Anna University, Chennai
PSN Engineering College - 9523

Consolidated_Report

13.faculty

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	STRUCTURAL ENGINEEERING
Name of the Degree & Course	M.E.-STRUCTURAL ENGINEERING
Name of the faculty member	DR. RAVIKUMAR MS
Regular Or Adjunct	Regular
Image	
Present Designation	PRINCIPAL
Residential Address Line 1	8/82, MSR ILLAM SOUTH THERIVILLAI PUTHALAM
Line 2	629602
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9442077274
Email	RAVIKUMAR_MS@YAHOO.COM
Gender	MALE
Community	BC
PAN Number	AGPPR4644C
Passport Number	
Aadhar Number	272575536708
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	07-06-1975
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.	CIVIL ENGINEERING	1997	OTHERS - THE INDIAN ENGINEERING COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	Y	SECOND CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	1999	OTHERS - ANNAMALAI UNIVERSITY	OTHERS - ANNAMALAI UNIVERSITY	Y	FIRST CLASS	
PH.D.	PH.D.	STRUCTURAL ENGINEERING	2011	OTHERS - SATHYABAMA UNIVERSITY	OTHERS - SATHYABAMA 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 SELF COMPACTING SELF CURING CONCRETE STRUCTURES ELEMENTS WITH POZZOLANIC ADMIXURES
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
PSN ENGINEERING COLLEGE	PRINCIPAL	29-06-2015	03-02-2020	4	7	5
OTHERS - SUN POLYTECHNIC COLLEGE	PRINCIPAL	20-09-2006	30-04-2011	4	7	11
RAJAS ENGINEERING COLLEGE	OTHERS - LECTURER	20-07-2000	24-08-2004	4	1	5
PSN ENGINEERING COLLEGE	PRINCIPAL	15-02-2021	13-05-2023	2	2	27
OTHERS - NOORUL ISLAM UNIVERSITY	PROFESSOR	05-02-2020	12-02-2021	1	0	8
AMRITA COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	03-09-2004	18-09-2006	2	0	16
AMRITA COLLEGE OF ENGINEERING AND TECHNOLOGY	PROFESSOR	02-05-2011	28-06-2013	2	1	27
OTHERS - NOORUL ISLAM UNIVERSITY	PROFESSOR	01-07-2013	25-06-2015	1	11	25
			Total	22	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)

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	DR. JENARIS DS
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	10F-7,SERVITE CONVENT STREET,PUNNAINAGER
Line 2	NAGERCOIL
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9442761028
Email	DSJENARIS27@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	ANFPJ1955K
Passport Number	
Aadhar Number	718167400994
Faculty code given by C.O.E.	9523119
Faculty code given by A.I.C.T.E.	12961416907
Date of Birth	15-07-1972
Age	51
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	GOVERNMENT COLLEGE OF ENGINEERING TIRUNELVELI	ANNA UNIVERSITY	64	SECOND CLASS	
P.G.	M.E.	MANUFACTURING ENGINEERING	2009	C S I INSTITUTE OF TECHNOLOGY	ANNA UNIVERSITY	73	FIRST CLASS	
PH.D.	PH.D.	MECHANICAL ENGINEERING	2019	OTHERS - ST PETERS INSTITUTE OF HIGHER EDUCATION AND RESEARCH	OTHERS - ST PETERS INSTITUTE OF HIGHER EDUCATION AND RESEARCH	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 OF EFFECT OF GROUPING TECHNIQUES AND METHODS IN A DOMESTIC AUTOMATION FLOW
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
PONJESLY COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	06-09-2010	31-10-2015	5	1	25
PSN ENGINEERING COLLEGE	PROFESSOR	02-11-2015	13-05-2023	7	6	12
VINS CHRISTIAN COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	01-06-2009	03-09-2010	1	3	3
			Total	13	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)
20				

