



P.S.V.COLLEGE OF ENGINEERING AND TECHNOLOGY

(Approved by AICTE, New Delhi and Affiliated to Anna University, Chennai)

(Inclusion Under Section 2(f) & 12(B) of the UGC Act, 1956)

(An ISO 9001: 2015 Certified Institution)

Mittapalli, Balinayanapalli - 635 108, Krishnagiri District, Tamil Nadu.



MANDATORY DISCLOSURE – 2022-23



P.S.V.COLLEGE OF ENGINEERING AND TECHNOLOGY

(Approved by AICTE, New Delhi and Affiliated to Anna University, Chennai)

(Inclusion Under Section 2(f) & 12(B) of the UGC Act, 1956)

(An ISO 9001: 2015 Certified Institution)

Mittapalli, Balinayanapalli - 635 108, Krishnagiri District, Tamil Nadu.



MANDATORY DISCLOSURE – 2022-23

1) AICTE FILE NO:

AICTE File No.	1-9318220446 & 1-8517201
Date & Period of last approval	15-Jun-2021

2) NAME AND ADDRESS OF THE INSTITUTION:

Name	P.S.V.COLLEGE OF ENGINEERING AND TECHNOLOGY
Address	MITTAPALLI, BALINAYANAPALLI (POST), ELATHAGIRI (S.O), KRISHNAGIRI (DISTRICT) PIN CODE: 635 108., KRISHNAGIRI, KRISHNAGIRI, Tamil Nadu, 635108
Post	ELATHAGIRI (S.O)
Taluk	KRISHNAGIRI
District	KRISHNAGIRI
Pin Code	635 108
State	Tamil Nadu
Phone No. with STD Code	9444494360
Fax No.	Nil
E-Mail	selvam.psv@gmail.com
Web site	www.psvcet.ac.in
Nearest Railway Station (Dist in Km)	Rayakottai (30 km), Jolarpet Junction(30 km)
Nearest Airport (Dist in Km)	Bangalore (124 KM)

3) TYPE OF INSTITUTION:

Type of Institution	Private - Self Financing
Category (1) of the Institution	Non Minority
Category (2) of the Institution	Co-Ed

4) NAME OF THE ORGANIZATION RUNNING THE INSTITUTION:

Name of the organization running the Institution	P.S.V.COLLEGE OF ENGINEERING AND TECHNOLOGY
Type of the organization	Trust
Address of the organization	MITTAPALLI, BALINAYANAPALLI (POST), ELATHAGIRI (S.O), KRISHNAGIRI (DISTRICT) PIN CODE: 635 108., KRISHNAGIRI, KRISHNAGIRI, Tamil Nadu, 635108
Registered with	Sub Registrar Office, Bargur, Krishnagiri (Dt)
Registration date	06/07/2005
Website of the organization	www.psvcet.ac.in

5) NAME OF THE AFFILIATION UNIVERSITY

Name of the affiliation University	ANNA UNIVERSITY, CHENNAI
Address	ANNA UNIVERSITY CHENNAI - 600 025
Website	www.annauniv.edu
Latest affiliation period	One year (2020-21)

6) NAME OF THE PRINCIPAL / DIRECTOR:

Name of the Principal/ Director	Dr. P. LAWRENCE
Exact Designation	PRINCIPAL
Phone number with STD Code	9445055991
FAX number with STD Code	Nil
Email	principal@psvcet.ac.in
Highest Degree	Ph.D.
Field of Specialization	Mechanical Engineering

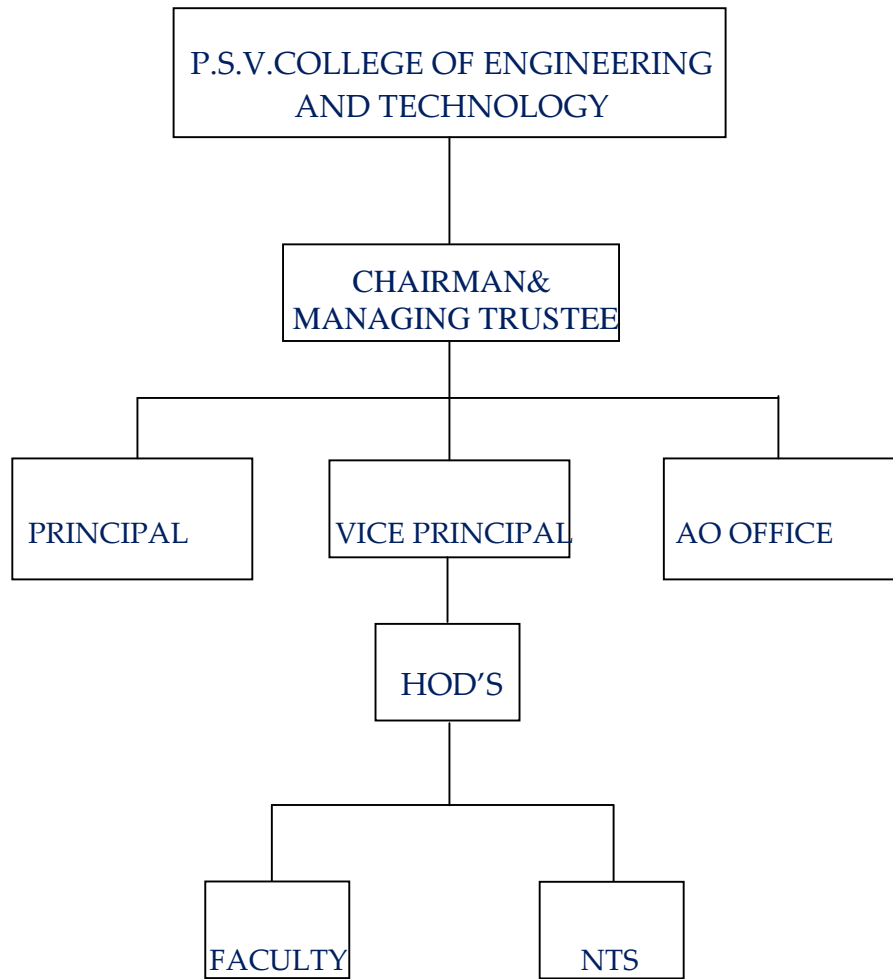
7) GOVERNING BOARD MEMBERS:

Name	Position	Qualification	Present Designation/ Occupation	Telephone Numbers	Mobile No.	E-mail id	Address
Dr. Lawrence P	Member Secretary	Ph.D.- Mechanical Engineering	Principal	04343 - 268333	9444273966	principalpsvcet@gmail.com	257, Phase-ii, TNHB - Tirupattur - 635601 Vellore
Dr. Vivek S	Members	OTHERS- M.A- Others- English	Director	04343 - 268333	9941595200	selvam.psv@gmail.com	H/33, Second Phase, New Housing Board - Kattikanapalli- 635001 Krishnagiri
Mrs. Pushpa G	Members	OTHERS- Others	Secretary	04343 - 268333	9442333157	gpushpa.psv@gmail.com	H/33, Second Phase, New Housing Board - Kattikanapalli - 635001 Krishnagiri
Dr. Selvam P	Chairman	Ph.D.- English	Chairman	04343 - 268333	9442611636	selvam.psv@gmail.com	H/33, Second Phase, New Housing Board - Kattikanapalli, Krishnagiri - 635001

8) ACADEMIC ADVISORY BODY

Academic Advisory Body	Principal, Vice Principal and HODs.
Frequency of meeting & date of last meeting	Once in a year (February Each Year)

9) ORGANIZATIONAL CHART



10) STUDENT FEEDBACK MECHANISM ON INSTITUTIONAL GOVERNANCE/ FACULTY PERFORMANCE

Student feedback mechanism on Institutional Governance/ faculty performance	Suggestion Box for Institute Governance	Student Feedback using forms / Faculty Performance Appraisal System.
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11) GRIEVANCE REDRESSAL MECHANISM FOR FACULTY, STAFF & STUDENTS


Grievance redressal mechanism for faculty, staff & students	Meeting with HOD & Staff at regular intervals HOD's meeting with Principal at regular intervals Meeting with students at regular intervals
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12) DEPARTMENT DETAILS:



Anna University, Chennai
P S V College of Engineering and Technology - 6118

13. Faculty

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	DR. LAWRENCE P
Regular Or Adjunct	Regular
Image	
Present Designation	PRINCIPAL
Residential Address Line 1	NO 257,PHASE II,TNHB, TIRUPATTUR
Line 2	635601
District	VELLORE
Telephone number	-
Mobile number	+91 - 9444273966
Email	IAWPHD2008@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	ADWPL0002C
Passport Number	
Aadhar Number	890160915338
Faculty code given by C.O.E.	5118001
Faculty code given by A.I.C.T.E.	12623966336
Date of Birth	04-07-1973
Age	49
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.E.	MECHANICAL ENGINEERING	1994	PSNA COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	MADURAI KAMARAJ UNIVERSITY	64	FIRST CLASS	
P.G.	M.E.	THERMAL ENGINEERING	2002	SRI VENKATESWARA COLLEGE OF ENGINEERING (AUTONOMOUS)	UNIVERSITY OF MADRAS	82	FIRST CLASS	
PH.D.	PH.D.	MECHANICAL ENGINEERING	2012	OTHERS - ANNA UNIVERSITY	ANNA UNIVERSITY	Y		

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

EXPERIMENTAL INVESTIGATION ON CI ENGINE CHARACTERISTICS USING ETHONAL AND BIO DIESEL AS ALTERNATIVE FUELS

III. Faculty in which Ph.D. was awarded

FACULTY OF MECHANICAL ENGINEERING

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
PODHIGAI COLLEGE OF ENGINEERING AND TECHNOLOGY	PRINCIPAL	30-01-2012	03-06-2015	3	4	5
VEL TECH	ASSISTANT PROFESSOR	23-06-2002	13-10-2005	3	3	21
PRIYADARSHINI ENGINEERING COLLEGE	ASSISTANT PROFESSOR	17-11-2005	28-01-2012	6	2	12
OTHERS - PANDIYAN POLYTECHNIC COLLEGE	OTHERS - LECTURER	05-06-1994	30-12-1998	4	6	25
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	PRINCIPAL	04-06-2015	23-05-2022	6	11	20
ARIGNAR ANNA INSTITUTE OF SCIENCE AND TECHNOLOGY	OTHERS - LECTURER	04-01-1999	30-08-2001	2	7	27
Total				27	0	21

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 :




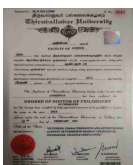
Capacity at which service is extended for the conduct of Exmination during the last year

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 : 

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-CHEMISTRY
Name of the faculty member	DR. ANDREWS B
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	23/10A, THIRD STREET, NEW BETHALEM
Line 2	AMBUR, 635802
District	TIRUPATHUR
Telephone number	-
Mobile number	+91 - 9345524447
Email	BANDREWS2006@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AVHPA1371N
Passport Number	
Aadhar Number	337973015857
Faculty code given by C.O.E.	5119093
Faculty code given by A.I.C.T.E.	111053500834
Date of Birth	15-05-1981
Age	42
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 - CHEMISTRY	2004	OTHERS - ISLAMIAH COLLEGE VANIYAMBADI	UNIVERSITY OF MADRAS	55	FIRST CLASS	
P.G.	M.SC.	OTHERS - CHEMISTRY	2006	OTHERS - ISLAMIAH COLLEGE VANIYAMBADI	THIRUVALUVAR UNIVERSITY	66	FIRST CLASS	
P.G.	OTHERS - M.PHIL	OTHERS - CHEMISTRY	2007	OTHERS - ISLAMIAH COLLEGE VANIYAMBADI	THIRUVALUVAR UNIVERSITY	66	FIRST CLASS	
PH.D.	PH.D.	OTHERS - ORGANIC CHEMISTRY	2016	OTHERS - ISLAMIAH COLLEGE VANIYAMBADI	THIRUVALUVAR UNIVERSITY	YES		

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

SYNTHESIS ORGANISATION AND ANTI BACTERIAL ACTIVITIES OF PYRIDIMINE DERIVATIVES OF TRIAZOLE OXADIAZOLE AND THIAZOLE

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
PRIYADARSHINI ENGINEERING COLLEGE	ASSISTANT PROFESSOR	17-08-2007	30-05-2017	9	9	14
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSOCIATE PROFESSOR	14-11-2022	30-03-2023	0	4	16
OTHERS - VANAVIL ARTS AND SCIENCE COLLEGE	ASSISTANT PROFESSOR	01-06-2018	31-07-2021	3	1	30
Total				13	4	2

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 :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the Degree & Course	B.E.-ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the faculty member	DR. GEETHA V
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	2/390,JAYANTHI NIVAS,AGRI COLONY,OPP TO SATYA NAGAR,THOKKAMPATTI POST
Line 2	DHARMAPURI - 636705
District	DHARMAPURI
Telephone number	-
Mobile number	+91 - 9159488090
Email	VIKASNIGEETHA@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BHKPG7944K
Passport Number	
Aadhar Number	317908109802
Faculty code given by C.O.E.	6118043
Faculty code given by A.I.C.T.E.	1404782384
Date of Birth	23-04-1973
Age	50
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.E.	ELECTRICAL AND ELECTRONICS ENGINEERING	1995	GOVERNMENT COLLEGE OF ENGINEERING SALEM (AUTONOMOUS)	UNIVERSITY OF MADRAS	65	FIRST CLASS	
P.G.	M.E.	POWER ELECTRONICS AND DRIVES	2009	MUTHAYAMMAL ENGINEERING COLLEGE (AUTONOMOUS)	ANNA UNIVERSITY	81	FIRST CLASS	
PH.D.	PH.D.	ELECTRICAL AND ELECTRONICS ENGINEERING	2021	OTHERS - ANNA UNIVERSITY	ANNA UNIVERSITY	YES		

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

CERTAIN INVESTIGATIONS ON PERFORMANCE ENHANCEMENT OF DIRECT TORQUE CONTROLLED BRUSH LESS DC MOTOR USING META HEURISTIC METHODS

III. Faculty in which Ph.D. was awarded

FACULTY OF ELECTRICAL ENGINEERING

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
SRI NANDHANAM COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	26-12-2005	31-05-2006	0	5	6
NARASU'S SARATHY INSTITUTE OF TECHNOLOGY	OTHERS - SENIOR LECTURER	15-07-2009	05-06-2012	2	10	22
OTHERS - PEEGEE POLYTECHNIC	OTHERS - LECTURER	08-07-1995	05-07-1998	2	11	29
MUTHAYAMMAL ENGINEERING COLLEGE (AUTONOMOUS)	ASSISTANT PROFESSOR	08-06-2006	04-05-2009	2	10	27
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSOCIATE PROFESSOR	07-06-2012	03-02-2023	10	7	27
JAYAM COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	06-07-1998	09-07-2003	5	0	4
Total				24	10	1

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 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)
		4	200	100

It is certified that all the information provided are true to the best of my knowledge.

Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the Degree & Course	B.E.-ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the faculty member	DR. VETTRIVELAN L P
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	2/59, RAJA STREET,LALIGAM
Line 2	DHARMAPURI - 636804
District	DHARMAPURI
Telephone number	-
Mobile number	+91 - 9095788324
Email	VETTRIVELANVETTRI@GMAIL.COM
Gender	MALE
Community	MBC
PAN Number	AJLPV7917R
Passport Number	
Aadhar Number	204290980200
Faculty code given by C.O.E.	6118079
Faculty code given by A.I.C.T.E.	2187201095
Date of Birth	30-07-1977
Age	46
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.E.	ELECTRICAL AND ELECTRONICS ENGINEERING	2002	SAPTHAGIRI COLLEGE OF ENGINEERING	UNIVERSITY OF MADRAS	60	SECOND CLASS	
P.G.	M.E.	POWER SYSTEMS ENGINEERING	2006	OTHERS - ANNAMALAI UNIVERSITY	ANNAMALAI UNIVERSITY	7.85	FIRST CLASS	
PH.D.	PH.D.	ELECTRICAL ENGINEERING	2020	OTHERS - ANNA UNIVERSITY	ANNA UNIVERSITY	YES		

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

APPLICATION OF GENETIC ALGORITHM IN SHORT TERM HYDROTHERMAL SCHEDULING FOR COST AND EMISSION

III. Faculty in which Ph.D. was awarded

FACULTY OF ELECTRICAL ENGINEERING

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
JAYAM COLLEGE OF ENGINEERING AND TECHNOLOGY	OTHERS - LECTURER	28-06-2006	02-05-2011	4	10	5
OTHERS - LAKSHMI NARAYANA POLYTECHNIC	OTHERS - LECTURER	10-06-2002	28-05-2004	1	11	19
JAYAM COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	03-05-2011	31-07-2012	1	2	29
JAYAM COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSOCIATE PROFESSOR	01-08-2012	29-06-2013	0	10	29
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSOCIATE PROFESSOR	01-07-2013	03-02-2023	9	7	3
Total				18	6	0

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)
		5	200	100

It is certified that all the information provided are true to the best of my knowledge.



Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-CHEMISTRY
Name of the faculty member	DR. PRABU S
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	1/124 THONNAIYAN VATTAM KANDILI
Line 2	TIRUPATTUR - 635901
District	VELLORE
Telephone number	-
Mobile number	+91 - 9976957459
Email	PRABUPHD13@GMAIL.COM
Gender	MALE
Community	MBC
PAN Number	BQQPP7092C
Passport Number	
Aadhar Number	241664700164
Faculty code given by C.O.E.	5122191
Faculty code given by A.I.C.T.E.	
Date of Birth	09-05-1987
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.SC.	OTHERS - CHEMISTRY	2007	OTHERS - SACRED HEART COLLEGE	THIRUVALLUVAR UNIVERSITY	73	FIRST CLASS	
P.G.	OTHERS - M.PHIL	OTHERS - CHEMISTRY	2010	OTHERS - SACRED HEART COLLEGE	THIRUVALLUVAR UNIVERSITY	73	FIRST CLASS	
P.G.	M.SC.	OTHERS - GENERAL CHEMISTRY	2009	OTHERS - SACRED HEART COLLEGE	THIRUVALLUVAR UNIVERSITY	71	FIRST CLASS	
PH.D.	PH.D.	CHEMISTRY	2017	OTHERS - BARATHIYAR UNIVERSITY	BHARATHIYAR UNIVERSITY	YES		

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

A STUDY OF HOST GUEST COMPLEXATION OF SOME SELECTIVE NUCLEOSIDES IN BETA CYCLODEXTRIN MEDIUM CHARACTERIZATION AND IN VITRO CYTOTOXIC ASSAY IN SOLID STATE

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
S K P ENGINEERING COLLEGE	ASSISTANT PROFESSOR	23-07-2010	21-08-2017	7	0	30
OTHERS - UNIVERSITY OF MALAYA	OTHERS - POST DOCTORAL RESEARCH FELLOW	20-02-2019	19-02-2020	0	11	28
I F E T COLLEGE OF ENGINEERING (AUTONOMOUS)	ASSISTANT PROFESSOR	16-10-2017	28-11-2018	1	1	13
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSOCIATE PROFESSOR	08-01-2021	22-05-2022	1	4	15
Total				10	6	29

V. Industrial Experience :

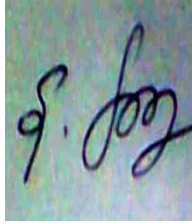
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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)
6		2		

It is certified that all the information provided are true to the best of my knowledge.

