





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	 <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	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	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.A.	ENGLISH	2012	OTHERS - ARIGNAR ANNA COLLEGE OF ARTS AND SCIENCE	PERIYAR UNIVERSITY	60	FIRST CLASS	
P.G.	OTHERS - M.A	OTHERS - ENGLISH	2015	OTHERS - ARIGNAR ANNA COLLEGE OF ARTS AND SCIENCE	PERIYAR UNIVERSITY	65	FIRST CLASS	
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - ENGLISH	2017	OTHERS - ARIGNAR ANNA COLLEGE OF ARTS AND SCIENCE	PERIYAR UNIVERSITY	80	DISTINCTION	

* 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	01-08-2018	05-02-2025	6	6	5
Total				6	6	8

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) 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 :