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECH.-INFORMATION TECHNOLOGY
Name of the faculty member	DR. VENKATARAMANA K
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	16-468,PANAGAL MAIN ROAD, PANAGAL, SRKALAHASTI
Line 2	517640
District	OTHERS - CHITTOOR
Telephone number	-
Mobile number	+91 - 9908765328
Email	KVRBOOKS@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AAIFV2507P
Passport Number	
Aadhar Number	297437137032
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	28-03-1985
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.TECH.	OTHERS - COMPUTER SCIENCE AND ENGINEERING	2008	OTHERS - SRIKALAHATEESWARA INSTITUTE OF TECHNOLOGY	OTHERS - JNTU UNIVERSITY	66.08	FIRST CLASS	
P.G.	M.TECH.	COMPUTER SCIENCE AND ENGINEERING (5 YEAR INTEGRATED)	2012	OTHERS - SRI VENKATASA PERUMAL COLLEGE OF ENGINEERING TECHNOLOGY	OTHERS - JNTUA UNIVERSITY	77.02	DISTINCTION	
PH.D.	PH.D.	COMPUTER SCIENCE AND ENGINEERING	2017	ANNAMALAI UNIVERSITY	ANNAMALAI UNIVERSITY	7.7		

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION
Score :
File :

II. Title of Ph.D. Thesis	ENHANCE QOS IN MANETS USING ANALYSIS OF CA AOMDV ROUTING PROTOCOL TO SECURE AND RELIABLE FOR MULTIHOPE WIRELESS NETWORK
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
PSN ENGINEERING COLLEGE	PROFESSOR	03-04-2023	15-05-2023	0	1	13
			Total	0	1	13

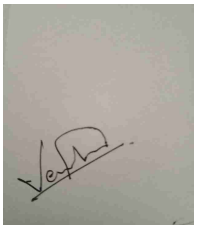
V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
SRI KALAHASTEESWARA INSTITUTE OF TECHNOLOGY	LECTURER	TEACHING	27-05-2008	30-11-2010	2	6	5
SREE INSTITUTE OF TECHNICAL EDUCATION	ASSOSCIATE PROFESSOR	TEACHING	02-07-2016	28-10-2017	1	3	27
ELLENKI COLLEGE OF ENGINEERING TECHNOLOGY	ASSISTANT PROFESSOR	TEACHING	01-06-2012	12-06-2016	4	0	12
				Total	7	10	17

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	9523 - PSN ENGINEERING COLLEGE
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	DR. PON ESAKKI SANGEETHA E
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	7/101 BHARATHIYAR MIDDLE STREET
Line 2	KARUNGULAM POST
District	THOOTHUKUDI
Telephone number	-
Mobile number	+91 - 9659303171
Email	ER.SANGEETHA15213@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	CDRPP0897E
Passport Number	
Aadhar Number	849771929674
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	43387312232
Date of Birth	30-03-1989
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.COM.	COMMERCE	2009	OTHERS - SRI SARADHA COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	73	FIRST CLASS	
P.G.	M.B.A.	MASTER OF BUSINESS ADMINISTRATION	2014	ANNA UNIVESITY REGIONAL CAMPUS, COIMBATORE	ANNA UNIVERSITY	73	FIRST CLASS	
PH.D.	PH.D.	MASTER OF BUSINESS ADMINISTRATION	2020	ANNA UNIVESITY REGIONAL CAMPUS, COIMBATORE	ANNA UNIVERSITY	73		

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I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION
Score :
File :

II. Title of Ph.D. Thesis	A STUDY ON INVESTMENT BEHAVIOUR OF WORKING WOMEN INVESTOR IN FINANCIAL MARKETS WITH SPECIAL REFERENCE TO PERFORMANCE OF SHARE MARKETS IN THOOTHUKUDI DISTRICT
III. Faculty in which Ph.D. was awarded	FACULTY OF MANAGEMENT
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 - WAVOO WAJEETHA WOMENS COLLEGE	ASSISTANT PROFESSOR	03-06-2019	31-03-2020	0	9	28
PSN ENGINEERING COLLEGE	PROFESSOR	01-03-2023	13-05-2023	0	2	13
			Total	1	0	11

V. Industrial Experience :	

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

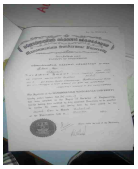
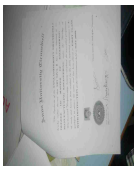
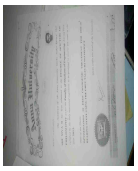
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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)