Signature of the Faculty : 

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-CHEMISTRY
Name of the faculty member	DR. ANITHA P
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	M 213 FIRST PHASE TNHB
Line 2	KRISHNAGIRI
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 8778674643
Email	ANITHASANJAI2006@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	AEZPA0450Q
Passport Number	
Aadhar Number	394919583505
Faculty code given by C.O.E.	6118144
Faculty code given by A.I.C.T.E.	2297700293
Date of Birth	06-05-1976
Age	47
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 - BIO CHEMISTRY	1996	OTHERS - ANNAI SANDHYA COLLEGE	UNIVERSITY OF MADRAS	69	FIRST CLASS	
P.G.	M.SC.	OTHERS - BIO CHEMISTRY	1998	OTHERS - AVINASHILANGAM	OTHERS - AVINASHLINGAM UNIVERSITY	71	FIRST CLASS	
PH.D.	PH.D.	OTHERS - BIO CHEMISTRY	2011	OTHERS - UNIVERSITY OF MADRAS	UNIVERSITY OF MADRAS	90		
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - BIO CHEMISTRY	1999	OTHERS - UNIVERSITY OF MADRAS	UNIVERSITY OF MADRAS	69	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

CHEMO PREVENTIVE ACTIVITY OF D AIMONEN
AGAINST BENZOPYRENE INDUCED
EXPERIMENTAL LUNG CARCINOGENESIS IN
SWISS ALBINOMISE

III. Faculty in which Ph.D. was awarded

OTHERS

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	ASSOCIATE PROFESSOR	14-08-2014	22-05-2022	7	9	9
OTHERS - HINDUSTAN COLLEGE OF ARTS AND SCIENCE	ASSISTANT PROFESSOR	09-06-2010	28-03-2013	2	9	20
OTHERS - MGR COLLEGE OF ARTS AND SCIENCE	ASSISTANT PROFESSOR	07-07-2000	14-09-2009	9	2	8
Total				19	9	12

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)
10		5	200	

It is certified that all the information provided are true to the best of my knowledge.

Signature of the Faculty :



Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	DR. ANANDAN K
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	CHANDRAPURAM POST, PUDUPET VIA, TIRUPATTUR TALUK,
Line 2	VELLORE DISTRICT, 635651
District	VELLORE
Telephone number	-
Mobile number	+91 - 9843436068
Email	ANANDANDMEENA@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	APWPA2330L
Passport Number	
Aadhar Number	222176539683
Faculty code given by C.O.E.	6118098
Faculty code given by A.I.C.T.E.	2189239900
Date of Birth	02-05-1969
Age	53
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.E.	PRODUCTION ENGINEERING	1994	OTHERS - COLLEGE OF ENGINEERING OSMANABAD	OTHERS - DR BABA SAHEB AMBEDKAR MARATHWADA UNIVERSITY	59	SECOND CLASS	
P.G.	M.E.	ENGINEERING DESIGN	2008	SONA COLLEGE OF TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	6.8	FIRST CLASS	
PH.D.	PH.D.	MECHANICAL ENGINEERING	2020	OTHERS - ANNA UNIVERSITY	ANNA UNIVERSITY	YES		

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

OPTIMIZATION OF MAGNETO RHEOLOGICAL FLUID ASSISTED CYLINDRICAL SURFACE FINISHING PARAMETERS FOR MACHINING AISI 304L AUSTENITIC STAINLESS STEEL

III. Faculty in which Ph.D. was awarded

FACULTY OF MECHANICAL ENGINEERING

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
OTHERS - TIRUPATTUR POLYTECHNIC COLLEGE	OTHERS - LECTURER	22-09-1997	18-08-2005	7	10	27
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSOCIATE PROFESSOR	06-05-2013	23-05-2022	9	0	18
ER PERUMAL MANIMEKALAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	02-06-2008	29-04-2013	4	10	28
Total				21	10	18

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)
6	1	6	300	

It is certified that all the information provided are true to the best of my knowledge.



Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the Degree & Course	B.E.-ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the faculty member	DR. GOKULAKRISHNAN B
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	3/599C, RAJALAKSHMI NAGAR, NELLI NAGAR, NEAR RS
Line 2	DHARMAPURI, 636701
District	DHARMAPURI
Telephone number	-
Mobile number	+91 - 9894558378
Email	GEEKBEE1@GMAIL.COM
Gender	MALE
Community	MBC
PAN Number	ARYPG5719P
Passport Number	
Aadhar Number	656644179826
Faculty code given by C.O.E.	6110121
Faculty code given by A.I.C.T.E.	13596838273
Date of Birth	01-06-1976
Age	47
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.E.	ELECTRICAL AND ELECTRONICS ENGINEERING	1998	SAPTHAGIRI COLLEGE OF ENGINEERING	UNIVERSITY OF MADRAS	61.61	FIRST CLASS	
P.G.	M.E.	POWER SYSTEMS ENGINEERING	2006	SONA COLLEGE OF TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	76	FIRST CLASS	
PH.D.	PH.D.	POWER SYSTEMS ENGINEERING	2019	OTHERS - ANNA UNIVERSITY	ANNA UNIVERSITY	Y		

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

AN IMPROVED POWER QUALITY SOLUTIONS USING DSTATCOM COMPENSATION TECHNOLOGIES WITH FUZZY CONTROL BASED SOGI CONTROLLER

III. Faculty in which Ph.D. was awarded

FACULTY OF ELECTRICAL ENGINEERING

**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
SAPTHAGIRI COLLEGE OF ENGINEERING	OTHERS - LECTURER	13-08-1998	12-08-2004	5	11	31
MAHENDRA ENGINEERING COLLEGE (AUTONOMOUS)	OTHERS - LECTURER	09-01-2006	03-11-2006	0	9	26
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSOCIATE PROFESSOR	05-07-2017	03-02-2023	5	6	30
JAYAM COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSOCIATE PROFESSOR	03-01-2007	04-07-2017	10	6	2
Total				22	10	5

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)
		4	200	

It is certified that all the information provided are true to the best of my knowledge.

Signature of the Faculty :



Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	M.E.-STRUCTURAL ENGINEERING
Name of the faculty member	DR. KARTHIKEYAN P
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	436 VIJAYAN NAGAR KUMARASAMPET
Line 2	DHARMAPURI 636701
District	DHARMAPURI
Telephone number	-
Mobile number	+91 - 9443209846
Email	KARTHI.PROFSKP@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BOYPK5651Q
Passport Number	
Aadhar Number	891849917556
Faculty code given by C.O.E.	5123089
Faculty code given by A.I.C.T.E.	12902421624
Date of Birth	18-04-1969
Age	54
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.E.	CIVIL ENGINEERING	1990	OTHERS - VELLORE ENGG COLLEGE	OTHERS - MADRAS UNIVERSITY	60.23	SECOND CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2005	OTHERS - SATHIYABAMA DEEMED UNIVERSITY	OTHERS - SATHIYABAMA DEEMED UNIVERSITY	76	FIRST CLASS	
PH.D.	PH.D.	CIVIL ENGINEERING	2013	OTHERS - CMJ UNIVERSITY	OTHERS - CMJ UNIVERSITY	AWARDED		

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

DEVELOPMENT OF ARTIFICIAL NEURAL NETWORKS FOR ESTIMATING THE STRENGTH OF IN FRAME FIELD

III. Faculty in which Ph.D. was awarded

FACULTY OF CIVIL ENGINEERING

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
PRIYADARSHINI ENGINEERING COLLEGE	ASSISTANT PROFESSOR	25-10-2010	24-05-2013	2	6	31
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	PROFESSOR	10-02-2016	23-03-2023	7	1	14
S K P INSTITUTE OF TECHNOLOGY	PROFESSOR	04-07-2013	31-10-2015	2	3	28
OTHERS - PANDIAN POLYTECHNIC	OTHERS - LECTURER HOD	01-07-1991	13-07-2009	18	0	13
Total				30	0	26

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
RURAL DEVELOPEMENT	ASST ENGINEER	PLANNING	14-07-2009	19-07-2010	1	0	6
Total					1	0	6


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) 4	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 :



Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	COMPUTER SCIENCE AND ENGINEERING
Name of the Degree & Course	M.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	DR. CHANDRA SEKARAN S
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	# 3/303 A, CHINNATHAI ILLAM, GOVINDADASS NAGAR, MANTHOPPU
Line 2	DHARMAPURI, 636701
District	DHARMAPURI
Telephone number	-
Mobile number	+91 - 9443057461
Email	CHANDRUDPI@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	ANIPC7044B
Passport Number	
Aadhar Number	226857713848
Faculty code given by C.O.E.	6118090
Faculty code given by A.I.C.T.E.	12188331903
Date of Birth	11-07-1976
Age	46
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.E.	ELECTRICAL AND ELECTRONICS ENGINEERING	2000	SRI RAMAKRISHNA ENGINEERING COLLEGE (AUTONOMOUS)	BHARATHIYAR UNIVERSITY	55	SECOND CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2008	JAYAM COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	77	FIRST CLASS	
PH.D.	PH.D.	COMPUTER SCIENCE AND ENGINEERING	2018	OTHERS - ANNA UNIVERSITY	ANNA UNIVERSITY	Y		

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

QOS BASED NETWORK SELECTION SCHEME FOR WLAN WIMAX INTEGRATED NETWORKS WITH VELOCITY AND SAR CONSIDERATION

III. Faculty in which Ph.D. was awarded

FACULTY OF INFORMATION AND COMMUNICATION ENGINEERING

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	ASSOCIATE PROFESSOR	17-06-2013	22-05-2022	8	11	6
SAPTHAGIRI COLLEGE OF ENGINEERING	OTHERS - LECTURER	04-06-2001	04-04-2006	4	10	1
JAYAM COLLEGE OF ENGINEERING AND TECHNOLOGY	OTHERS - LECTURER	02-05-2008	30-05-2009	1	0	29
JAYAM COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSOCIATE PROFESSOR	01-08-2012	06-05-2013	0	9	6
JAYAM COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	01-06-2009	30-07-2012	3	1	29
Total				18	9	16

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) 3	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 :



Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	DR. SENTHIL KUMAR MP
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	225 GANDHI NAGAR , 5TH CROSS DHARMAPURI
Line 2	DHARMAPURI - 636701
District	DHARMAPURI
Telephone number	-
Mobile number	+91 - 9786102040
Email	S_KUMARMP@YAHOO.CO.IN
Gender	MALE
Community	MBC
PAN Number	BQKPS8154A
Passport Number	
Aadhar Number	810563375010
Faculty code given by C.O.E.	6118049
Faculty code given by A.I.C.T.E.	1402302790
Date of Birth	10-03-1974
Age	48
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.E.	MECHANICAL ENGINEERING	1996	MOHAMED SATHAK ENGINEERING COLLEGE	MADURAI KAMARAJ UNIVERSITY	64.4	FIRST CLASS	
P.G.	M.E.	ENGINEERING DESIGN	2006	SONA COLLEGE OF TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	77	FIRST CLASS	
PH.D.	PH.D.	MECHANICAL ENGINEERING	2018	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	Y		

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

EXPERIMENTAL STUDY AND OPTIMIZATION FOR OPTIMAL SETTING OF MACHINING PARAMETERS FOR TURNING OF AL HMMC

III. Faculty in which Ph.D. was awarded

FACULTY OF MECHANICAL ENGINEERING

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
JAYAM COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	19-06-2006	30-06-2012	6	0	12
OTHERS - PEE GEE POLYTECHNIC	OTHERS - LECTURER	19-06-2000	30-05-2001	0	11	11
SAPTHAGIRI COLLEGE OF ENGINEERING	OTHERS - LECTURER	07-06-2001	20-08-2004	3	2	14
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSOCIATE PROFESSOR	02-07-2012	23-05-2022	9	10	22
Total				20	0	0

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
RANE LUK CLUTCH	APPRENTICESHIP	PRODUCTION	03-05-1999	02-05-2000	0	11	31
GSM ENGINEERING WORKS	SUPERVISOR	PRODUCTION	01-09-1996	31-03-1999	2	6	30
Total					3	6	3

VI. C.O.E. Appointment Experience :


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


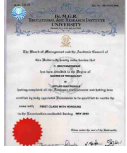

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
9	1	6	200	

It is certified that all the information provided are true to the best of my knowledge.



Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the Degree & Course	B.E.-ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the faculty member	DR. BHUVANESWARI C
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	THANEERPANDHAL,UDAYAMUTHUR POST.
Line 2	TIRUPATTUR-DIST,PIN-635652
District	VELLORE
Telephone number	-
Mobile number	+91 - 9486393225
Email	BHUVANA1MANOHARSHA@GMAIL.COM
Gender	FEMALE
Community	MBC
PAN Number	BKIPB3130R
Passport Number	
Aadhar Number	244817691055
Faculty code given by C.O.E.	5119003
Faculty code given by A.I.C.T.E.	19314029941
Date of Birth	25-02-1978
Age	45
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.E.	ELECTRICAL AND ELECTRONICS ENGINEERING	1999	ADHIYAMAN COLLEGE OF ENGINEERING (AUTONOMOUS)	UNIVERSITY OF MADRAS	61.16	FIRST CLASS	
P.G.	M.TECH.	OTHERS - APPLIED ELECTRONICS	2009	OTHERS - DR MGR EDUCATIONAL AND RESEARCH INSTITUTE UNIVERSITY	OTHERS - DR MGR EDUCATIONAL RESEARCH INSTITUTE UNIVERSITY	9.06	DISTINCTION	
PH.D.	PH.D.	ELECTRICAL AND ELECTRONICS ENGINEERING	2020	OTHERS - ANNA UNIVERSITY	ANNA UNIVERSITY	YES		

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

INVESTIGATIONS ON ELECTRICAL INSULATION PARAMETERS OF PALM BASED DIELECTRIC MATERIALS FOR OPTIMIZED TRANSFORMER APPLICATIONS

III. Faculty in which Ph.D. was awarded

FACULTY OF ELECTRICAL ENGINEERING

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	PROFESSOR	28-07-2021	03-02-2023	1	6	7
BHARATHIDASAN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	24-08-2020	09-02-2021	0	5	17
PRIYADARSHINI ENGINEERING COLLEGE	OTHERS - LECTURER	18-07-2005	31-07-2007	2	0	14
PRIYADARSHINI ENGINEERING COLLEGE	OTHERS - LECTURER	01-06-2009	31-01-2011	1	7	30
PRIYADARSHINI ENGINEERING COLLEGE	ASSISTANT PROFESSOR	01-02-2011	10-12-2019	8	10	10
Total				14	6	22

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)
7		4	150	

It is certified that all the information provided are true to the best of my knowledge.

Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECH.-INFORMATION TECHNOLOGY
Name of the faculty member	DR. SRINIVASAN M
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	KOTTAVOUR VILLAGE, MALLAPALLI POST, PATCHUR VIA, NATRAMPALLI TK, VELLORE DT, TAMILNADU
Line 2	VELLORE - 635854
District	VELLORE
Telephone number	-
Mobile number	+91 - 9943760179
Email	SRINIVASANPSVIT@GMAIL.COM
Gender	MALE
Community	MBC
PAN Number	BXIPS2681B
Passport Number	
Aadhar Number	915174706482
Faculty code given by C.O.E.	5119037
Faculty code given by A.I.C.T.E.	1450897200
Date of Birth	02-06-1982
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.TECH.	INFORMATION TECHNOLOGY	2005	VEL TECH	ANNA UNIVERSITY	67	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2011	S K P ENGINEERING COLLEGE	ANNA UNIVERSITY	74	FIRST CLASS	
PH.D.	PH.D.	COMPUTER SCIENCE AND ENGINEERING	2021	VEL TECH	OTHERS - VEL TECH	AWARDED		

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

AN INTELLIGENT AND DYNAMIC RIDE SHARING SERVICE MINIMIZING ECONOMIC AND ENVIRONMENTAL IMPACTS FOR URBAN TRANSPORTATION SCENARIO

III. Faculty in which Ph.D. was awarded

FACULTY OF INFORMATION AND COMMUNICATION ENGINEERING

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
PRIYADARSHINI ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	12-02-2007	25-05-2018	11	3	14
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSOCIATE PROFESSOR	02-07-2018	22-05-2022	3	10	21
Total				15	2	6

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
ALMECH ENGINEERING PVT LIMITED	O AND M STAFF PART TIME	SUPERVISOR	02-06-2004	02-06-2006	2	0	1
Total					2	0	1


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)
		7	750	

It is certified that all the information provided are true to the best of my knowledge.

Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. SURESH N
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	18 A, DHARMARAJA KOIL STREET
Line 2	TIRUPATTUR
District	VELLORE
Telephone number	-
Mobile number	+91 - 9751790097
Email	TDNSURESH@GMAIL.COM
Gender	MALE
Community	MBC
PAN Number	CGXPS4329D
Passport Number	
Aadhar Number	977698953971
Faculty code given by C.O.E.	6118101
Faculty code given by A.I.C.T.E.	2190868633
Date of Birth	09-07-1972
Age	50
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.E.	MECHANICAL ENGINEERING	1998	OTHERS - GOLDEN VALLEY INSTITUTE OF ENGINEERING	OTHERS - BANGALORE UNIVERSITY	56	SECOND CLASS	
P.G.	M.E.	ENGINEERING DESIGN	2007	KONGU ENGINEERING COLLEGE (AUTONOMOUS)	ANNA UNIVERSITY	65	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
OTHERS - PRIYADARSHINI POLYTECHNIC COLLEGE	OTHERS - LECTURER	20-06-2001	20-07-2005	4	1	1
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	19-06-2013	23-05-2022	8	11	5
SRI NANDHANAM COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	01-08-2007	18-06-2013	5	10	18
Total				18	10	0

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
ETHIRAJ INDUSTRIES	SUPERVISOR	PRODUCTION	04-12-1998	04-06-2001	2	6	1
Total					2	6	3

VI. C.O.E. Appointment Experience :


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


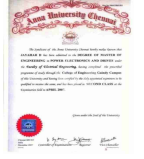
AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
8		3	200	

It is certified that all the information provided are true to the best of my knowledge.



Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the Degree & Course	B.E.-ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the faculty member	MR. JAYAHAR D
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	571 LIG2, 47TH STREET AVADI
Line 2	TIRUVALLUR - 600054
District	TIRUVALLUR
Telephone number	-
Mobile number	+91 - 8778116223
Email	JAYAHAR2003@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	AKSPJ1088R
Passport Number	
Aadhar Number	559551349378
Faculty code given by C.O.E.	6118284
Faculty code given by A.I.C.T.E.	19312505071
Date of Birth	25-07-1973
Age	50
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.E.	ELECTRICAL AND ELECTRONICS ENGINEERING	1995	P S G COLLEGE OF TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	61.8	FIRST CLASS	
P.G.	M.E.	POWER ELECTRONICS AND DRIVES	2007	COLLEGE OF ENGINEERING GUINDY	ANNA UNIVERSITY	6.38	SECOND 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
OTHERS - ACE ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	28-09-2015	18-07-2019	3	9	21
SRI RAM ENGINEERING COLLEGE	ASSISTANT PROFESSOR	21-05-2009	30-04-2011	1	11	11
JOHN BOSCO ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	18-06-2014	31-03-2015	0	9	13
JAYAM COLLEGE OF ENGINEERING AND TECHNOLOGY	OTHERS - LECTURER	14-10-1999	29-06-2001	1	8	16
SRI RAM ENGINEERING COLLEGE	OTHERS - SENIOR LECTURER	12-09-2001	30-06-2007	5	9	19
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSOCIATE PROFESSOR	10-02-2020	03-02-2023	2	11	23
CHENNAI INSTITUTE OF TECHNOLOGY (AUTONOMOUS)	ASSOCIATE PROFESSOR	06-06-2012	19-06-2013	1	0	14
MAGNA COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	06-06-2011	17-05-2012	0	11	12
SAPTHAGIRI COLLEGE OF ENGINEERING	OTHERS - LECTURER	05-06-1995	11-10-1999	4	4	7
PMR ENGINEERING COLLEGE	ASSISTANT PROFESSOR	02-07-2007	20-05-2009	1	10	19
Total				25	3	11

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)
		5	200	

It is certified that all the information provided are true to the best of my knowledge.

A handwritten signature in black ink, consisting of a stylized 'M' followed by a horizontal line that extends to the right and then curves downwards.

Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
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. RAMYA J
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	462/1, DURAI NAGAR, PHASE II
Line 2	TIRUPATTUR-635601
District	VELLORE
Telephone number	-
Mobile number	+91 - 9940855859
Email	ENI.PRAMYA@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	APLPR2052R
Passport Number	
Aadhar Number	938814883422
Faculty code given by C.O.E.	6118095
Faculty code given by A.I.C.T.E.	12188787044
Date of Birth	14-07-1980
Age	42
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	2001	OTHERS - MKJC	UNIVERSITY OF MADRAS	56	SECOND CLASS	
P.G.	M.B.A.	OTHERS - MARKETING AND HR	2003	PRIYADARSHINI ENGINEERING COLLEGE	UNIVERSITY OF MADRAS	62	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
SRI NANDHANAM COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	14-07-2003	28-07-2013	10	0	15
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	12-08-2013	04-05-2016	2	8	24
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSOCIATE PROFESSOR	05-05-2016	22-05-2022	6	0	18
Total				18	9	1

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**

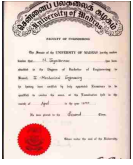
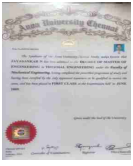
AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
7		3		

It is certified that all the information provided are true to the best of my knowledge.

Signature of the Faculty :



Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. JAYASANKAR N
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	2/302 VEERAPANDIAN ST
Line 2	KEDAR POST - 605 402
District	VILLUPURAM
Telephone number	-
Mobile number	+91 - 9444660414
Email	PKNNJAYASANKAR@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	APYPJ6913L
Passport Number	
Aadhar Number	889149819044
Faculty code given by C.O.E.	5117088
Faculty code given by A.I.C.T.E.	13547151065
Date of Birth	09-10-1967
Age	55
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.E.	MECHANICAL ENGINEERING	1990	GOVERNMENT COLLEGE OF ENGINEERING SALEM (AUTONOMOUS)	UNIVERSITY OF MADRAS	57.64	SECOND CLASS	
P.G.	M.E.	THERMAL ENGINEERING	2009	ADHIPARASAKTHI ENGINEERING COLLEGE	ANNA UNIVERSITY	79	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	ASSOCIATE PROFESSOR	12-07-2017	23-05-2022	4	10	12
PALLAVAN COLLEGE OF ENGINEERING	ASSOCIATE PROFESSOR	03-09-1998	07-07-2017	18	10	5
Total				23	8	22

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)
10	5			

It is certified that all the information provided are true to the best of my knowledge.



Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. SARAVANAN D
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	98/1 TKS NAGAR, PALLIKONDA
Line 2	VELLORE - 635 809
District	VELLORE
Telephone number	-
Mobile number	+91 - 9585022329
Email	SARAVA329@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BMOPS2580N
Passport Number	
Aadhar Number	410892529832
Faculty code given by C.O.E.	5113065
Faculty code given by A.I.C.T.E.	13550610234
Date of Birth	25-05-1976
Age	46
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.E.	MECHANICAL ENGINEERING	1998	THANTHA I PERIYAR GOVERNMENT INSTITUTE OF TECHNOLOGY	ANNA UNIVERSITY	64	FIRST CLASS	
P.G.	M.E.	MANUFACTURING ENGINEERING	2004	MADRAS INSTITUTE OF TECHNOLOGY CHROMPET	ANNA UNIVERSITY	7.7	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

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
C ABDUL HAKEEM COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	17-06-2004	06-06-2009	4	11	20
GLOBAL INSTITUTE OF ENGINEERING AND TECHNOLOGY	ASSOCIATE PROFESSOR	16-11-2016	02-05-2017	0	5	17
KINGSTON ENGINEERING COLLEGE	ASSISTANT PROFESSOR	15-06-2009	12-11-2016	7	4	28
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSOCIATE PROFESSOR	03-07-2017	23-05-2022	4	10	21
C ABDUL HAKEEM COLLEGE OF ENGINEERING AND TECHNOLOGY	OTHERS - LECTURER	01-07-2000	30-05-2002	1	10	30
Total				19	7	1

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)
4	1	4	200	

It is certified that all the information provided are true to the best of my knowledge.

Signature of the Faculty : 

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.E.-CIVIL ENGINEERING
Name of the faculty member	MR. YUVARAJASEKARAN R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	44,45 VALLUVAR NAGAR,
Line 2	HOSUR,635109
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 9677899310
Email	YUVARAJSKR@YAHOO.COM
Gender	MALE
Community	BC
PAN Number	ADJPY3410C
Passport Number	
Aadhar Number	991039782523
Faculty code given by C.O.E.	6118275
Faculty code given by A.I.C.T.E.	111309007112
Date of Birth	19-06-1973
Age	50
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.TECH.	OTHERS - CIVIL ENGINEERING	1998	OTHERS - G PULLA REDDY ENGINEERING COLLEGE	OTHERS - SRI KRISHNA DEVARAYA UNIVERSITY	42	OTHERS - THIRD CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	1999	OTHERS - SRM ENGINEERING COLLEGE	OTHERS - MADRAS UNIVERSITY	62	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
T J S ENGINEERING COLLEGE	ASSISTANT PROFESSOR	21-06-2013	29-04-2015	1	10	9
VELAMMAL ENGINEERING COLLEGE (AUTONOMOUS)	ASSISTANT PROFESSOR	16-06-2010	02-12-2011	1	5	17
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSOCIATE PROFESSOR	14-06-2019	29-03-2023	3	9	16
ADHIYAMAAN COLLEGE OF ENGINEERING (AUTONOMOUS)	ASSISTANT PROFESSOR	08-06-2015	29-10-2018	3	4	22
ADHIYAMAAN COLLEGE OF ENGINEERING (AUTONOMOUS)	ASSISTANT PROFESSOR	07-12-2011	06-04-2013	1	3	31
Total				11	10	10

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

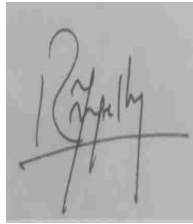
VI. C.O.E. Appointment Experience :


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 :



Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.E.-ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the faculty member	MR. SHANMUGAM S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	3/599,C.RAJALAKSHMI,NALLI NAGAR
Line 2	DHARMAPURI-636701
District	DHARMAPURI
Telephone number	-
Mobile number	+91 - 9443910666
Email	SSHANMUGAM95@REDIFFMAIL.COM
Gender	MALE
Community	SC
PAN Number	BURPS2037M
Passport Number	
Aadhar Number	284540277807
Faculty code given by C.O.E.	6118076
Faculty code given by A.I.C.T.E.	2185637423
Date of Birth	10-03-1973
Age	49
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.E.	OTHERS - ELECTRONICS	1996	OTHERS - NIT SURAT	OTHERS - SOUTH GUJARAT UNIVERSITY	53	SECOND CLASS	
P.G.	M.E.	APPLIED ELECTRONICS	2007	P S G COLLEGE OF TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	8.05	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	ASSOCIATE PROFESSOR	19-06-2013	23-05-2022	8	11	5
ER PERUMAL MANIMEKALAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	05-07-2010	03-05-2012	1	9	30
SAPTHAGIRI COLLEGE OF ENGINEERING	OTHERS - LECTURER	05-05-1997	31-05-2005	8	0	27
PAAVAI ENGINEERING COLLEGE (AUTONOMOUS)	ASSISTANT PROFESSOR	04-07-2007	15-05-2010	2	10	12
M N S K COLLEGE OF ENGINEERING	ASSOCIATE PROFESSOR	04-06-2012	31-05-2013	0	11	27
Total				22	8	16

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)
		3	400	

It is certified that all the information provided are true to the best of my knowledge.



Signature of the Faculty :


Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-CHEMISTRY
Name of the faculty member	DR. ANGELINE MARY A P
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	21/4 SOUTH MUTHAPPER STREET
Line 2	TIRUPATTUR - 635601
District	TIRUPATHUR
Telephone number	-
Mobile number	+91 - 7299034577
Email	ANJUBRITSELVA@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BLAPA1118F
Passport Number	
Aadhar Number	802937953849
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	15-07-1986
Age	37
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 - CHEMISTRY	2006	OTHERS - AUXILIUM COLLEGE	THIRUVALLUVAR UNIVERSITY	59	SECOND CLASS	
P.G.	M.SC.	OTHERS - CHEMISTRY	2008	OTHERS - SACRED HEART COLLEGE	THIRUVALLUVAR UNIVERSITY	67	FIRST CLASS	
PH.D.	OTHERS - CHEMISTRY	OTHERS - CHEMISTRY	2022	OTHERS - PERIYAR UNIVERSITY	PERIYAR UNIVERSITY	AWARDED		
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - CHEMISTRY	2014	OTHERS - PRIST COLLEGE	OTHERS - PRIST UNIVERSITY	73	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- SLET

Score : 182

File : 

II. Title of Ph.D. Thesis

ORGANIC STABILIZER MEDIATED SYNTHESIS OF NANOPARTICLES AND THEIR BIOLOGICAL ACTIVITY

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	06-07-2022	14-02-2023	0	7	9
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	01-06-2009	31-08-2018	9	2	30
Total				9	10	13

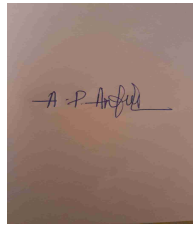
V. Industrial Experience :


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)
----------------------	-------------------------------	---	---	--

It is certified that all the information provided are true to the best of my knowledge.

Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	COMPUTER SCIENCE AND ENGINEERING
Name of the Degree & Course	B.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MR. SAKTHIVEL B
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	THIPPIREDHALLI, POST, BOMMIDI VIA
Line 2	DHARMAPURI, 635301
District	DHARMAPURI
Telephone number	-
Mobile number	+91 - 9787447671
Email	SAKTHI_MNNIT@YAHOO.CO.IN
Gender	MALE
Community	ST
PAN Number	CQJPS2388E
Passport Number	
Aadhar Number	589014151167
Faculty code given by C.O.E.	6118067
Faculty code given by A.I.C.T.E.	1462028007
Date of Birth	02-09-1981
Age	41
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.TECH.	OTHERS - COMPUTER SCIENCE AND ENGINEERING	2003	OTHERS - MNNIT ALLAHABAD	OTHERS - MNNIT	62	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2008	OTHERS - VINAYAKA MISSION UNIVERSITY	OTHERS - VINAYAKA MISSION UNIVERSITY	77	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
JAYAM COLLEGE OF ENGINEERING AND TECHNOLOGY	OTHERS - LECTURER	19-06-2006	31-10-2009	3	4	12
SAPTHAGIRI COLLEGE OF ENGINEERING	OTHERS - LECTURER	04-06-2004	12-06-2006	2	0	9
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSOCIATE PROFESSOR	02-06-2010	22-05-2022	11	11	21
JAYAM COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	01-11-2009	31-05-2010	0	6	30
Total				17	11	17

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
SENSES TECHNOLOGIES	SOFTWARE ENGINEER	PROGRAMMER	02-06-2003	03-06-2004	1	0	2
Total					1	0	2

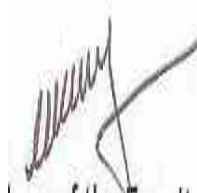
VI. C.O.E. Appointment Experience :


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)
5		5	150	

It is certified that all the information provided are true to the best of my knowledge.

Signature of the Faculty :



Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.E.-ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the faculty member	MR. NARASIMMAN C
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	2/212, BANDARAPALLI, BILLANAKUPPAM,
Line 2	KRISHNAGIRI - 635115
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 9626138258
Email	SIMMAN_HOSUR@YAHOO.CO.IN
Gender	MALE
Community	BC
PAN Number	AFRPN8920N
Passport Number	
Aadhar Number	379120678727
Faculty code given by C.O.E.	5105020
Faculty code given by A.I.C.T.E.	17391896625
Date of Birth	10-06-1958
Age	64
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.	OTHERS - AMIE	OTHERS - ELECTRICAL ENGINEERING	1991	OTHERS - INSTITUTE OF ENGINEERS	OTHERS - INSTITUTE OF ENGINEERS	55	OTHERS - NO CLASS	
P.G.	M.TECH.	OTHERS - APPLIED ELECTRONICS	2005	OTHERS - BHARATH UNIVERSITY	OTHERS - BHARATH UNIVERSITY	6.98	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
BHARATHIDASAN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	20-12-2006	15-05-2018	11	4	27
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	16-08-2019	23-05-2022	2	9	8
SRI LAKSHMI AMMAL ENGINEERING COLLEGE	ASSISTANT PROFESSOR	08-12-2002	25-05-2003	0	5	18
SAPTHAGIRI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	03-02-2002	06-12-2002	0	10	4
PRIYADARSHINI ENGINEERING COLLEGE	ASSISTANT PROFESSOR	01-06-2005	01-12-2006	1	6	1
Total				17	0	0

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
INDIAN AIR FORCE	AIR MAN SERGANT	SERVISING OF AIR CRAFT ELECTRICAL AND INSTRUMENTATION SYSTEMS	20-05-1977	31-05-1992	15	0	12
UNITED TECHNOTRONICS	MANAGER	DISIGN AND MANUFATURING OF UPS INVERTERS AND TOOL ROOM ORIANATED JOBS	02-01-1994	02-02-2000	6	1	1
Total					21	1	13

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.

Signature of the Faculty :



Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.E.-ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the faculty member	MRS. TAMILARASI C
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	35/14,MOHAN RAO COLONY,
Line 2	KRISHNAGIRI-635001
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 9965810701
Email	TAMILSARAN333@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	AJIPT8586C
Passport Number	
Aadhar Number	322873709270
Faculty code given by C.O.E.	6118009
Faculty code given by A.I.C.T.E.	1404782389
Date of Birth	30-05-1970
Age	52
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.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	1991	THANTHA I PERIYAR GOVERNMENT INSTITUTE OF TECHNOLOGY	UNIVERSITY OF MADRAS	60.58	SECOND CLASS	
P.G.	M.E.	COMMUNICATION SYSTEMS	2010	MAHENDRA ENGINEERING COLLEGE (AUTONOMOUS)	ANNA UNIVERSITY	8.71	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	28-05-2012	31-12-2012	0	7	4
ER PERUMAL MANIMEKALAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	10-06-2005	26-08-2008	3	2	17
OTHERS - PANDIYAN POLYTECHNIC	OTHERS - LECTURER	10-06-1992	01-07-1995	3	0	22
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSOCIATE PROFESSOR	02-01-2013	23-05-2022	9	4	22
OTHERS - PEE GEE POLYTECHNIC	OTHERS - LECTURER	01-08-1995	01-06-2005	9	10	1
ER PERUMAL MANIMEKALAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	01-06-2010	30-04-2012	1	10	30
Total				28	0	7

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)
		3		

It is certified that all the information provided are true to the best of my knowledge.


Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	COMPUTER SCIENCE AND ENGINEERING
Name of the Degree & Course	B.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MRS. DEEPA G
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	BRG MADEPALLI POST,BARGUR
Line 2	BARGUR 635104
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 9976109749
Email	GEEEPA4006@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	CGEPD8981R
Passport Number	
Aadhar Number	537244904299
Faculty code given by C.O.E.	6118214
Faculty code given by A.I.C.T.E.	17673514171
Date of Birth	04-12-1988
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.E.	COMPUTER SCIENCE AND ENGINEERING	2010	ER PERUMAL MANIMEKALAI COLLEGE OF ENGINEERING	ANNA UNIVERSITY	79	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2013	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	8.42	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	16-08-2017	22-05-2022	4	9	7
SAPTHAGIRI COLLEGE OF ENGINEERING	OTHERS - LECTURER	12-07-2010	30-06-2011	0	11	20
Total				5	8	2

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 :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.E.-CIVIL ENGINEERING
Name of the faculty member	MRS. RANI M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3/580,RATHNA ILLAM,RAYAPPA NAGAR LAYOUT
Line 2	KRISHNAGIRI-635001
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 8903977840
Email	RANIMADHU12345@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	AUCPR7559P
Passport Number	
Aadhar Number	775751468271
Faculty code given by C.O.E.	6118221
Faculty code given by A.I.C.T.E.	13245068715
Date of Birth	15-06-1976
Age	47
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.E.	CIVIL ENGINEERING	2014	ADHIYAM AAN COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	8.6	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2016	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.4	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	11-08-2016	11-02-2023	6	6	1
Total				6	6	4

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.

A handwritten signature in blue ink that reads "M. Ranj". The signature is written in a cursive style with a large initial 'M' and a trailing flourish.

Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECH.-INFORMATION TECHNOLOGY
Name of the faculty member	MR. NIZAM AHAMED S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3/205,GANDHI NAGAR, KATTIGANAPALLI
Line 2	KRISHNAGIRI 635001
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 9894689366
Email	MAIL2NIZZU@GMAIL.COM
Gender	MALE
Community	OTHERS - BCM
PAN Number	APWPN0143A
Passport Number	
Aadhar Number	710141501734
Faculty code given by C.O.E.	6118230
Faculty code given by A.I.C.T.E.	17674465174
Date of Birth	14-07-1987
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.E.	COMPUTER SCIENCE AND ENGINEERING	2011	C ABDUL HAKEEM COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	67	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2015	JAYALAKSHMI INSTITUTE OF TECHNOLOGY	ANNA UNIVERSITY	7.0	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	01-07-2015	22-05-2022	6	10	22
Total				6	10	27

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.

A handwritten signature in black ink, appearing to be 'S. N. A.', is written over a light gray rectangular background.

Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-PHYSICS
Name of the faculty member	MRS. SAKTHI L
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	4/120 ORAPPAM, BARGUR
Line 2	KRISHNAGIRI - 635108
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 8248237676
Email	SARATHISAKTHI91@GMAIL.COM
Gender	FEMALE
Community	MBC
PAN Number	BLHPL9867R
Passport Number	
Aadhar Number	400002318466
Faculty code given by C.O.E.	6118298
Faculty code given by A.I.C.T.E.	110789003471
Date of Birth	14-04-1987
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.SC.	OTHERS - PHYSICS	2008	OTHERS - GOV ARTS AND SCINCE COLLEGE KRISHNA GIRI	PERIYAR UNIVERSITY	64	FIRST CLASS	
P.G.	M.SC.	OTHERS - PHYSICS	2011	OTHERS - SRI VIDYAMANDIR ARTS AND SCIENCE COLLEGE	PERIYAR UNIVERSITY	74.41	FIRST CLASS	
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - PHYSICS	2017	OTHERS - SRI VIDYAMANDIR ARTS AND SCIENCE COLLEGE	PERIYAR UNIVERSITY	92	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	01-08-2018	22-05-2022	3	9	22
Total				3	9	26

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) 1	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 :**

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	BIO-MEDICAL
Name of the Degree & Course	B.E.-BIOMEDICAL ENGINEERING
Name of the faculty member	MRS. UMASAKTHI C
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	4/37,KITCHAPPAS STREET
Line 2	KRISHNAGIRI-635001
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 9944455884
Email	UMASAKTHISUBHA@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	ACWPU3957A
Passport Number	
Aadhar Number	750415394853
Faculty code given by C.O.E.	6118198
Faculty code given by A.I.C.T.E.	7651418810
Date of Birth	09-09-1989
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.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2013	JAYAM COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	8.31	FIRST CLASS	
P.G.	M.E.	EMBEDDED SYSTEM TECHNOLOGIES	2016	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.97	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	08-06-2016	23-05-2022	5	11	16
Total				5	11	21

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)

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. Umali", is centered within a light gray rectangular box.

Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-MATHEMATICS
Name of the faculty member	MR. KARTHICK R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3/29 MARICHETTI HALLI,
Line 2	KRISHNAGIRI
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 9655521631
Email	KARTHICK3655@GMAIL.COM
Gender	MALE
Community	MBC
PAN Number	FPCPK4532R
Passport Number	
Aadhar Number	334300124968
Faculty code given by C.O.E.	6118305
Faculty code given by A.I.C.T.E.	17460465788
Date of Birth	10-04-1992
Age	30
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 - MATHEMATICS	2012	OTHERS - ARIGNAR ANNA ARTS AND SCIENCE COLLEGE	PERIYAR UNIVERSITY	71.31	FIRST CLASS	
P.G.	M.SC.	OTHERS - MATHEMATICS	2015	OTHERS - GOVT ARIGNAR ANNA ARTS AND SCIENCE COLLEGE	PERIYAR UNIVERSITY	66.67	FIRST CLASS	
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - MATHEMATICS	2017	OTHERS - MUTHAYAMMAL ARTS AND SCIENCE COLLEGE	PERIYAR UNIVERSITY	80.16	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	24-11-2021	22-05-2022	0	5	29
OTHERS - CMS POLYTECHNIC COLLEGE	OTHERS - LECTURER	14-07-2017	10-04-2018	0	8	28
VARUVAN VADIVELAN INSTITUTE OF TECHNOLOGY	ASSISTANT PROFESSOR	02-07-2018	23-04-2019	0	9	22
Total				2	0	20

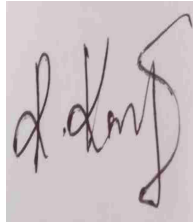
V. Industrial Experience :


Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days


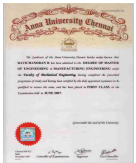
VI. C.O.E. Appointment Experience :**Capacity at which service is extended for the conduct of Exmination during the last year**

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 :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. RAVICHANDRAN R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	28/10, IYYAVOO NAGAR,
Line 2	PALLIKONDA, 635809
District	VELLORE
Telephone number	-
Mobile number	+91 - 9486420153
Email	RAVI.REVIVE@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	APEPR1112B
Passport Number	
Aadhar Number	655199410228
Faculty code given by C.O.E.	5106180
Faculty code given by A.I.C.T.E.	12192593183
Date of Birth	26-04-1975
Age	48
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.E.	MECHANICAL ENGINEERING	1998	COIMBATORE INSTITUTE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	BHARATHIYAR UNIVERSITY	67	FIRST CLASS	
P.G.	M.E.	MANUFACTURING ENGINEERING	2007	THANTHAI PERIYAR GOVERNMENT INSTITUTE OF TECHNOLOGY	ANNA UNIVERSITY	70	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
GANADIPATHY TULSI'S JAIN ENGINEERING COLLEGE	OTHERS - LECTURER	21-11-2000	31-07-2008	7	8	10
PRIYADARSHINI ENGINEERING COLLEGE	ASSISTANT PROFESSOR	17-06-2009	07-06-2013	3	11	21
C ABDUL HAKEEM COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	01-09-2021	11-06-2022	0	9	11
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	01-08-2022	18-02-2023	0	6	18
KINGSTON ENGINEERING COLLEGE	ASSISTANT PROFESSOR	01-08-2008	31-05-2009	0	9	31
C ABDUL HAKEEM COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	01-07-2013	27-02-2021	7	7	27
Total				21	6	3

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
CHELLIAH ENTERPREISE S VILLAPAKKAM CHENNAI	SUPERVISOR	QAQC OIL FIELD EQUIPMENT	10-09-1999	15-09-2000	1	0	6
Total					1	0	6

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)
		3	250	

It is certified that all the information provided are true to the best of my knowledge.



Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	M.E.-STRUCTURAL ENGINEERING
Name of the faculty member	MR. PACHIYAPPAN S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	23/9 KKALIYAPPAN GOUNDER STREET MADHIKONPALAYAM
Line 2	DHARMAPURI - 636701
District	DHARMAPURI
Telephone number	-
Mobile number	+91 - 8939708103
Email	SINVINCACHI@GMAIL.COM
Gender	MALE
Community	MBC
PAN Number	BEYPP6326R
Passport Number	
Aadhar Number	291896293764
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	19314654671
Date of Birth	19-04-1989
Age	32
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.E.	CIVIL ENGINEERING	2011	ADHIYAM AAN COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	7.2	FIRST CLASS	
P.G.	M.E.	CONSTRUCTION ENGINEERING AND MANAGEMENT	2017	AMBAL PROFESSIONAL GROUP OF INSTITUTIONS	ANNA UNIVERSITY	7.3	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	08-12-2020	25-01-2021	0	1	18
Total				0	1	18

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 :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.E.-ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the faculty member	MS. SIVASARANYA G
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	70/37 VINAYAGAR STREET NEWPET
Line 2	KRISHNAGIRI - 635001
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 9159598883
Email	SIVASARANYA2696@GMAIL.COM
Gender	FEMALE
Community	MBC
PAN Number	HLOPS3271K
Passport Number	
Aadhar Number	351373761097
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	19596684491
Date of Birth	26-09-1996
Age	26
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.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2017	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.82	FIRST CLASS	
P.G.	M.E.	EMBEDDED SYSTEM TECHNOLOGIES	2019	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.95	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	01-07-2020	23-05-2022	1	10	23
Total				1	10	28

V. Industrial Experience :

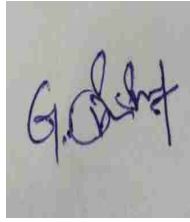
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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.

A handwritten signature in blue ink, appearing to be 'G. Oshay', is centered within a rectangular box.

Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
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	
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	ASWANTHEJINI214@GMAIL.COM
Gender	FEMALE
Community	MBC
PAN Number	CALPR0074G
Passport Number	
Aadhar Number	496999871876
Faculty code given by C.O.E.	6118285
Faculty code given by A.I.C.T.E.	13310459688
Date of Birth	05-10-1990
Age	33
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	PERIYAR UNIVERSITY	60	FIRST CLASS	
P.G.	OTHERS - M.A	OTHERS - ENGLISH	2015	OTHERS - ARIGNAR ANNA COLLEGE	PERIYAR UNIVERSITY	65	FIRST CLASS	
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - ENGLISH	2017	OTHERS - ARIGNAR ANNA COLLEGE	PERIYAR UNIVERSITY	68	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	01-08-2018	30-09-2020	2	1	31
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	01-02-2021	22-05-2022	1	3	22
Total				3	5	25

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**

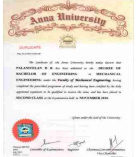

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of my knowledge.

Signature of the Faculty :



Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-GENERAL ENGINEERING
Name of the faculty member	MR. PALANIVELAN D R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	35/95, KAMARAJ NAGAR, TIRUPATTUR
Line 2	VELLORE
District	VELLORE
Telephone number	-
Mobile number	+91 - 9789381799
Email	RSPALANIVELAN@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	CEWPP1575F
Passport Number	
Aadhar Number	893509124489
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	4617949395
Date of Birth	10-02-1979
Age	44
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.E.	MECHANICAL ENGINEERING	2010	PRIYADARSHINI ENGINEERING COLLEGE	ANNA UNIVERSITY	68	SECOND CLASS	
P.G.	M.E.	COMPUTER AIDED DESIGN	2016	PODHIGAI COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.49	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	02-07-2018	23-05-2022	3	10	22
Total				3	10	27

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.

A handwritten signature in blue ink, appearing to be 'D.R. [unclear]', with a large, sweeping flourish extending downwards and to the right.

Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.E.-ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the faculty member	MR. VIJAY S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	395,MOTTUPATTI,MITTAHALI PO VILL KAVIRIPATTAM VILL KRISHNAGIRI
Line 2	KRISHNAGIRI 635112
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 9677653487
Email	VVSVIJAY1@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AWOPV4655J
Passport Number	
Aadhar Number	835084497593
Faculty code given by C.O.E.	6118265
Faculty code given by A.I.C.T.E.	13591528962
Date of Birth	16-07-1990
Age	32
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.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2012	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	80.06	FIRST CLASS	
P.G.	M.E.	COMMUNICATION SYSTEMS	2014	VARUVAN VADIVELAN INSTITUTE OF TECHNOLOGY	ANNA UNIVERSITY	79.4	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	03-07-2017	23-05-2022	4	10	21
Total				4	10	26

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.

A handwritten signature in blue ink, appearing to be 'S. Khan', written in a cursive style.

Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	M.E.-EMBEDDED SYSTEM TECHNOLOGIES
Name of the faculty member	MRS. SASIKALA M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	441/TNHB PHASE II ,TIRUPATHUR TK
Line 2	635601
District	VELLORE
Telephone number	-
Mobile number	+91 - 9786081307
Email	SASIKALAME1983@GMAIL.COM
Gender	FEMALE
Community	MBC
PAN Number	EADPS7445L
Passport Number	NIL
Aadhar Number	414381154948
Faculty code given by C.O.E.	6118053
Faculty code given by A.I.C.T.E.	4616313440
Date of Birth	11-05-1983
Age	39
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.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2007	SRI NANDHANAM COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	69	SECOND CLASS	
P.G.	M.E.	APPLIED ELECTRONICS	2010	THIRUVALUVAR COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	74	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
PODHIGAI COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	20-08-2010	23-05-2018	7	9	4
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	02-07-2018	23-05-2022	3	10	22
Total				11	7	0

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)
		2	200	

It is certified that all the information provided are true to the best of my knowledge.



Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECH.-INFORMATION TECHNOLOGY
Name of the faculty member	MRS. KEERTHI N
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	AGRAHARAMVILL,NATTARAMPALLI T.K
Line 2	635651
District	VELLORE
Telephone number	-
Mobile number	+91 - 9597527502
Email	KEETHINAVEEN502@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	KMRPS5177R
Passport Number	
Aadhar Number	916167025952
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	14630395243
Date of Birth	14-10-1994
Age	28
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.TECH.	INFORMATION TECHNOLOGY	2016	BHARATHI DASAN ENGINEERING COLLEGE	ANNA UNIVERSITY	7.18	FIRST CLASS	
P.G.	M.TECH.	INFORMATION TECHNOLOGY	2018	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.19	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	02-07-2018	22-05-2022	3	10	21
Total				3	10	26

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 :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECH.-INFORMATION TECHNOLOGY
Name of the faculty member	MR. VANARASAN S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3/314 BHARATHI NAGAR , AGRAHARAM PO VILL, PUDUPETTAI VIA
Line 2	TIRUPATTUR TK ,635651
District	VELLORE
Telephone number	-
Mobile number	+91 - 8056649600
Email	VANARASANS@GMAIL.COM
Gender	MALE
Community	MBC
PAN Number	AMKPV8011G
Passport Number	
Aadhar Number	556050464573
Faculty code given by C.O.E.	5118026
Faculty code given by A.I.C.T.E.	11437495556
Date of Birth	29-05-1989
Age	33
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.TECH.	INFORMATION TECHNOLOGY	2010	ADHIYAM AAN COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	69	FIRST CLASS	
P.G.	M.E.	SOFTWARE ENGINEERING	2012	ANNA UNIVERSITY REGIONAL CAMPUS, COIMBATORE	ANNA UNIVERSITY	8.78	DISTINCT ION	

* 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	02-07-2018	22-05-2022	3	10	21
PODHIGAI COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	02-07-2012	04-06-2018	5	11	3
Total				9	9	29

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)
----------------------------------	---	--	--	---

It is certified that all the information provided are true to the best of my knowledge.



Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. JAYAKUMAR V
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	213 NARASIMMAN KOVIL STREET SOLUR
Line 2	AMBUR - 635814
District	VELLORE
Telephone number	-
Mobile number	+91 - 8778943309
Email	JAYAKUMARMECH13@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BBUPJ4294F
Passport Number	
Aadhar Number	620479471901
Faculty code given by C.O.E.	6118282
Faculty code given by A.I.C.T.E.	17368420453
Date of Birth	10-12-1991
Age	31
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.E.	MECHANICAL ENGINEERING	2013	THANTHAI PERIYAR GOVERNMENT INSTITUTE OF TECHNOLOGY	ANNA UNIVERSITY	7.78	FIRST CLASS	
P.G.	M.E.	THERMAL ENGINEERING	2017	SBM COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	8.46	FIRST CLASS	

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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
DHAANISH AHMED COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	17-05-2017	31-05-2019	2	0	15
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	14-06-2019	23-05-2022	2	11	10
SRI BALAJI CHOCKALINGAM ENGINEERING COLLEGE	ASSISTANT PROFESSOR	07-07-2014	07-07-2015	1	0	1
Total				5	11	1

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)
		3	150	

It is certified that all the information provided are true to the best of my knowledge.

Signature of the Faculty :



Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	COMPUTER SCIENCE AND ENGINEERING
Name of the Degree & Course	B.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MS. NANDINI K
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1061, SAKTHI NAGAR, 3RD STREET
Line 2	BHAVANI, 638301
District	ERODE
Telephone number	-
Mobile number	+91 - 8056553922
Email	NANDIPUNI17@GMAIL.COM
Gender	FEMALE
Community	OC
PAN Number	ANDPN3074H
Passport Number	
Aadhar Number	402580449567
Faculty code given by C.O.E.	7328179
Faculty code given by A.I.C.T.E.	19312942271
Date of Birth	08-07-1987
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.E.	COMPUTER SCIENCE AND ENGINEERING	2009	CHRISTIAN COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	71	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2014	R V S COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	75	FIRST CLASS	

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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	27-11-2020	22-05-2022	1	5	26
CHRISTIAN COLLEGE OF ENGINEERING AND TECHNOLOGY	OTHERS - LECTURER	16-05-2011	05-06-2012	1	0	21
VIDHYA MANDHIR INSTITUTE OF TECHNOLOGY	ASSISTANT PROFESSOR	02-01-2015	31-05-2018	3	4	30
Total				5	11	21

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)
		1	150	

It is certified that all the information provided are true to the best of my knowledge.



Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	M.E.-EMBEDDED SYSTEM TECHNOLOGIES
Name of the faculty member	MRS. DEEPA M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1/753,JAMEDHARMEDU,KAVERIPATTINAM
Line 2	KRISHNAGIRI,635112
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 9942173149
Email	DEEPASARAVANAN.MANI0@GMAIL.COM
Gender	FEMALE
Community	MBC
PAN Number	BPKPD3165H
Passport Number	
Aadhar Number	859861769264
Faculty code given by C.O.E.	6118005
Faculty code given by A.I.C.T.E.	1401930764
Date of Birth	24-01-1982
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.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2003	S S M COLLEGE OF ENGINEERING	PERIYAR UNIVERSITY	74	FIRST CLASS	
P.G.	M.E.	COMMUNICATION SYSTEMS	2007	SONA COLLEGE OF TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	73	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
PAAVAI ENGINEERING COLLEGE (AUTONOMOUS)	ASSISTANT PROFESSOR	29-05-2007	08-10-2007	0	4	11
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	25-06-2012	23-05-2022	9	10	29
GOVERNMENT COLLEGE OF ENGINEERING BARGUR (AUTONOMOUS)	ASSISTANT PROFESSOR	25-06-2008	05-12-2008	0	5	11
JAYAM COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	15-06-2011	31-05-2012	0	11	16
ARCHANA INSTITUTE OF TECHNOLOGY	ASSISTANT PROFESSOR	01-06-2009	11-06-2011	2	0	11
Total				13	8	23

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)
		3	200	

It is certified that all the information provided are true to the best of my knowledge.



Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
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. ZUBHER M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	174 SALEM MAIN ROAD
Line 2	KRISHNAGIRI - 635001
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 9585255031
Email	ZUBHERZAK@GMAIL.COM
Gender	MALE
Community	OTHERS - BCM
PAN Number	ABUPZ3260G
Passport Number	
Aadhar Number	370604674380
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	19320077670
Date of Birth	05-11-1994
Age	28
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.E.	COMPUTER SCIENCE AND ENGINEERING	2016	ADHIYAM AAN COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	N	FIRST CLASS	
P.G.	M.B.A.	OTHERS - FINANCE AND OPERATION	2019	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	N	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	05-03-2020	22-05-2022	2	2	18
Total				2	2	19

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 :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. MANIVANNAN D
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	NO 44 MAIN ROAD VALLIMALI VILLAGE AND POAT MELPADI VIA
Line 2	VELLORE
District	VELLORE
Telephone number	-
Mobile number	+91 - 9943093530
Email	DMANIVANNAN11086@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BRAPM5698G
Passport Number	
Aadhar Number	799578031769
Faculty code given by C.O.E.	5113084
Faculty code given by A.I.C.T.E.	476422307
Date of Birth	05-05-1987
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.E.	MECHANICAL ENGINEERING	2008	OTHERS - TPGIT	ANNA UNIVERSITY	71	FIRST CLASS	
P.G.	M.E.	OTHERS - IC ENGG	2011	COLLEGE OF ENGINEERING GUINDY	ANNA UNIVERSITY	6.27	SECOND CLASS	

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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
KINGSTON ENGINEERING COLLEGE	ASSISTANT PROFESSOR	22-07-2010	30-01-2021	10	6	9
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	01-08-2022	11-02-2023	0	6	11
Total				11	0	21

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)
		3	339	

It is certified that all the information provided are true to the best of my knowledge.



Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.E.-ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the faculty member	MRS. NANDHINI M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	D.MOHAN,1/270 AMMAN NAGAR
Line 2	KRISHNAGIRI-635001
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 8903507536
Email	NANDHINI.ABINAYA@YAHOO.COM
Gender	FEMALE
Community	MBC
PAN Number	ATPPN5596E
Passport Number	
Aadhar Number	347170051055
Faculty code given by C.O.E.	6118127
Faculty code given by A.I.C.T.E.	2372326325
Date of Birth	20-04-1991
Age	31
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.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2012	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.9	FIRST CLASS	
P.G.	M.E.	EMBEDDED SYSTEMS	2014	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	8.3	FIRST CLASS	

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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	02-07-2014	23-05-2022	7	10	22
Total				7	10	27

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)
		2	200	

It is certified that all the information provided are true to the best of my knowledge.



Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
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. KRITHIGA K
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	2/362, MARRIYAMAN KOVIL, CHINNAPUTHUR
Line 2	KRISHNAGIRI - 636001
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 6382098827
Email	REACHKRITHI90@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	GXVPK3573A
Passport Number	
Aadhar Number	243884072318
Faculty code given by C.O.E.	6118081
Faculty code given by A.I.C.T.E.	4641377016
Date of Birth	12-05-1990
Age	32
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.	COMPUTER SYSTEMS AND DESIGN	2010	OTHERS - GOVT ARTS AND SCIENCE COLLEGE FOR WOMEN KRISHNAGIRI	PERIYAR UNIVERSITY	66	FIRST CLASS	
P.G.	M.B.A.	MASTER OF BUSINESS ADMINISTRATION	2012	ADHIYAMAN COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	88	DISTINCTION	

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I.a. Additional Qualification :- SLET

Score : 210

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
JAYALAKSHMI INSTITUTE OF TECHNOLOGY	ASSISTANT PROFESSOR	04-08-2015	06-12-2017	2	4	3
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	04-07-2018	22-05-2022	3	10	19
OTHERS - GEMS B SCHOOL OF MANAGEMENT AND SCIENCE KRISHNAGIRI	ASSISTANT PROFESSOR	02-09-2014	31-07-2015	0	10	29
Total				7	1	23

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
ARCOD NGO	HR AND ADMIN	HUMAN RESOURCE	02-11-2012	27-02-2014	1	3	26
Total					1	3	27


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)
		2	100	

It is certified that all the information provided are true to the best of my knowledge.

Signature of the Faculty :



Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
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. VASU R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3/90,KALNARASAMPATTI,PUDUPATAI
Line 2	NATRAMPALLI-635651
District	VELLORE
Telephone number	-
Mobile number	+91 - 9597351913
Email	VASUMPHIL15@GMAIL.COM
Gender	MALE
Community	MBC
PAN Number	AZWPV0525A
Passport Number	
Aadhar Number	672758996301
Faculty code given by C.O.E.	6118262
Faculty code given by A.I.C.T.E.	13545836942
Date of Birth	07-06-1992
Age	30
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	2012	OTHERS - SACRED HEART COLLEGE	THIRUVALLUVAR UNIVERSITY	70	FIRST CLASS	
P.G.	M.B.A.	OTHERS - FINANCE AND HR	2014	SRI NANDHANAM COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	78	FIRST CLASS	
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - MANAGEMENT	2015	OTHERS - SACRED HEART COLLEGE	THIRUVALLUVAR UNIVERSITY	83	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	03-07-2017	22-05-2022	4	10	20
Total				4	10	25

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)
------------------------------	---------------------------------------	--	--	---

It is certified that all the information provided are true to the best of my knowledge.

