




Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.E.-CIVIL ENGINEERING
Name of the faculty member	MS. KRISHNA RAMA B
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	13 A, VILLATHI VILLAI, PAZHA VILLAI, P.O
Line 2	KANYAKUMARI-629501
District	KANYAKUMARI
Telephone number	0 - 0
Mobile number	+91 - 9842585937
Email	RAMARATHI2012@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	CCCOP4843H
Passport Number	
Aadhar Number	264534698496
Faculty code given by C.O.E.	0
Faculty code given by A.I.C.T.E.	0
Date of Birth	05-07-1985
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.	CIVIL ENGINEERING	2006	AMRITA COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	Y	FIRST CLASS	
P.G.	M.E.	SOIL MECHANICS AND FOUNDATION ENGINEERING	2008	COLLEGE OF ENGINEERING GUINDY	ANNA UNIVERSITY	Y	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	20-05-2009	04-03-2023	13	9	16
Total				13	9	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 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 "B.R. Ranga". The signature is written in a cursive style with a horizontal line underneath the name.

Signature of the Faculty :