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL AND AUTOMATION ENGINEERING
Name of the faculty member	DR. SRISIVA R
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	16/23 C, NORTH VIJAY VITAIL
Line 2	EATAMOZHY POST
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9578583027
Email	SRISIVA@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	ABDII5635B
Passport Number	
Aadhar Number	536782584798
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	
Date of Birth	04-12-1982
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.	MECHANICAL ENGINEERING	2003	C S I INSTITUTE OF TECHNOLOGY	MANOMANIAM SUNDARNAR UNIVERSITY	63	FIRST CLASS	
P.G.	M.E.	MANUFACTURING ENGINEERING	2009	C S I INSTITUTE OF TECHNOLOGY	ANNA UNIVERSITY	76	FIRST CLASS	
PH.D.	PH.D.	OTHERS - TREATMENT CRYOGENIC	2013	COLLEGE OF ENGINEERING GUINDY	ANNA UNIVERSITY	80		

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION
Score :
File :

II. Title of Ph.D. Thesis	OPTIMIZATION OF DEEP CRYOGENEIC TREATMENT FOR 100CR6 BEARING STEEL USING THE GREY TAGUCHI TECHONOLOGY
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
PSN ENGINEERING COLLEGE	PROFESSOR	28-01-2019	13-05-2023	4	3	17
LORD JEGANNATH COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	04-05-2009	30-06-2010	1	1	28
LORD JEGANNATH COLLEGE OF ENGINEERING AND TECHNOLOGY	PROFESSOR	01-05-2013	20-02-2015	1	9	20
			Total	7	3	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)

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-MATHEMATICS
Name of the faculty member	DR. DEVARAJAN M
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	82,NAGU PILLAI THOPPU,NEW MAHALIPATTI ROAD
Line 2	MADURAI,625001
District	MADURAI
Telephone number	-
Mobile number	+91 - 9865347340
Email	MDKAUSIK06@YAHOO.CO.IN
Gender	MALE
Community	MBC
PAN Number	BAGPD5871H
Passport Number	
Aadhar Number	999479731168
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	
Date of Birth	24-04-1966
Age	57
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	1987	OTHERS - MKUNIVERSITY	MADURAI KAMARAJ UNIVERSITY	58	SECOND CLASS	Error loading ../up
P.G.	M.SC.	OTHERS - MATHEMATICS	1992	OTHERS - MKUNIVERSITY	MADURAI KAMARAJ UNIVERSITY	59	SECOND CLASS	Error
PH.D.	PH.D.	OTHERS - MATHEMATICS	2014	OTHERS - PRIST UNIVERSITY	OTHERS - PRIST UNIVERSITY	COMMENDED		Error
OTHERS - MPHIL	OTHERS - MPHIL	OTHERS - MATHEMATICS	2001	OTHERS - MK UNIVERSITY	OTHERS - MK UNVERSITY	53	SECOND CLASS	Error

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION
Score :
File :

II. Title of Ph.D. Thesis	A RESEARCH ON COMPARISON OF DIFFERENT PRODUCTION SCHEDULING METHODS AND DEVELOPING NEW SCHEDULING
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
SACS M A V M M ENGINEERING COLLEGE	ASSISTANT PROFESSOR	11-08-2008	31-12-2014	6	4	21
BHARATH NIKETAN ENGINEERING COLLEGE	OTHERS - LECTURER	07-07-2002	25-01-2006	3	6	19
SACS M A V M M ENGINEERING COLLEGE	OTHERS - LECTURER	03-03-1998	28-06-2002	4	3	26
KODAIKANAL INSTITUTE OF TECHNOLOGY	ASSISTANT PROFESSOR	02-02-2006	10-07-2008	2	5	9
K L N COLLEGE OF ENGINEERING (AUTONOMOUS)	ASSOCIATE PROFESSOR	02-01-2015	30-05-2016	1	4	29
PSN ENGINEERING COLLEGE	PROFESSOR	01-06-2022	13-05-2023	0	11	13
K L N COLLEGE OF ENGINEERING (AUTONOMOUS)	PROFESSOR	01-06-2016	30-09-2020	4	3	30
			Total	23	4	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)
9				