Signature of the Faculty :



Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. PHILIPS P
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	4/434 RAJIV NAGAR
Line 2	KRISHNAGIRI - 635001
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 9629185526
Email	PHILIPSP306@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	GARPP7141E
Passport Number	
Aadhar Number	392130733188
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	22-05-1997
Age	26
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.E.	MECHANICAL ENGINEERING	2018	SAVEETHA ENGINEERING COLLEGE (AUTONOMOUS)	ANNA UNIVERSITY	6.4	SECOND CLASS	
P.G.	M.E.	ENGINEERING DESIGN	2020	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	8	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	30-11-2020	23-05-2022	1	5	24
Total				1	5	26

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 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)
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It is certified that all the information provided are true to the best of my knowledge.

A handwritten signature in black ink that reads "P. Philip". The signature is written in a cursive style and is positioned to the right of the text "Signature of the Faculty :".

Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-MATHEMATICS
Name of the faculty member	MRS. LEEMA ROSE T
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	73/79 DOWN STREET ELATHAGIRI
Line 2	KRISHNAGIRI - 635108
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 9597128072
Email	LEEMAROSE.1991@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	AYXPL6547J
Passport Number	
Aadhar Number	476833315504
Faculty code given by C.O.E.	6118295
Faculty code given by A.I.C.T.E.	110663050193
Date of Birth	15-11-1991
Age	31
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 - MATHEMATICS	2012	OTHERS - GONZAGA COLLEGE OF ARTS AND SCIENCE	PERIYAR UNIVERSITY	91.8	DISTINCTION	
P.G.	M.SC.	OTHERS - MATHEMATICS	2015	OTHERS - ARIGNAR ANNA ARTS AND SCIENCE COLLEGE	PERIYAR UNIVERSITY	80.3	FIRST CLASS	
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - MATHEMATICS	2017	OTHERS - ARIGNAR ANNA ARTS AND SCIENCE COLLEGE	PERIYAR UNIVERSITY	85.8	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	25-10-2021	22-05-2022	0	6	29
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	01-08-2018	19-03-2020	1	7	19
Total				2	2	19

V. Industrial Experience :

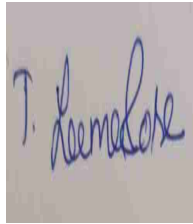
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days


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 :



Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	OTHERS - ARTIFICIAL INTELLIGENCE AND DATA SCIENCE
Name of the Degree & Course	B.TECH.-ARTIFICIAL INTELLIGENCE AND DATA SCIENCE
Name of the faculty member	MRS. SUMATHI B
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3/169-A, KUPPAM ROAD, KATTINAYANAPALLI, KRISHNAGIRI
Line 2	KRISHNAGIRI - 635001
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 9976273727
Email	SMTHBASKARAN@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	CAPPS8383F
Passport Number	
Aadhar Number	412066274976
Faculty code given by C.O.E.	6118296
Faculty code given by A.I.C.T.E.	110678278571
Date of Birth	22-05-1989
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.TECH.	INFORMATION TECHNOLOGY	2010	P R ENGINEERING COLLEGE	ANNA UNIVERSITY	80.24	FIRST CLASS	
P.G.	M.E.	OTHERS - COMPUTER AND COMMUNICATION ENGINEERING	2015	M N S K COLLEGE OF ENGINEERING	ANNA UNIVERSITY	80.08	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
OTHERS - PERIYAR MANIAMMAI UNIVERSITY	OTHERS - TEACHING ASSISTANT	28-07-2010	06-06-2011	0	10	10
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	25-10-2021	11-02-2023	1	3	18
M N S K COLLEGE OF ENGINEERING	OTHERS - PROTERM LECTURER	20-12-2012	20-04-2015	2	4	1
AS-SALAM COLLEGE OF ENGINEERING AND TECHNOLOGY	OTHERS - LECTURER	20-01-2012	19-12-2012	0	10	31
Total				5	5	3

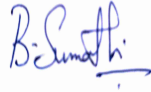
V. Industrial Experience :

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 :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.E.-CIVIL ENGINEERING
Name of the faculty member	MR. ELAVARASAN S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	39 ARUNAPATHI KARAPATTU UTHANGARAI
Line 2	KRISHNAGIRI - 635207
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 8754385670
Email	ELAVARASANVIJAYAN@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	HWJPS6844C
Passport Number	
Aadhar Number	739649791121
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1935546960
Date of Birth	04-05-1995
Age	26
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.E.	CIVIL ENGINEERING	2016	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	6.23	SECOND CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2018	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.1	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	07-12-2020	22-01-2021	0	1	16
Total				0	1	16

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



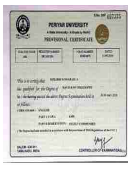
AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of my knowledge.

Signature of the Faculty :

A handwritten signature in blue ink on a light blue background. The signature is cursive and appears to read 'S. Elouf'.

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-ENGLISH
Name of the faculty member	MR. ROZARIO VINNARSU A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1/24 INDIRA NAGAR KANDIKUPPAM BARGUR
Line 2	KRISHNAGIRI - 635108
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 8144135558
Email	ROSE.WINNER03@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AOSPR0411A
Passport Number	
Aadhar Number	871834122490
Faculty code given by C.O.E.	6118034
Faculty code given by A.I.C.T.E.	19316481439
Date of Birth	21-05-1986
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.	OTHERS - BA	OTHERS - ENGLISH	2009	OTHERS - ANNAMALAI UNIVERSITY	ANNAMALAI UNIVERSITY	52.6	SECOND CLASS	
P.G.	OTHERS - MA	OTHERS - ENGLISH	2017	OTHERS - MANONMANI SUNDARANAR UNIVERSITY	MANOMANIAM SUNDARANAR UNIVERSITY	62	FIRST CLASS	
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - ENGLISH	2020	OTHERS - KRISHNA ARTS AND SCIENCE COLLEGE	PERIYAR UNIVERSITY	6.6	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	01-08-2018	22-05-2022	3	9	22
Total				3	9	26

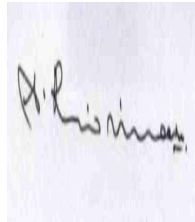
V. Industrial Experience :

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 Examination during the last year**



AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days) 1	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 :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.E.-CIVIL ENGINEERING
Name of the faculty member	MR. RAJASEKAR S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3/199 PATTALAMMAN KOIL STREET THIMMAPURAM
Line 2	KRISHNAGIRI - 635112
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 6379989477
Email	SAJESEKAR6677@GMAIL.COM
Gender	MALE
Community	MBC
PAN Number	CIYPR1659A
Passport Number	
Aadhar Number	355050146543
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	25-07-1992
Age	31
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.E.	CIVIL ENGINEERING	2015	KING COLLEGE OF TECHNOLOGY	ANNA UNIVERSITY	75	FIRST CLASS	
P.G.	M.E.	CONSTRUCTION ENGINEERING AND MANAGEMENT	2018	AMBAL PROFESSIONAL GROUP OF INSTITUTIONS	ANNA UNIVERSITY	82	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	02-01-2023	29-03-2023	0	2	28
Total				0	2	29

V. Industrial Experience :

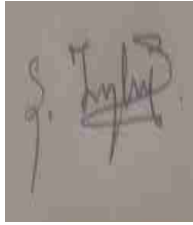
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

VI. C.O.E. Appointment Experience :


Capacity at which service is extended for the conduct of 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)
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It is certified that all the information provided are true to the best of my knowledge.



Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-PHYSICS
Name of the faculty member	MR. SURESH B
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	2/142 RAJIV NAGAR PACHAL POST
Line 2	THIRUPATHUR - 635602
District	TIRUPATHUR
Telephone number	-
Mobile number	+91 - 9894103205
Email	SURESHPHYSICS86@GMAIL.COM
Gender	MALE
Community	MBC
PAN Number	FBJPS2125D
Passport Number	
Aadhar Number	433579885410
Faculty code given by C.O.E.	6118308
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	12-07-1986
Age	37
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	2007	OTHERS - SACRED HEART COLLEGE	THIRUVALUVAR UNIVERSITY	80.44	FIRST CLASS	
P.G.	M.SC.	OTHERS - PHYSICS	2010	OTHERS - PERIYAR UNIVERSITY	PERIYAR UNIVERSITY	72.34	FIRST CLASS	
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - PHYSICS	2011	OTHERS - PERIYAR UNIVERSITY	PERIYAR UNIVERSITY	88.66	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
PODHIGAI COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	28-02-2022	30-06-2022	0	4	1
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	14-11-2011	20-12-2019	8	1	7
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	10-10-2022	08-03-2023	0	4	30
Total				8	10	12

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) 175	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 : 

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the Degree & Course	B.E.-ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the faculty member	MR. VASANTHKUMAR R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	86 THIRUVALLUVAR NAGAR PALLIKONDA
Line 2	VELLORE
District	VELLORE
Telephone number	-
Mobile number	+91 - 6380662349
Email	VASANTHKUMAR5095@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	AYLPV5860C
Passport Number	
Aadhar Number	449622270422
Faculty code given by C.O.E.	6118311
Faculty code given by A.I.C.T.E.	33017067631
Date of Birth	30-01-1996
Age	27
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.E.	ELECTRICAL AND ELECTRONICS ENGINEERING	2017	KINGSTON ENGINEERING COLLEGE	ANNA UNIVERSITY	7.94	FIRST CLASS	
P.G.	M.E.	POWER SYSTEMS ENGINEERING	2021	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	8.72	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	08-08-2022	03-02-2023	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

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.

R. Vasanth Kumar

Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.E.-ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the faculty member	MRS. JOTHI A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1/121,ANNAMALAIHALLI,HANUMANTHAPURAM
Line 2	PALACODE,636802
District	DHARMAPURI
Telephone number	-
Mobile number	+91 - 9884472792
Email	VISITJO@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BRXPA4331B
Passport Number	
Aadhar Number	231551950684
Faculty code given by C.O.E.	6125061
Faculty code given by A.I.C.T.E.	2709239831
Date of Birth	23-11-1990
Age	33
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.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2011	SNS COLLEGE OF TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	8.77	DISTINCTION	<input checked="" type="checkbox"/>
P.G.	M.E.	COMMUNICATION SYSTEMS	2015	ADHIYAMAAN COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	9.6	DISTINCTION	<input checked="" type="checkbox"/>

* 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
SRI VENKATESHWARA INSTITUTE OF ENGINEERING	ASSISTANT PROFESSOR	13-07-2015	24-09-2021	6	2	12
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	04-04-2022	11-02-2023	0	10	8
SRI VENKATESHWARA INSTITUTE OF ENGINEERING	OTHERS - LECTURER	01-06-2011	02-07-2012	1	1	2
Total				8	1	23

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)
		3	50	

It is certified that all the information provided are true to the best of my knowledge.

A handwritten signature in black ink, appearing to be 'Johy A', is centered within a light gray rectangular box.

Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	BIO-MEDICAL
Name of the Degree & Course	B.E.-GENERAL ENGINEERING
Name of the faculty member	MR. VINODH KUMAR M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	PLOT NO.2 LAKSHMI GARDEN MOTHAM ROAD NEAR RING ROAD
Line 2	HOSUR - 635109
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 6380468505
Email	VINODHKUMARNAVEEN@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BAVPV6378N
Passport Number	
Aadhar Number	995160303189
Faculty code given by C.O.E.	6118307
Faculty code given by A.I.C.T.E.	10547322291
Date of Birth	24-05-1994
Age	29
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.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2016	ADHIYAMAN COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	8.6	DISTINCTION	
P.G.	M.E.	APPLIED ELECTRONICS	2021	ERPERUMAL MANIMEKALAI COLLEGE OF ENGINEERING	ANNA UNIVERSITY	8.9	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
OTHERS - P S V POLYTECHNIC COLLEGE	OTHERS - LECTURER	29-09-2021	30-07-2022	0	10	1
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	01-08-2022	11-02-2023	0	6	11
Total				1	4	15

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
SRISHA ROBOTICS	TECHNICAL ENGINEER	MANUFACTURING	05-08-2016	15-10-2017	1	2	11
Total					1	2	11

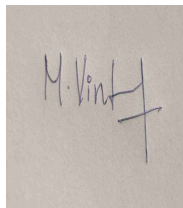
VI. C.O.E. Appointment Experience :


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.

Signature of the Faculty :



Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	COMPUTER SCIENCE AND ENGINEERING
Name of the Degree & Course	M.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MRS. MONISHA R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	16/2 VEERAPPAN NAGAR 1ST CROSS
Line 2	KRISHNAGIRI - 635001
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 7418237877
Email	MONIRAVI11@GMAIL.COM
Gender	FEMALE
Community	MBC
PAN Number	DTMPM0649M
Passport Number	
Aadhar Number	778278650275
Faculty code given by C.O.E.	6118306
Faculty code given by A.I.C.T.E.	24284479084
Date of Birth	24-11-1995
Age	28
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.E.	COMPUTER SCIENCE AND ENGINEERING	2017	ADHIYAM AAN COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	86	DISTINCT ION	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2020	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	81	DISTINCT ION	

* 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	10-08-2022	11-02-2023	0	6	2
Total				0	6	5

V. Industrial Experience :

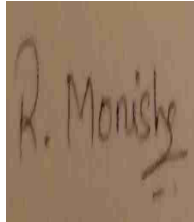
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days


VI. C.O.E. Appointment Experience :**Capacity at which service is extended for the conduct of Exmination during the last year**

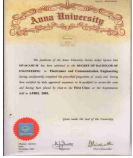

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of my knowledge.

Signature of the Faculty :



Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.E.-GENERAL ENGINEERING
Name of the faculty member	MRS. SIVAGAMI M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1B SHANTHI NAGAR 3RD CROSS
Line 2	KRISHNAGIRI - 635001
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 9942261787
Email	SIVASUBBU2015@GMAIL.COM
Gender	FEMALE
Community	OC
PAN Number	ISWPS8547E
Passport Number	
Aadhar Number	761126714720
Faculty code given by C.O.E.	5109234
Faculty code given by A.I.C.T.E.	3720521464
Date of Birth	07-03-1984
Age	39
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.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2005	DHANALAKSHMI SRINIVASAN COLLEGE OF ENGINEERING	ANNA UNIVERSITY	73	FIRST CLASS	
P.G.	M.E.	COMMUNICATION SYSTEMS	2017	MOUNT ZION COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	8.02	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
GLOBAL INSTITUTE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	26-12-2017	21-04-2021	3	3	27
GLOBAL INSTITUTE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	18-08-2021	30-11-2021	0	3	14
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	01-08-2022	11-02-2023	0	6	11
Total				4	1	23

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

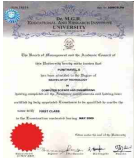

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of my knowledge.



Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	OTHERS - ARTIFICIAL INTELLIGENCE AND DATA SCIENCE
Name of the Degree & Course	B.TECH.-ARTIFICIAL INTELLIGENCE AND DATA SCIENCE
Name of the faculty member	MR. PUNITHAVEL S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	107 BHARATHI NAGAR KANNIYAMBADI
Line 2	VELLORE - 632102
District	VELLORE
Telephone number	-
Mobile number	+91 - 7904704536
Email	PUNITHAVEL19@GMAIL.COM
Gender	MALE
Community	MBC
PAN Number	BFNPP9684L
Passport Number	
Aadhar Number	930666834783
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	29-05-1982
Age	41
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.E.	COMPUTER SCIENCE AND TECHNOLOGY	2009	OTHERS - DR MGR EDUCATIONAL AND RESEARCH INSTITUTE UNIVERSITY	OTHERS - DR MGR EDUCATIONAL AND RESEARCH INSTITUTE UNIVERSITY	9.1	FIRST CLASS	
P.G.	M.E.	OTHERS - NETWORKING AND INTERNET ENGINEERING	2014	R V S COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.4	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	30-01-2023	11-02-2023	0	0	13
Total				0	0	13

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

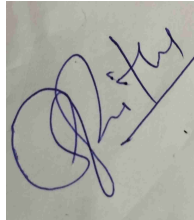
VI. C.O.E. Appointment Experience :

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 :



Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	OTHERS - ARTIFICIAL INTELLIGENCE AND DATA SCIENCE
Name of the Degree & Course	B.TECH.-ARTIFICIAL INTELLIGENCE AND DATA SCIENCE
Name of the faculty member	MS. MONISHA C
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	2/155 PERIYAGARAM POST TIRUPATTUR
Line 2	TIRUPATHUR - 635901
District	TIRUPATHUR
Telephone number	-
Mobile number	+91 - 9080252751
Email	MONISHACHAKARAVARTHI@GMAIL.COM
Gender	FEMALE
Community	MBC
PAN Number	EDJPM4011F
Passport Number	
Aadhar Number	518344370543
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	31-08-1998
Age	25
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.E.	COMPUTER SCIENCE AND ENGINEERING	2020	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.6	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2022	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	8.6	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	30-01-2023	11-02-2023	0	0	13
Total				0	0	13

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.

A handwritten signature in blue ink, appearing to read "C. Mansp.", is centered within a rectangular box. The signature is written in a cursive style with a prominent vertical stroke at the end.

Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.E.-ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the faculty member	MRS. SARANYA A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	43B KRISHNAPA LAYOUT
Line 2	KRISHNAGIRI - 635001
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 9840706510
Email	ASARANYAPRIYA@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	EZKPS6359M
Passport Number	
Aadhar Number	913320034899
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	22-01-1989
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.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2010	ER PERUMAL MANIMEKALAI COLLEGE OF ENGINEERING	ANNA UNIVERSITY	76	FIRST CLASS	
P.G.	M.E.	APPLIED ELECTRONICS	2012	SRI KRISHNA COLLEGE OF ENGINEERING	ANNA UNIVERSITY	78	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	OTHERS - LECTURER	25-06-2012	31-12-2012	0	6	6
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	02-01-2013	30-04-2019	6	3	30
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	01-08-2022	11-02-2023	0	6	11
Total				7	4	19

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)
----------------------------------	---	--	--	---

It is certified that all the information provided are true to the best of my knowledge.

Signature of the Faculty :



Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.E.-GENERAL ENGINEERING
Name of the faculty member	MR. VIMALAN S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	34/4, 3RD STREET PUDUPETTAI ROAD TIRUPATTUR
Line 2	TIRUPATHUR - 635601
District	TIRUPATHUR
Telephone number	-
Mobile number	+91 - 9489877028
Email	VIMALAN.STJ@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	ATNPV9171H
Passport Number	
Aadhar Number	596326405588
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	26-08-1995
Age	28
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.E.	CIVIL ENGINEERING	2017	SRI SAI RAM INSTITUTE OF TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	8.6	DISTINCT ION	
P.G.	M.E.	STRUCTURAL ENGINEERING	2022	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	9.2	DISTINCT ION	

* 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	30-01-2023	11-02-2023	0	0	13
Total				0	0	13

V. Industrial Experience :


Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

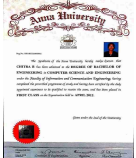

VI. C.O.E. Appointment Experience :**Capacity at which service is extended for the conduct of Exmination during the last year**

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)
----------------------------------	---	--	--	---

It is certified that all the information provided are true to the best of my knowledge.


