Name of the College	6118 - P.S.V.COLLEGE OF ENGINEERING AND TECHNOLOGY					
Faculty ID	286768					
Name of the Department	SCIENCE AND HUMANITIES					
Name of the Degree & Course	S&H-ENGLISH					
Name of the faculty member	MRS. REVATHY D					
Regular Or Adjunct	Regular					
Image	Dr.P. LAWRENCE, M.B., Ph.D., PRINCIPAL P.S. V. COLLEGE OF ENGINEERING & TECHNOLOGY KRISHNAGIRI DI-635 108.					
Present Designation	ASSISTANT PROFESSOR					
Residential Address Line 1	21, SUBASH CHANDRA BOSE STREET,KAVERIPATTINAM.					
Line 2	KRISHNAGIRI,635112					
District	KRISHNAGIRI					
Telephone number	-					
Mobile number	+91 - 9698581233					
Email	DREVATHY1305@GMAIL.COM					
Gender	FEMALE					
Community	MBC					
PAN Number	CALPR0074G					
Passport Number						
Faculty code given by C.O.E.	6118285					
Faculty code given by A.I.C.T.E.	1-3310459688					
Date of Birth	05-10-1990					
Age	34					
I. Particulars of Educational Qualification : (only completed)						

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.A.	ENGLISH	2012	OTHERS - ARIGNAR ANNA COLLEGE OF ARTS AND SCIENCE	PERIYAR UNIVERSI TY	60	FIRST CLASS	Section 1 and 1 an
P.G.	OTHERS - M.A	OTHERS - ENGLISH	2015	OTHERS - ARIGNAR ANNA COLLEGE OF ARTS AND SCIENCE	PERIYAR UNIVERSI TY	65	FIRST CLASS	Section 1
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - ENGLISH	2017	OTHERS - ARIGNAR ANNA COLLEGE OF ARTS AND SCIENCE	PERIYAR UNIVERSI TY	80	DISTINCTI ON	Andread or annual region of the control of the cont

<sup>\*</sup> 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	Experience		
Name of the Conege	Designation	Johning Date	Working Institutions	Years	Months	Days
P.S.V.COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	01-08-2018	05-02-2025	6	6	5
	6	6	8			

V	<b>.</b> .	lnd	lus	tria	L	Exp	er	iei	nce	:
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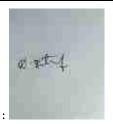
Name of the	Designation	Nature of	Joining Date	Relieving Date	Experience		
Organisation	Designation	Work	Joining Date		Years	Months	Days

#### VI. C.O.E. Appointment Experience :

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

AUR (No. of Member (Practical) (No. of days)	r Central Evaluation (No. of scripts Evaluated) 500	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:**