	PERIYAR UNIVERSITY	81.7	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

SPECTROSCOPIC AND MOLECULAR DOCKING STUDIES OF SOME BIOLOGICAL ACTIVE ORGANIC MOLECULES VIA QUANTUM CHEMICAL AND EXPERIMENTAL METHODS

III. Faculty in which Ph.D. was awarded

FACULTY OF SCIENCE AND HUMANITIES

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	20-11-2023	05-02-2025	1	2	16
Total				1	2	17


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)	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 :