Scanned with CamScanner**Signature of the Faculty :**

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	OTHERS - ARTIFICIAL INTELLIGENCE AND DATA SCIENCE
Name of the Degree & Course	B.TECH.-ARTIFICIAL INTELLIGENCE AND DATA SCIENCE
Name of the faculty member	MRS. CHITRA B
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3/234 MALLAPADI
Line 2	KRISHNAGIRI - 635104
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 9698131414
Email	DKRISHNAN384@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BYLPC4356D
Passport Number	
Aadhar Number	444563213005
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	10-05-1991
Age	32
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.E.	COMPUTER SCIENCE AND ENGINEERING	2012	ER PERUMAL MANIMEKALAI COLLEGE OF ENGINEERING	ANNA UNIVERSITY	7.99	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2018	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	8.32	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	30-01-2023	11-02-2023	0	0	13
Total				0	0	13

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**



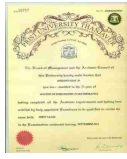
AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
----------------------------------	---	--	--	---

It is certified that all the information provided are true to the best of my knowledge.

Signature of the Faculty :



Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-MATHEMATICS
Name of the faculty member	MRS. KRISHNAVENI D
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	NO.46 CHAPPARTHI POST AND VILLAGE
Line 2	KRISHNAGIRI - 635106
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 6374752511
Email	KRISHNAVENIELANGO25@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	CDGPK2193B
Passport Number	
Aadhar Number	350241768716
Faculty code given by C.O.E.	6118261
Faculty code given by A.I.C.T.E.	1
Date of Birth	20-05-1986
Age	37
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.S.C.	OTHERS - MATHEMATICS	2006	OTHERS - RAC WOMENS COLLEGE	BHARATHI DASAN UNIVERSITY	67	FIRST CLASS	
P.G.	M.SC.	OTHERS - MATHEMATICS	2008	OTHERS - THIRU VIKI GOVT ARTS AND SCIENCE COLLEGE	BHARATHI DASAN UNIVERSITY	72	FIRST CLASS	
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - MATHEMATICS	2011	OTHERS - PRIST UNIVERSITY	OTHERS - PRIST UNIVERSITY	73	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	03-07-2017	11-02-2023	5	7	9
Total				5	7	12

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 Examination during the last year

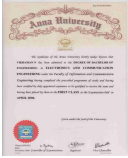

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of my knowledge.

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

Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	BIO-MEDICAL
Name of the Degree & Course	B.E.-BIOMEDICAL ENGINEERING
Name of the faculty member	MR. VIKRAM V
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3/104 R.C STREET INAMREDDIAPATTI, VIRUDHUNAGAR
Line 2	VIRUDHUNAGAR - 626003
District	VIRUDHUNAGAR
Telephone number	-
Mobile number	+91 - 9865833847
Email	VIKRAMANN@ROCKETMAIL.COM
Gender	MALE
Community	MBC
PAN Number	AIHPN6710D
Passport Number	
Aadhar Number	398576858070
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	28-05-1984
Age	39
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.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2006	OXFORD ENGINEERING COLLEGE	ANNA UNIVERSITY	67.61	FIRST CLASS	
P.G.	M.E.	MEDICAL ELECTRONICS	2014	ANNA UNIVERSITY REGIONAL CAMPUS, COIMBATORE	ANNA UNIVERSITY	5.85	SECOND 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	23-11-2022	22-02-2023	0	2	30
Total				0	2	1

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)

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 on a light blue background. The signature is stylized and appears to be 'R. G. S.' followed by a flourish.

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the Degree & Course	B.E.-ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the faculty member	MRS. AISHWARYA S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	13, DURAISAMY STREET BYPASS ROAD
Line 2	NEW TOWN POST VANIYAMBADI - 635752
District	TIRUPATHUR
Telephone number	-
Mobile number	+91 - 9843800570
Email	SAISHU1995@GMAIL.COM
Gender	FEMALE
Community	MBC
PAN Number	GWGPS2190B
Passport Number	
Aadhar Number	892386333320
Faculty code given by C.O.E.	6118271
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	26-02-1995
Age	28
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.E.	ELECTRICAL AND ELECTRONICS ENGINEERING	2016	UNIVERSITY COLLEGE OF ENGINEERING ARNI	ANNA UNIVERSITY	7.68	FIRST CLASS	
P.G.	M.E.	POWER SYSTEMS ENGINEERING	2018	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.99	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	16-07-2018	23-02-2023	4	7	8
Total				4	7	11

V. Industrial Experience :

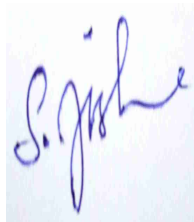
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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.

A handwritten signature in blue ink, appearing to read 'S. Jishu', is centered within a rectangular box.

Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the Degree & Course	B.E.-ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the faculty member	MRS. ANDAL P
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1/484 4TH CROSS POWER HOUSE COLLONY
Line 2	KRISHNAGIRI - 635001
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 9360036190
Email	ANDALESHWARI@GMAIL.COM
Gender	FEMALE
Community	MBC
PAN Number	COXPA8030F
Passport Number	
Aadhar Number	240623470171
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	29-07-1987
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.E.	ELECTRICAL AND ELECTRONICS ENGINEERING	2009	ARUNAI COLLEGE OF ENGINEERING	ANNA UNIVERSITY	79	FIRST CLASS	
P.G.	M.E.	POWER SYSTEMS ENGINEERING	2013	ADHIYAMAN COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	9.27	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
OTHERS - K E T POLYTECHNIC COLLEGE	OTHERS - LECTURER	12-12-2017	11-03-2023	5	2	31
Total				5	3	2

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.

A handwritten signature in blue ink, appearing to be 'P. S. I.', is centered within a rectangular box.

Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-ENGLISH
Name of the faculty member	MR. KALIYAPPAN S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1/517 KUPPUR VILLEGE
Line 2	DHARMAPURI - 636704
District	DHARMAPURI
Telephone number	-
Mobile number	+91 - 9791964142
Email	SELVAMKALI2@GMAIL.COM
Gender	MALE
Community	MBC
PAN Number	EBMPK1945K
Passport Number	
Aadhar Number	909663899900
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	10-03-1990
Age	33
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	2010	OTHERS - ARIGNAR ANNA COLLEGE	PERIYAR UNIVERSITY	48	OTHERS - THIRD CLASS	
P.G.	OTHERS - M.A	OTHERS - ENGLISH	2013	OTHERS - KONGUNADU ARTS AND SCIENCE COLLEGE	BHARATHIYAR UNIVERSITY	67	FIRST CLASS	
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - ENGLISH	2015	OTHERS - SRI VIJAY VIDYALAYA ARTS AND SCIENCE COLLEGE	PERIYAR UNIVERSITY	77.5	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- SLET

Score : 140

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	16-03-2023	20-03-2023	0	0	5
Total				0	0	5


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 :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.E.-ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the faculty member	MRS. BHUVANA PRIYA M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	15/124 N1 APPASAMINAIDU STRRT KAVERIPATTINAM
Line 2	KRISHNAGIRI - 635112
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 8220270464
Email	BHUVANAPRIYA28M@GMAIL.COM
Gender	FEMALE
Community	MBC
PAN Number	DVBPB5659F
Passport Number	
Aadhar Number	456586664948
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	28-06-1991
Age	32
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.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2012	ER PERUMAL MANIMEKALAI COLLEGE OF ENGINEERING	ANNA UNIVERSITY	88	DISTINCTION	
P.G.	M.E.	EMBEDDED SYSTEM TECHNOLOGIES	2017	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	82	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	01-08-2022	02-03-2023	0	7	2
Total				0	7	5

V. Industrial Experience :

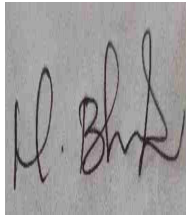
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

VI. C.O.E. Appointment Experience :

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


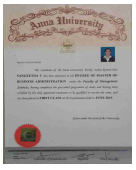
AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of my knowledge.

A handwritten signature in black ink, appearing to read 'H. Bhaskar', is centered within a rectangular box. The signature is written in a cursive style.

Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
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. SANGEETHA V
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1/95 SOKADI VILLAGE MORAMAGUDU
Line 2	KRISHNAGIRI - 635122
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 8098846706
Email	VSANGEETHA969@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	EKCPS0929E
Passport Number	
Aadhar Number	491914136603
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	16-06-1993
Age	30
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.	OTHERS - COMPUTER SCIENCE	2013	OTHERS - GOVT ARTS COLLEGE	PERIYAR UNIVERSITY	67	FIRST CLASS	
P.G.	M.B.A.	MASTER OF BUSINESS ADMINISTRATION	2015	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	75	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	01-02-2023	02-03-2023	0	1	2
Total				0	1	2

V. Industrial Experience :

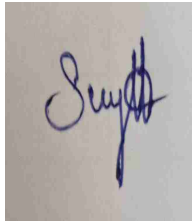
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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.

A handwritten signature in blue ink, appearing to be 'Suyth', is centered within a rectangular box.

Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-PHYSICS
Name of the faculty member	MRS. PREETHI G
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	2/208 MGR NAGAR KANDHIKUPPAM
Line 2	KRISHNAGIRI - 635108
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 8754666068
Email	PREETHI.GOPI91@GMAIL.COM
Gender	FEMALE
Community	MBC
PAN Number	EWKPP5650P
Passport Number	
Aadhar Number	491405620578
Faculty code given by C.O.E.	6118297
Faculty code given by A.I.C.T.E.	10723803121
Date of Birth	17-07-1992
Age	30
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	2012	OTHERS - SRI SARADHA COLLEGE SALEM	PERIYAR UNIVERSITY	71.03	FIRST CLASS	
P.G.	M.SC.	OTHERS - PHYSICS	2015	OTHERS - GONZAGA ARTS AND SCINCE COLLEGE	PERIYAR UNIVERSITY	81.75	DISTINCTION	
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - PHYSICS	2017	OTHERS - ARINGNAR ANNA ARTS AND SCINCE COLLEGE	PERIYAR UNIVERSITY	89.08	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	22-05-2022	3	9	22
Total				3	9	26

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) 2	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 :



Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-MATHEMATICS
Name of the faculty member	MR. PUSHPARAJAN D
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	2/15 SANTHAKUPPAM VILLAGE
Line 2	KANDILI POST THIRUPATTUR TK
District	VELLORE
Telephone number	-
Mobile number	+91 - 7010647154
Email	DPUSHPARAJANMATHS1988@GMAIL.COM
Gender	MALE
Community	MBC
PAN Number	CCGPP5477G
Passport Number	
Aadhar Number	668376744790
Faculty code given by C.O.E.	4126015
Faculty code given by A.I.C.T.E.	3546458163
Date of Birth	07-06-1988
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.SC.	OTHERS - MATHEMATICS	2008	OTHERS - SACRED HEART COLLEGE	THIRUVALLUVAR UNIVERSITY	66.4	FIRST CLASS	
P.G.	M.SC.	OTHERS - MATHEMATICS	2011	OTHERS - SACRED HEART COLLEGE	THIRUVALLUVAR UNIVERSITY	79	FIRST CLASS	
OTHERS - M. PHIL	OTHERS - M.PHIL	OTHERS - MATHEMATICS	2012	OTHERS - SACRED HEART COLLEGE	THIRUVALLUVAR UNIVERSITY	89.5	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
SRI VENKATESWARAA COLLEGE OF TECHNOLOGY	ASSISTANT PROFESSOR	03-08-2012	27-05-2017	4	9	25
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	03-07-2017	22-05-2022	4	10	20
Total				9	8	19

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) 250	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 :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-MATHEMATICS
Name of the faculty member	MR. SATHEESH KUMAR D
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	2/20 VALLIPATTU, VANIAMBADI
Line 2	VANIAMBADI - 635752
District	VELLORE
Telephone number	-
Mobile number	+91 - 9952675117
Email	SATHEE343@GMAIL.COM
Gender	MALE
Community	MBC
PAN Number	DFMPS2893F
Passport Number	
Aadhar Number	679770467219
Faculty code given by C.O.E.	5119024
Faculty code given by A.I.C.T.E.	7378563202
Date of Birth	28-04-1984
Age	38
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 - MATHEMATICS	2004	OTHERS - ISLAMIAH COLLEGE VANIYAMBADI	UNIVERSITY OF MADRAS	63	FIRST CLASS	
P.G.	M.SC.	OTHERS - MATHEMATICS	2006	OTHERS - ISLAMIAH COLLEGE VANIYAMBADI	THIRUVALLUVAR UNIVERSITY	64	FIRST CLASS	
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - MATHEMATICS	2007	OTHERS - ISLAMIAH COLLEGE VANIYAMBADI	THIRUVALLUVAR UNIVERSITY	78	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
PRIYADARSHINI ENGINEERING COLLEGE	ASSISTANT PROFESSOR	22-02-2010	31-12-2018	8	10	7
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	07-08-2019	22-05-2022	2	9	16
Total				11	7	27

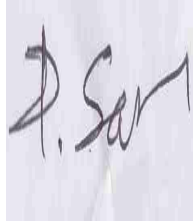
V. Industrial Experience :

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) 100	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 :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.E.-CIVIL ENGINEERING
Name of the faculty member	MR. LOKESH S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1/47, PERIYA KASINAYAGAN PATTI
Line 2	TIRUPATTUR
District	VELLORE
Telephone number	-
Mobile number	+91 - 9943398938
Email	LOK_SRISS@YAHOO.CO.IN
Gender	MALE
Community	BC
PAN Number	AKXPL7811R
Passport Number	
Aadhar Number	241623220772
Faculty code given by C.O.E.	7127097
Faculty code given by A.I.C.T.E.	19314654498
Date of Birth	31-05-1990
Age	31
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.E.	CIVIL ENGINEERING	2011	ADHIYAM AAN COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	71.9	FIRST CLASS	
P.G.	M.E.	CONSTRUCTION ENGINEERING AND MANAGEMENT	2013	KONGU ENGINEERING COLLEGE (AUTONOMOUS)	ANNA UNIVERSITY	72.8	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
AMBAL PROFESSIONAL GROUP OF INSTITUTIONS	ASSISTANT PROFESSOR	23-06-2014	28-06-2019	5	0	6
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	01-07-2019	29-01-2021	1	6	29
Total				6	7	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**


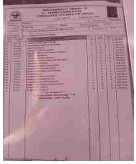
AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
		4	425	

It is certified that all the information provided are true to the best of my knowledge.



Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.E.-ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the faculty member	MRS. ALMAS B
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	243/227, THIRUVANNAMALAI ROAD, OLDPET
Line 2	KRISHNAGIRI-635001
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 9578613905
Email	ALMAEST22@GMAIL.COM
Gender	FEMALE
Community	OTHERS - BCM
PAN Number	COYPA8854E
Passport Number	NIL
Aadhar Number	548652149125
Faculty code given by C.O.E.	NIL
Faculty code given by A.I.C.T.E.	17426626083
Date of Birth	22-10-1990
Age	32
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.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2012	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.79	FIRST CLASS	
P.G.	M.E.	EMBEDDED SYSTEM TECHNOLOGIES	2017	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.75	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	06-12-2019	23-05-2022	2	5	18
Total				2	5	20

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.

A handwritten signature in blue ink, appearing to be 'B. Maf', is written on a light-colored surface.

Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.E.-ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the faculty member	MRS. THASMIAH DOWLATH M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	ENDU CHETTY STREET BARGUR
Line 2	KRISHNAGIRI
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 8072236560
Email	THASMIAH1510@GMAIL.COM
Gender	FEMALE
Community	OTHERS - BCM
PAN Number	AVOPT4356M
Passport Number	
Aadhar Number	499438006371
Faculty code given by C.O.E.	6118276
Faculty code given by A.I.C.T.E.	17375108465
Date of Birth	15-10-1991
Age	31
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.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2013	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	8.89	FIRST CLASS	
P.G.	M.E.	EMBEDDED SYSTEM TECHNOLOGIES	2018	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	8.87	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	14-06-2019	23-05-2022	2	11	10
Total				2	11	15

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


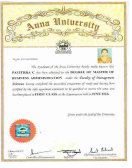
AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of my knowledge.

A handwritten signature in blue ink, consisting of stylized, overlapping loops and lines, positioned in the upper right area of the signature box.

Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
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. PAVITHRA C
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	48/A VEDIYAPPAN KOVIL STREET
Line 2	KRISHNAGIRI 635001
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 6380848615
Email	PAVITHRAC077@GMAIL.COM
Gender	FEMALE
Community	MBC
PAN Number	CVGPP3799G
Passport Number	
Aadhar Number	608995667480
Faculty code given by C.O.E.	6118280
Faculty code given by A.I.C.T.E.	17353663918
Date of Birth	04-05-1992
Age	30
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	2013	OTHERS - ARIGNAR ANNA COLLEGE	PERIYAR UNIVERSITY	59	SECOND CLASS	
P.G.	M.B.A.	OTHERS - HUMAN RESOURCES FINANCE	2016	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	70	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	04-09-2019	22-05-2022	2	8	19
Total				2	8	23

V. Industrial Experience :

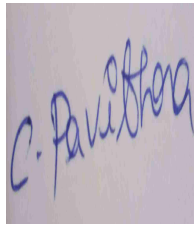
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days


VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year


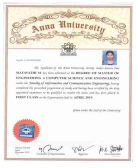
AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of my knowledge.

Signature of the Faculty :

A handwritten signature in blue ink, appearing to read "C. Pavithra", is positioned to the right of the text "Signature of the Faculty :".

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECH.-INFORMATION TECHNOLOGY
Name of the faculty member	MS. MAYAVATHI M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	NO.2/134,SOULUR VILL,GANGALERI POST
Line 2	KRISHNAGIRI
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 9751373131
Email	MAYAVATHIMAYA@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	CNXPM3857P
Passport Number	
Aadhar Number	300194104305
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	17401698915
Date of Birth	19-02-1994
Age	28
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.E.	COMPUTER SCIENCE AND ENGINEERING	2015	GOVERNMENT COLLEGE OF ENGINEERING BARGUR (AUTONOMOUS)	ANNA UNIVERSITY	7.36 CGPA	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2019	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.85 CGPA	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	02-12-2019	22-05-2022	2	5	21
Total				2	5	23

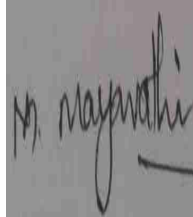
V. Industrial Experience :

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**

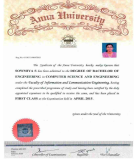
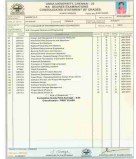
AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of my knowledge.



Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	COMPUTER SCIENCE AND ENGINEERING
Name of the Degree & Course	B.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MS. SOWMIYA S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	331/G SRINIVASA COLONY, 3RD CROSS, KRISHNAGIRI
Line 2	635001
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 8940289688
Email	SOWMIJOHN@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	GEHPS9983B
Passport Number	
Aadhar Number	225493208123
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	3587195633
Date of Birth	24-06-1994
Age	29
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.E.	COMPUTER SCIENCE AND ENGINEERING	2015	JAYAM COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	68.6	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2017	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	80.4	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	04-12-2017	22-05-2022	4	5	19
Total				4	5	21

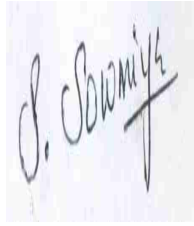
V. Industrial Experience :

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


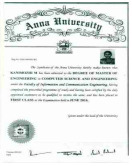
AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of my knowledge.

A handwritten signature in black ink on a light-colored background. The signature appears to be 'S. Sowmya' written in a cursive style.

Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECH.-INFORMATION TECHNOLOGY
Name of the faculty member	MS. KANIMOZHI M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	129, KUPPAM ROAD
Line 2	OLD PET
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 9750549142
Email	KANI2516SK@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	DOUPK2169P
Passport Number	
Aadhar Number	284483636380
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	3586424524
Date of Birth	15-06-1991
Age	31
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.E.	COMPUTER SCIENCE AND ENGINEERING	2014	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.19	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2016	G K M COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.8	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	04-12-2017	22-05-2022	4	5	19
Total				4	5	21

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 :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	DR. THIRUNAVUKKARASU R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	2/102 KULLANOORVILLAGE
Line 2	POCHAMPALLI,635206
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 8124351048
Email	THIRUNAARASU821@GMAIL.COM
Gender	MALE
Community	MBC
PAN Number	BCAPT2518P
Passport Number	L9176052
Aadhar Number	499335569938
Faculty code given by C.O.E.	7138196
Faculty code given by A.I.C.T.E.	13203387204
Date of Birth	21-07-1991
Age	32
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.E.	MECHANICAL ENGINEERING	2014	UNIVERSITY COLLEGE OF ENGINEERING DINDIGUL	ANNA UNIVERSITY	7.99	FIRST CLASS	
P.G.	M.E.	THERMAL ENGINEERING	2016	SRI RAMAKRISHNA ENGINEERING COLLEGE (AUTONOMOUS)	ANNA UNIVERSITY	7.96	FIRST CLASS	
PH.D.	PH.D.	MECHANICAL ENGINEERING	2022	GOVERNMENT COLLEGE OF TECHNOLOGY COIMBATORE (AUTONOMOUS)	ANNA UNIVERSITY	AWARDED		

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score : 0

File :

II. Title of Ph.D. Thesis

INVESTIGATION OF THE EFFECT OF DIFFERENT THERMAL BARRIER COATINGS ON PERFORMANCE AND EMISSION CHARACTERISTICS OF DI DIESEL ENGINE

III. Faculty in which Ph.D. was awarded

FACULTY OF MECHANICAL ENGINEERING

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
SRI RAMAKRISHNA INSTITUTE OF TECHNOLOGY (AUTONOMOUS)	ASSISTANT PROFESSOR	09-06-2016	08-02-2022	5	7	30
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	01-08-2022	15-02-2023	0	6	15
Total				6	2	16

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 Examination during the last year

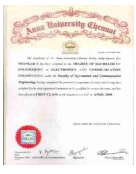
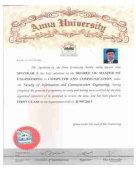
AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days) 2	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of my knowledge.

Signature of the Faculty :



Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.E.-ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the faculty member	MR. SHANKAR S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	2/384,CHENNAI BYEPASS ROAD,DANDEKUPPAM
Line 2	635001
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 9751343438
Email	SSHANKAR1987@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	GGCPS6578P
Passport Number	NIL
Aadhar Number	813233005729
Faculty code given by C.O.E.	NIL
Faculty code given by A.I.C.T.E.	14616313433
Date of Birth	12-06-1987
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.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2008	S K P ENGINEERING COLLEGE	ANNA UNIVERSITY	72	FIRST CLASS	
P.G.	M.E.	OTHERS - COMPUTER AND COMMUNICATION	2013	SAVEETHA ENGINEERING COLLEGE (AUTONOMOUS)	ANNA UNIVERSITY	70	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	26-11-2018	23-05-2022	3	5	28
Total				3	5	0

V. Industrial Experience :

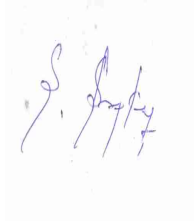
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

VI. C.O.E. Appointment Experience :


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

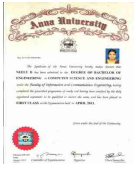

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of my knowledge.

A handwritten signature in blue ink, appearing to be 'S. Singh', is centered within a rectangular box. The signature is written in a cursive style.

Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	COMPUTER SCIENCE AND ENGINEERING
Name of the Degree & Course	B.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MRS. NEELU B
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	52 SALEM MAIN ROAD
Line 2	KRISHNAGIRI 635001
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 6380807627
Email	NEELUSADIK@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	LAHPS9041P
Passport Number	NIL
Aadhar Number	683917231711
Faculty code given by C.O.E.	6125055
Faculty code given by A.I.C.T.E.	2708861079
Date of Birth	10-02-1990
Age	32
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.E.	COMPUTER SCIENCE AND ENGINEERING	2011	SRI NANDHANAM COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	79	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2013	ARCHANA INSTITUTE OF TECHNOLOGY	ANNA UNIVERSITY	89	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	29-06-2018	22-05-2022	3	10	24
SRI VENKATESHWARA INSTITUTE OF ENGINEERING	ASSISTANT PROFESSOR	07-06-2013	10-05-2018	4	11	4
Total				8	9	3

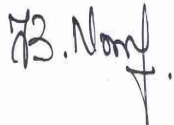
V. Industrial Experience :

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)
		2	250	

It is certified that all the information provided are true to the best of my knowledge.



Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.E.-ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the faculty member	MS. KALAIYARASI K
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	4/127,POTHAPURAM
Line 2	KRISHNAGIRI-635112
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 8526657311
Email	KALAIECE30@GMAIL.COM
Gender	FEMALE
Community	MBC
PAN Number	ATPPK6955K
Passport Number	
Aadhar Number	850760387089
Faculty code given by C.O.E.	6118195
Faculty code given by A.I.C.T.E.	7619415170
Date of Birth	30-05-1993
Age	29
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.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2014	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	8.53	DISTINCT ION	
P.G.	M.E.	EMBEDDED SYSTEM TECHNOLOGIES	2016	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	8.2	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	08-06-2016	23-05-2022	5	11	16
Total				5	11	21

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)
		1	200	

It is certified that all the information provided are true to the best of my knowledge.



Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. POOVANNAN S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	CHINNAKAMMIYAMPATTU VILLAGE
Line 2	JOLARPET 635851
District	VELLORE
Telephone number	-
Mobile number	+91 - 9943071894
Email	POOVANNAN24@YAHOO.CO.IN
Gender	MALE
Community	MBC
PAN Number	ARHPP5002F
Passport Number	
Aadhar Number	983164915519
Faculty code given by C.O.E.	6118257
Faculty code given by A.I.C.T.E.	13364266372
Date of Birth	14-12-1984
Age	38
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.E.	MECHANICAL ENGINEERING	2006	OTHERS - VMKV ENGINEERING COLLEGE SALEM	ANNA UNIVERSITY	69	FIRST CLASS	
P.G.	M.E.	AERONAUTICAL ENGINEERING	2009	PARK COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	8.1	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
THIRUMALAI ENGINEERING COLLEGE	OTHERS - LECTURER	27-01-2007	03-07-2007	0	5	8
C ABDUL HAKEEM COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	21-06-2012	20-05-2015	2	10	30
SRI NANDHANAM COLLEGE OF ENGINEERING AND TECHNOLOGY	OTHERS - LECTURER	12-08-2009	30-11-2011	2	3	20
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	05-01-2017	23-05-2022	5	4	19
OTHERS - SRI NANDHANAM MARITIME ACADEMY	OTHERS - SR LECTURER	01-12-2011	20-06-2012	0	6	20
T J INSTITUTE OF TECHNOLOGY	ASSISTANT PROFESSOR	01-07-2015	05-08-2016	1	1	5
Total				12	8	16

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 :



Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.E.-CIVIL ENGINEERING
Name of the faculty member	MS. SIVA SANKARI S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	DHAMAPURI MAIN ROAD
Line 2	KRISHNAGIRI
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 9677372672
Email	SIVASANKARI8574@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	LBBPS4972A
Passport Number	
Aadhar Number	337981755638
Faculty code given by C.O.E.	6118291
Faculty code given by A.I.C.T.E.	10545854902
Date of Birth	18-02-1997
Age	25
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.E.	CIVIL ENGINEERING	2018	HINDUSTHAN COLLEGE OF ENGINEERING AND TECHNOLOGY(AUTONOMOUS)	ANNA UNIVERSITY	6.63	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2020	ANNA UNIVERSITY REGIONAL CAMPUS, MADURAI	ANNA UNIVERSITY	7.71	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	23-09-2021	22-02-2022	0	4	30
Total				0	4	2

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 :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	COMPUTER SCIENCE AND ENGINEERING
Name of the Degree & Course	M.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MRS. GANDHIMATHI D
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	62 A MEL ANCHANAYAR KOVIL STREET NEW PET
Line 2	KRISHNAGIRI 635001
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 8883358327
Email	JEEVASMITH.15@GMAIL.COM
Gender	FEMALE
Community	MBC
PAN Number	BLHPG9689N
Passport Number	
Aadhar Number	306795822705
Faculty code given by C.O.E.	6118283
Faculty code given by A.I.C.T.E.	7377478501
Date of Birth	09-06-1994
Age	28
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.E.	COMPUTER SCIENCE AND ENGINEERING	2016	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.8	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2019	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	8.1	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	03-01-2020	22-05-2022	2	4	20
Total				2	4	22

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.

A handwritten signature in blue ink, appearing to read "D. G. Mathi", is centered within a rectangular box. The signature is written in a cursive style.

Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECH.-INFORMATION TECHNOLOGY
Name of the faculty member	MS. NANDHINI N
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	23A, CHOWTTAHALLI PO-VILL
Line 2	KAVERIPATTINAM-VIA, 635112
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 9443504581
Email	NANDHINI065@GMAIL.COM
Gender	FEMALE
Community	MBC
PAN Number	BEBPN4194Q
Passport Number	
Aadhar Number	278184942214
Faculty code given by C.O.E.	6125072
Faculty code given by A.I.C.T.E.	3225418708
Date of Birth	21-11-1991
Age	32
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.TECH.	INFORMATION TECHNOLOGY	2013	KONGU ENGINEERING COLLEGE (AUTONOMOUS)	ANNA UNIVERSITY	75.9	FIRST CLASS	<input checked="" type="checkbox"/>
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2015	ER PERUMAL MANIMEKALAI COLLEGE OF ENGINEERING	ANNA UNIVERSITY	74.5	FIRST CLASS	<input checked="" type="checkbox"/>

* 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	22-10-2021	11-02-2023	1	3	21
SRI VENKATESHWARA INSTITUTE OF ENGINEERING	ASSISTANT PROFESSOR	14-07-2016	18-01-2019	2	6	5
Total				3	9	0

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)
		3	250	

It is certified that all the information provided are true to the best of my knowledge.



Signature of the Faculty : _____

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-PHYSICS
Name of the faculty member	MR. ASHOK CHAKKARAVARTHI S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	41/15 NORTH MUTHAPPER STREET
Line 2	TIRUPATTUR
District	VELLORE
Telephone number	-
Mobile number	+91 - 9865836246
Email	ASHOK.PSV@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AVRPA4375L
Passport Number	
Aadhar Number	624488897818
Faculty code given by C.O.E.	6118001
Faculty code given by A.I.C.T.E.	462027983
Date of Birth	30-06-1981
Age	41
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	2002	OTHERS - SACRED HEART COLLEGE	UNIVERSITY OF MADRAS	68	FIRST CLASS	
P.G.	M.SC.	OTHERS - PHYSICS	2006	OTHERS - SACRED HEART COLLEGE	THIRUVALLUVAR UNIVERSITY	71	FIRST CLASS	
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - PHYSICS	2008	OTHERS - BHARATH IDASAN UNIVERSITY	BHARATH IDASAN UNIVERSITY	72	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	02-07-2008	22-05-2022	13	10	21
Total				13	10	26

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)
7				

It is certified that all the information provided are true to the best of my knowledge.

Signature of the Faculty :



Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. BHUVANESH KUMAR T
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	KAPPALVADI VILLAGE, VENKATASAMUTHIRAM POST , BARGUR VIA,
Line 2	KRISHANGIRI - 635104
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 9786885959
Email	THIRUBHUVANESH@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	ARZPB9832H
Passport Number	
Aadhar Number	980681823698
Faculty code given by C.O.E.	6118055
Faculty code given by A.I.C.T.E.	485297345
Date of Birth	03-07-1985
Age	37
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.E.	MECHANICAL ENGINEERING	2007	JAYAM COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	76	DISTINCTION	
P.G.	M.E.	ENGINEERING DESIGN	2011	OTHERS - KARPAGAM UNIVERSITY	OTHERS - KARPAGAM UNIVERSITY	75.29	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
DR N G P INSTITUTE OF TECHNOLOGY (AUTONOMOUS)	OTHERS - LECTURER	04-06-2007	25-07-2009	2	1	22
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	02-05-2011	23-05-2022	11	0	22
Total				13	2	14

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) 2	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 :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.E.-GENERAL ENGINEERING
Name of the faculty member	MRS. NEERAJA A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	NO.302/B,RAILWAY COLONY
Line 2	JOLARPETTAI,635851
District	VELLORE
Telephone number	-
Mobile number	+91 - 9486064909
Email	ASNEERAJA.IT@GMAIL.COM
Gender	FEMALE
Community	OC
PAN Number	AUGPN7914A
Passport Number	
Aadhar Number	237083033757
Faculty code given by C.O.E.	6118087
Faculty code given by A.I.C.T.E.	12188988070
Date of Birth	04-07-1981
Age	42
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.TECH.	INFORMATION TECHNOLOGY	2010	ARUNAI ENGINEERING COLLEGE	ANNA UNIVERSITY	81.72	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2013	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	8.33	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	16-08-2013	22-05-2022	8	9	7
OTHERS - KUPPAM ENGINEERING COLLEGEKUPPAM	ASSISTANT PROFESSOR	01-07-2010	30-04-2011	0	9	31
Total				9	7	12

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 :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.E.-CIVIL ENGINEERING
Name of the faculty member	MRS. KOKILA S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1/386 THIRUMALAI NAGAR ARTS COLLEGE BACK SIDE KRISHNAGIRI
Line 2	KRISHNAGIRI- 635001
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 9789989178
Email	KOKILAPRABHU06@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	LETPS9358M
Passport Number	
Aadhar Number	259196386833
Faculty code given by C.O.E.	6118292
Faculty code given by A.I.C.T.E.	10546203008
Date of Birth	10-06-1986
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.E.	CIVIL ENGINEERING	2017	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.16	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2020	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	8.14	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	01-09-2021	24-02-2022	0	5	24
Total				0	5	26

V. Industrial Experience :

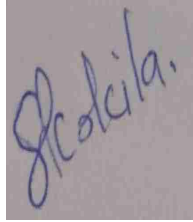
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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.

A handwritten signature in blue ink, appearing to read "S. K. K. K.", is written on a light-colored background.

Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	COMPUTER SCIENCE AND ENGINEERING
Name of the Degree & Course	B.E.-GENERAL ENGINEERING
Name of the faculty member	MS. KALAIMAGAL G
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	18/34 AMBETHKAR NAGAR 4TH CROSS
Line 2	KRISHNAGIRI - 635001
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 9677378859
Email	KALAIMAGALESK@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	EAVPK2328L
Passport Number	
Aadhar Number	770770105876
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	03-10-1994
Age	28
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.E.	COMPUTER SCIENCE AND ENGINEERING	2016	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	73	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2018	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.9	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	28-03-2022	22-05-2022	0	1	26
Total				0	1	26

V. Industrial Experience :

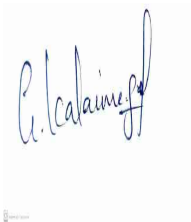
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days


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.

A handwritten signature in blue ink, appearing to read "C. Calaming". The signature is written in a cursive style with a large initial "C" and a long, sweeping tail.

Signature of the Faculty : 

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.E.-ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the faculty member	MRS. KAVIPRIYA S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	D/O H.SAMRAJ,VARATTANAPALLI VILL /POST
Line 2	KRISHNAGIRI-635120
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 9942923750
Email	KAVIPRIYASAMRAJ@GMAIL.COM
Gender	FEMALE
Community	MBC
PAN Number	BXZPK5614D
Passport Number	
Aadhar Number	922505423464
Faculty code given by C.O.E.	6118080
Faculty code given by A.I.C.T.E.	485297277
Date of Birth	22-07-1989
Age	32
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.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2010	ADHIYAM AAN COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	73	FIRST CLASS	
P.G.	M.E.	COMMUNICATION SYSTEMS	2013	VARUVAN VADIVELAN INSTITUTE OF TECHNOLOGY	ANNA UNIVERSITY	8.07	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	21-06-2013	02-02-2021	7	7	12
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	OTHERS - LECTURER	09-06-2010	31-07-2011	1	1	22
Total				8	9	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)	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 :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
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. BENEDICT CASSINO F
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	4/93 ELATHAGIRI BARGUR
Line 2	KRISHNAGIRI - 635108
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 9003489923
Email	BENEDICTCASSINO77@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	CMVPB7682L
Passport Number	
Aadhar Number	612700043732
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	26-06-1995
Age	27
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.E.	ELECTRICAL AND ELECTRONICS ENGINEERING	2016	D M I COLLEGE OF ENGINEERING	ANNA UNIVERSITY	59.8	SECOND CLASS	
P.G.	M.B.A.	MASTER OF BUSINESS ADMINISTRATION	2019	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	76.5	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	03-01-2022	22-05-2022	0	4	20
Total				0	4	22

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.

A handwritten signature in black ink, appearing to be 'J. Kemp', is centered within a light gray rectangular box.

Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. ARUN KUMAR G
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	102 REDDIYUR, NIMMIYAMPATTU
Line 2	VANIYAMBADI
District	VELLORE
Telephone number	-
Mobile number	+91 - 9025521152
Email	ARUNGOPI102@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	ATHPA3770F
Passport Number	
Aadhar Number	496681293783
Faculty code given by C.O.E.	5118007
Faculty code given by A.I.C.T.E.	2635164463
Date of Birth	10-06-1987
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.E.	MECHANICAL ENGINEERING	2009	PRIYADARSHINI ENGINEERING COLLEGE	ANNA UNIVERSITY	82	FIRST CLASS	
P.G.	M.E.	ENGINEERING DESIGN	2012	OTHERS - STPETERS UNIVERSITY CHENNAI	OTHERS - ST PETERS UNIVERSITY CHENNAI	8.2	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	15-06-2015	23-05-2022	6	11	9
G G R COLLEGE OF ENGINEERING	OTHERS - LECTURER	15-06-2009	30-06-2010	1	0	16
PODHIGAI COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	02-04-2012	03-06-2015	3	2	2
Total				11	1	28

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**

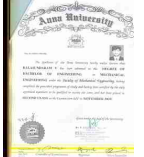
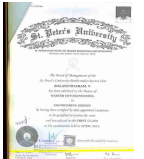
AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
		3	200	

It is certified that all the information provided are true to the best of my knowledge.



Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. BALASUNDARAM V
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	MOTTUR VILLAGE
Line 2	KANDILI POST 635901
District	VELLORE
Telephone number	-
Mobile number	+91 - 9655688766
Email	ABSUNDAR008@GMAIL.COM
Gender	MALE
Community	MBC
PAN Number	BBYPV1601E
Passport Number	
Aadhar Number	640097430992
Faculty code given by C.O.E.	6118103
Faculty code given by A.I.C.T.E.	2189114273
Date of Birth	03-06-1987
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.E.	MECHANICAL ENGINEERING	2010	PRIYADARSHINI ENGINEERING COLLEGE	ANNA UNIVERSITY	63	SECOND CLASS	
P.G.	M.E.	ENGINEERING DESIGN	2013	OTHERS - ST PETERS UNIVERSITY	OTHERS - ST PETERS UNIVERSITY	75	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
SRI VENKATESHWARA INSTITUTE OF ENGINEERING	ASSISTANT PROFESSOR	11-11-2010	30-07-2011	0	8	19
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	05-06-2013	23-05-2022	8	11	19
Total				9	8	12

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)
		3	200	

It is certified that all the information provided are true to the best of my knowledge.



Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-MATHEMATICS
Name of the faculty member	MRS. BHAVANI D
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	14 MGR NAGAR KARUPANOOR ROAD
Line 2	TIRUPATTUR
District	VELLORE
Telephone number	-
Mobile number	+91 - 9080231250
Email	BHAVANIPSV@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	CETPB4188P
Passport Number	
Aadhar Number	373833178189
Faculty code given by C.O.E.	6118110
Faculty code given by A.I.C.T.E.	2184464243
Date of Birth	22-04-1984
Age	38
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 - MATHEMATICS	2004	OTHERS - GOVT TIRUMAGAL MILLS COLLEGE	UNIVERSITY OF MADRAS	73	FIRST CLASS	
P.G.	M.SC.	OTHERS - MATHEMATICS	2006	OTHERS - GOVT TIRUMAGAL MILLS COLLEGE	THIRUVALLUVAR UNIVERSITY	89	FIRST CLASS	
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - MATHS	2007	OTHERS - SACRED COLLEGE	THIRUVALLUVAR UNIVERSITY	86	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
ADHIYAMAAN COLLEGE OF ENGINEERING (AUTONOMOUS)	OTHERS - LECTURER	24-09-2007	23-03-2008	0	5	30
SRI NANDHANAM COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	19-08-2009	28-06-2013	3	10	10
ADHIYAMAAN COLLEGE OF ENGINEERING (AUTONOMOUS)	OTHERS - LECTURER	16-06-2008	30-04-2009	0	10	15
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	10-07-2013	22-05-2022	8	10	13
Total				14	1	10

V. Industrial Experience :

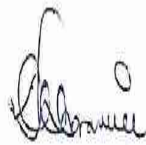
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

VI. C.O.E. Appointment Experience :


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



AUR (No. of days) 7	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 :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECH.-INFORMATION TECHNOLOGY
Name of the faculty member	MRS. RIZVANA M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	4/11, KRISHNAGIRI MAIN ROAD, KANDILI POST,
Line 2	VELLORE, 635901
District	VELLORE
Telephone number	-
Mobile number	+91 - 9443774284
Email	RIZVANAIT@GMAIL.COM
Gender	FEMALE
Community	OTHERS - BCM
PAN Number	BLAPR2917M
Passport Number	
Aadhar Number	771967743245
Faculty code given by C.O.E.	6118062
Faculty code given by A.I.C.T.E.	1767263420
Date of Birth	26-03-1986
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.TECH.	INFORMATION TECHNOLOGY	2007	BHARATHIDASAN ENGINEERING COLLEGE	ANNA UNIVERSITY	72	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2011	SAPTHAGIRI COLLEGE OF ENGINEERING	ANNA UNIVERSITY	8.3	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
PRIYADARSHINI ENGINEERING COLLEGE	OTHERS - LECTURER	16-07-2008	20-11-2009	1	4	5
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	13-06-2011	22-05-2022	10	11	10
SARASWATHI VELU COLLEGE OF ENGINEERING	OTHERS - LECTURER	04-07-2007	04-07-2008	1	0	1
Total				13	3	18

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)
		3	250	

It is certified that all the information provided are true to the best of my knowledge.



Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	COMPUTER SCIENCE AND ENGINEERING
Name of the Degree & Course	B.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MR. PRAKASH NARAYANAN C
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3/12 TPT MAIN ROAD SIGRALAPALLI POST, BARUGUR
Line 2	KRISHNAGIRI
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 9442371910
Email	CPRAKASHMCA@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BNAPP7141R
Passport Number	
Aadhar Number	266042470743
Faculty code given by C.O.E.	6118069
Faculty code given by A.I.C.T.E.	1462028011
Date of Birth	01-08-1982
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.	OTHERS - MCA	OTHERS - COMPUTER APPLICATIONS	2007	K S RANGASAMY COLLEGE OF TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	77	DISTINCT ION	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2010	ADHIYAMMAN COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	84	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	14-06-2010	22-05-2022	11	11	9
SAPTHAGIRI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	04-06-2007	27-06-2008	1	0	24
Total				13	0	3

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)
		2	150	

It is certified that all the information provided are true to the best of my knowledge.



Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	COMPUTER SCIENCE AND ENGINEERING
Name of the Degree & Course	B.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MRS. ANITHA D
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	16,SAVADI PILLAIYAR KOVIL STREET,KARIMANGALAM
Line 2	DHARMAPURI,636701
District	DHARMAPURI
Telephone number	-
Mobile number	+91 - 9442583380
Email	ANISEKARSAI2009@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	AQHPA5743M
Passport Number	
Aadhar Number	276063421191
Faculty code given by C.O.E.	6118120
Faculty code given by A.I.C.T.E.	12295368229
Date of Birth	05-03-1983
Age	39
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.E.	COMPUTER SCIENCE AND ENGINEERING	2006	JAYAM COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	73	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2008	M KUMARASAMY COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	83	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
JAYAM COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	20-06-2012	23-04-2014	1	10	4
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	02-07-2014	22-05-2022	7	10	21
SELVAM COLLEGE OF TECHNOLOGY	OTHERS - LECTURER	02-06-2008	29-10-2009	1	4	28
Total				11	1	25

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)
----------------------------------	---	--	--	---

It is certified that all the information provided are true to the best of my knowledge.

Signature of the Faculty :



Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.E.-ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the faculty member	MRS. MOHANA M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	2/52,PONGAMPATTI
Line 2	BARUR,POCHAMPALLI,KRISHNAGIRI.
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 9003464781
Email	M.MOHANA.BE@GMAIL.COM
Gender	FEMALE
Community	MBC
PAN Number	CAGPM5791J
Passport Number	
Aadhar Number	795322780817
Faculty code given by C.O.E.	6125079
Faculty code given by A.I.C.T.E.	3226151839
Date of Birth	22-05-1991
Age	32
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.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2012	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	75	FIRST CLASS	<input checked="" type="checkbox"/>
P.G.	M.E.	VLSI DESIGN	2014	SHREENIVASA ENGINEERING COLLEGE	ANNA UNIVERSITY	75	FIRST CLASS	<input checked="" type="checkbox"/>

* 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	31-03-2021	23-05-2022	1	1	24
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	07-07-2014	30-06-2016	1	11	25
SRI VENKATESHWARA INSTITUTE OF ENGINEERING	ASSISTANT PROFESSOR	02-07-2016	18-01-2019	2	6	17
Total				5	8	10

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 :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	COMPUTER SCIENCE AND ENGINEERING
Name of the Degree & Course	B.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MRS. JANSI RANI T
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	GURUTHOTTANUR VILLAGE POOVATHI
Line 2	KRISHNAGIRI 635122
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 8940972395
Email	JANSIRANI1890@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	CTHOE6437Y
Passport Number	
Aadhar Number	664272363063
Faculty code given by C.O.E.	6125075
Faculty code given by A.I.C.T.E.	3010755719
Date of Birth	11-02-1990
Age	32
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.TECH.	INFORMATION TECHNOLOGY	2012	VIVEKANANDA INSTITUTE OF ENGINEERING AND TECHNOLOGY FOR WOMEN	ANNA UNIVERSITY	7.4	FIRST CLASS	<input type="checkbox"/>
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2015	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	8.1	FIRST CLASS	<input type="checkbox"/>

* 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	28-03-2022	12-04-2022	0	0	16
SRI VENKATESHWARA INSTITUTE OF ENGINEERING	ASSISTANT PROFESSOR	04-07-2016	18-01-2019	2	6	15
Total				2	7	4

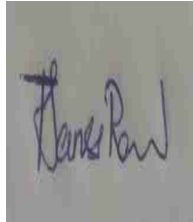
V. Industrial Experience :


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 :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	M.E.-EMBEDDED SYSTEM TECHNOLOGIES
Name of the faculty member	MR. PRAKASAM L
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1/132,KOVIL STREET,MADHANACHERI VILLAGE
Line 2	VANIYAMBADI TK,VELLORE-635754
District	VELLORE
Telephone number	-
Mobile number	+91 - 8667391184
Email	TLSPRAKASAM@GMAIL.COM
Gender	MALE
Community	MBC
PAN Number	BKTTP9148L
Passport Number	NIL
Aadhar Number	879657366905
Faculty code given by C.O.E.	5127238
Faculty code given by A.I.C.T.E.	17375108941
Date of Birth	04-06-1989
Age	33
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.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2010	GOVERNMENT COLLEGE OF ENGINEERING BARGUR (AUTONOMOUS)	ANNA UNIVERSITY	76	FIRST CLASS	
P.G.	M.E.	APPLIED ELECTRONICS	2013	OTHERS - REGIONAL CAMPUS ANNA UNIVERSITY COIMBATORE	ANNA UNIVERSITY	7.4	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
SRI NANDHANAM COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	21-06-2013	12-12-2016	3	5	22
GOVERNMENT COLLEGE OF ENGINEERING BARGUR (AUTONOMOUS)	OTHERS - LECTURER	15-09-2010	16-09-2011	1	0	2
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	14-06-2019	23-05-2022	2	11	10
SRI BALAJI CHOCKALINGAM ENGINEERING COLLEGE	ASSISTANT PROFESSOR	05-01-2017	13-06-2019	2	5	9
Total				9	10	18

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


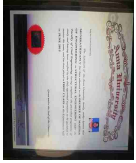
AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
		2	200	

It is certified that all the information provided are true to the best of my knowledge.

L. Pradeepam

Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.E.-CIVIL ENGINEERING
Name of the faculty member	MRS. MUNIRATHINAM V
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	4/169 MADHAGIRI
Line 2	JITTANDAHALLI PALACODE 636805
District	DHARMAPURI
Telephone number	-
Mobile number	+91 - 8523989929
Email	MUNICIVIL92@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BVPPM7155R
Passport Number	
Aadhar Number	295637620748
Faculty code given by C.O.E.	6118159
Faculty code given by A.I.C.T.E.	12903926539
Date of Birth	10-01-1992
Age	29
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.E.	CIVIL ENGINEERING	2013	JAYAM COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	78	FIRST CLASS	
P.G.	B.E.	OTHERS - STRUCTURAL ENGINEERING	2015	THE KAVERI COLLEGE OF ENGINEERING	ANNA UNIVERSITY	81.5	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	27-07-2015	30-01-2021	5	6	4
Total				5	6	7

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)
		2	425	

It is certified that all the information provided are true to the best of my knowledge.

A handwritten signature in blue ink, appearing to read "V. Manoj F", is centered within a rectangular box.

Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.E.-CIVIL ENGINEERING
Name of the faculty member	MS. PAVITHRA S G
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	22 PHASE-II TNHB THIRUPATTUR
Line 2	THIRUPATTUR - 635601
District	TIRUPATHUR
Telephone number	-
Mobile number	+91 - 9944377909
Email	PAVITHRASG.29@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	CNGPP8410E
Passport Number	
Aadhar Number	943819443896
Faculty code given by C.O.E.	6118293
Faculty code given by A.I.C.T.E.	10546203014
Date of Birth	29-07-1996
Age	26
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.TECH.	OTHERS - CIVIL ENGINEERING	2017	OTHERS - KARUNYA UNIVERSITY	OTHERS - KARUNYA UNIVERSITY	7.33	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2020	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.93	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	01-09-2021	02-02-2022	0	5	2
Total				0	5	4

V. Industrial Experience :

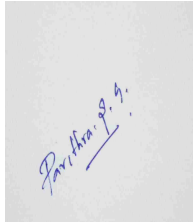
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of 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)
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It is certified that all the information provided are true to the best of my knowledge.

Signature of the Faculty :



Dr. Asha S. G.

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-ENGLISH
Name of the faculty member	MRS. LEENA ROSALINE C
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3/292, KANDIKUPPAM - POST
Line 2	KRISHNAGIRI - 635108
District	KRISHNAGIRI
Telephone number	04343 - 268112
Mobile number	+91 - 8754618072
Email	LEENA.PSV@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	AIRPL7736K
Passport Number	
Aadhar Number	328392684443
Faculty code given by C.O.E.	6118012
Faculty code given by A.I.C.T.E.	462027947
Date of Birth	22-05-1984
Age	38
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	2005	OTHERS - AUXILIUM COLLEGE VELLORE	UNIVERSITY OF MADRAS	53	SECOND CLASS	
P.G.	OTHERS - M.A	OTHERS - ENGLISH	2008	OTHERS - AUXILIUM COLLEGE VELLORE	THIRUVALLUVAR UNIVERSITY	59	SECOND CLASS	
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - ENGLISH	2009	OTHERS - KARUNYA UNIVERSITY	OTHERS - KARUNYA UNIVERSITY	73	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	12-01-2011	22-05-2022	11	4	11
Total				11	4	13

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)
		3		

It is certified that all the information provided are true to the best of my knowledge.



Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	BIO-MEDICAL
Name of the Degree & Course	B.E.-BIOMEDICAL ENGINEERING
Name of the faculty member	MRS. VENNILA V
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	5/146-6 THIRUVAR NAGAR 1ST CROSS
Line 2	KRISHNAGIRI-635001
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 8760205548
Email	VENNIECE08@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BCCPV0797A
Passport Number	
Aadhar Number	507916454715
Faculty code given by C.O.E.	6118225
Faculty code given by A.I.C.T.E.	7659576149
Date of Birth	10-05-1991
Age	32
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.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2012	MAHENDRA ENGINEERING COLLEGE FOR WOMEN	ANNA UNIVERSITY	7.97	FIRST CLASS	
P.G.	M.E.	VLSI DESIGN	2014	PAVAI COLLEGE OF TECHNOLOGY	ANNA UNIVERSITY	8.10	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	10-06-2015	23-05-2022	6	11	14
Total				6	11	19

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 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)
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It is certified that all the information provided are true to the best of my knowledge.



Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the Degree & Course	B.E.-ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the faculty member	MRS. SANKARALAKSHMI M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1/7, SHIVAJI NAGAR, AGRAHARAM
Line 2	KRISHNAGIRI - 635001
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 8148822530
Email	LAKSHMIRAO2005@GMAIL.COM
Gender	FEMALE
Community	OC
PAN Number	BEAPS0294H
Passport Number	
Aadhar Number	632136417209
Faculty code given by C.O.E.	6118134
Faculty code given by A.I.C.T.E.	765990253
Date of Birth	29-05-1983
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.E.	ELECTRICAL AND ELECTRONICS ENGINEERING	2004	OTHERS - NOORUL ISLAM COLLEGE OF ENGINEERING	MANOMANIAM SUNDARAR UNIVERSITY	74	FIRST CLASS	
P.G.	M.E.	POWER SYSTEMS ENGINEERING	2014	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	8.26	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
ER PERUMAL MANIMEKALAI COLLEGE OF ENGINEERING	OTHERS - LECTURER	20-07-2007	05-05-2008	0	9	17
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	OTHERS - LECTURER	13-06-2011	31-08-2012	1	2	18
P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	02-07-2014	03-02-2023	8	7	2
Total				10	7	11

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 :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.E.-CIVIL ENGINEERING
Name of the faculty member	MR. VIJAY S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	219 PONNIYAMMAN KOIL STREET ALAMKUPPAM
Line 2	AMBUR - 635814
District	VELLORE
Telephone number	-
Mobile number	+91 - 7010339842
Email	SVIJAYAMBUR@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AWEPV7685A
Passport Number	
Aadhar Number	458352969644
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	02-06-1995
Age	27
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.E.	CIVIL ENGINEERING	2018	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.6	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2021	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	8.79	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	05-01-2022	23-05-2022	0	4	19
Total				0	4	21

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

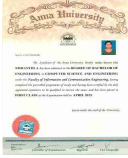

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of my knowledge.

A handwritten signature in blue ink, appearing to be 'S. V. V.', is centered within a rectangular box. The signature is written in a cursive style.

Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	COMPUTER SCIENCE AND ENGINEERING
Name of the Degree & Course	B.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MRS. NISHANTHI A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	SOLAIYUR VILLAGE ,PERIYAKOTTKULAM PO
Line 2	UTHANGARAI TK
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 9962010883
Email	NISHANTHISHREE91@GMAIL.COM
Gender	FEMALE
Community	MBC
PAN Number	BJDPT4458G
Passport Number	
Aadhar Number	663653471151
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	3590726103
Date of Birth	02-06-1990
Age	32
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.E.	COMPUTER SCIENCE AND ENGINEERING	2015	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.55	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2017	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.91	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	04-12-2017	22-05-2022	4	5	19
Total				4	5	21

V. Industrial Experience :

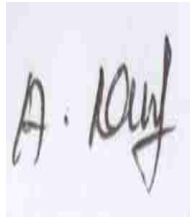
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

VI. C.O.E. Appointment Experience :

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


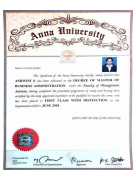
AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)

It is certified that all the information provided are true to the best of my knowledge.

A handwritten signature in black ink on a light blue rectangular background. The signature appears to be 'A. King'.

Signature of the Faculty :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
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	MS. ASHWINI S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3 BR GOVINDACHETTY STREET BARGUR
Line 2	KRISHNAGIRI - 635104
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 9025642260
Email	SASHWINI31995@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	MQRPS6177D
Passport Number	
Aadhar Number	524478565014
Faculty code given by C.O.E.	6118289
Faculty code given by A.I.C.T.E.	110608361231
Date of Birth	03-12-1995
Age	27
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 - ELECTRONICS AND COMMUNICATION	2016	OTHERS - GOV ARTS AND SCINCE COLLEGE BARGUR	PERIYAR UNIVERSITY	8.7	DISTINCTION	
P.G.	M.B.A.	MASTER OF BUSINESS ADMINISTRATION	2018	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	8.24	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	01-09-2021	22-05-2022	0	8	22
Total				0	8	26

V. Industrial Experience :

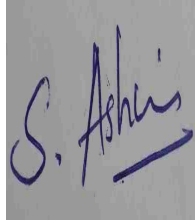
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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 :

Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the Degree & Course	B.E.-GENERAL ENGINEERING
Name of the faculty member	MR. GOPINATH K
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3/234,AMMAN ILLAM, MAIN ROAD ,MALLAPADI POST, BARGUR TALUK
Line 2	KRISHNAGIRI - 635104
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 9698131414
Email	KGOPI85ME@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BRQPG9260C
Passport Number	
Aadhar Number	791807774454
Faculty code given by C.O.E.	6118140
Faculty code given by A.I.C.T.E.	2470488929
Date of Birth	07-06-1985
Age	38
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.E.	ELECTRICAL AND ELECTRONICS ENGINEERING	2010	GOVERNMENT COLLEGE OF ENGINEERING BARGUR (AUTONOMOUS)	ANNA UNIVERSITY	67	FIRST CLASS	
P.G.	M.E.	POWER ELECTRONICS AND DRIVES	2014	PAAVAI COLLEGE OF ENGINEERING	ANNA UNIVERSITY	7.64	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	29-12-2014	03-02-2023	8	1	6
OTHERS - ER PERUMAL MANIMEKALAI POLYTECHNIC COLLGE	OTHERS - LECTURER	05-06-2006	24-07-2012	6	1	20
Total				14	2	27

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
TNEB	TRAINING	MAINTENANCE	03-02-2005	02-02-2006	0	11	28
ASCEPTIC FOOD PRODUCTS	ENGINEER	MAINTENANCE	01-11-2003	25-01-2005	1	2	25
Total					2	2	23

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)
7		4	100	

It is certified that all the information provided are true to the best of my knowledge.

Signature of the Faculty :



Name of the College	6118 - P S V COLLEGE OF ENGINEERING AND TECHNOLOGY
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECH.-INFORMATION TECHNOLOGY
Name of the faculty member	MRS. DIVYA G
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1/444 VELAKALNATHAM, NATRAMPALLI
Line 2	VELLORE 635 854
District	VELLORE
Telephone number	-
Mobile number	+91 - 9003874938
Email	IMCOOL.DIVYAGOVIND@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	CKLPS9833A
Passport Number	
Aadhar Number	944781376265
Faculty code given by C.O.E.	6118216
Faculty code given by A.I.C.T.E.	17672514757
Date of Birth	25-09-1990
Age	32
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.TECH.	INFORMATION TECHNOLOGY	2012	RANIPETT AI ENGINEERING COLLEGE	ANNA UNIVERSITY	77	FIRST CLASS	
P.G.	M.TECH.	INFORMATION TECHNOLOGY	2016	P S V COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	80	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	19-12-2016	22-05-2022	5	5	4
Total				5	5	6

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 :

A handwritten signature in black ink, appearing to be 'G. R. Singh', is written on a light-colored rectangular background.