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	M.E.-VLSI DESIGN
Name of the faculty member	DR. GAJENDRA KUMAR V
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	49-PEDU NEICKEN STREET
Line 2	SOWCARPET,CHENNAI-79
District	CHENNAI
Telephone number	-
Mobile number	+91 - 9840591303
Email	RAJIGAJENDRA1978@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	CCZPG6066P
Passport Number	
Aadhar Number	313524429654
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	11-01-1978
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.	ELECTRONICS AND COMMUNICATION ENGINEERING	1999	ARULMIGU MEENAKSHI AMMAN COLLEGE OF ENGINEERING	UNIVERSITY OF MADRAS	59	SECOND CLASS	
P.G.	M.E.	APPLIED ELECTRONICS	2001	OTHERS - DR MGR ENGINEERING COLLEGE	UNIVERSITY OF MADRAS	71	FIRST CLASS	
PH.D.	PH.D.	ELECTRONICS AND COMMUNICATION ENGINEERING	2013	OTHERS - MANOMANIAM SUNDARANAR UNIVERSITY	MANOMANIAM SUNDARNAR UNIVERSITY	7.8		

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION
Score :
File :

II. Title of Ph.D. Thesis	IIR FILTER DESIGN USING BILINEAR METHODS
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
OTHERS - VEL MULTTIMEDIA ENGINEERING COLLEGE	ASSISTANT PROFESSOR	20-08-2004	26-06-2006	1	10	7
PSN ENGINEERING COLLEGE	PROFESSOR	11-05-2023	13-05-2023	0	0	3
GOJAN SCHOOL OF BUSINESS AND TECHNOLOGY	ASSISTANT PROFESSOR	03-07-2006	13-12-2008	2	5	11
OTHERS - DR MGR ENGINEERING COLLEGE	OTHERS - LECTURER	02-07-1999	10-08-2004	5	1	9
MEENAKSHI COLLEGE OF ENGINEERING	ASSOCIATE PROFESSOR	02-01-2009	24-09-2014	5	8	23
			Total	15	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)
16		15		

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	M.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	DR. V VENUGOPAL
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	SATHANI STREET
Line 2	KOSAPALAYAM-605103
District	PUDUCHERRY
Telephone number	-
Mobile number	+91 - 8876234541
Email	PRICIPALPSNEC@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BBPPV9225B
Passport Number	
Aadhar Number	797033394558
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	20-06-1974
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.	COMPUTER SCIENCE AND ENGINEERING	1997	OTHERS - BHARATHIYAR UNIVERSITY	BHARATHIYAR UNIVERSITY	64	FIRST CLASS	
P.G.	M.TECH.	COMPUTER SCIENCE AND ENGINEERING (5 YEAR INTEGRATED)	2006	OTHERS - BHARATH UNIVERSITY	OTHERS - BHARATH UNIVERSITY	89	FIRST CLASS	
PH.D.	PH.D.	COMPUTER SCIENCE ENGINEERING	2016	OTHERS - SRM UNIVERSITY	OTHERS - SRM UNIVERSITY	85		

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION
Score :
File :

II. Title of Ph.D. Thesis	AN HIGH EFFICIENCY BREAST CANCER DETECTION USING DEEP LEARNING ALGORITHM
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
LORD AYYAPPA INSTITUTE OF ENGINEERING AND TECHNOLOGY	PROFESSOR	16-06-2009	25-05-2017	7	11	10
ANNAI TERESA COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	16-06-2003	21-05-2008	4	11	6
OTHERS - BRILLIANT GRAMMER SCHOOL EDUCATIONAL SOCITIES GROUP OF INSTITUTIONS HYDERABAD	PROFESSOR	13-06-2017	10-03-2020	2	8	28
PSN ENGINEERING COLLEGE	PROFESSOR	05-05-2023	13-05-2023	0	0	9
			Total	15	7	28

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
JK INFOTECH	PROGRAMMER	PROGRAMMER	16-06-1998	03-04-2000	1	9	18
				Total	1	9	21

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	9523 - PSN ENGINEERING COLLEGE
Name of the Department	AUTOMOBILE ENGINEERING
Name of the Degree & Course	M.E.-AUTOMOBILE ENGINEERING
Name of the faculty member	DR. PRABHU N
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	12/972E/5, SAIBABA COLONY
Line 2	THIGARAJA NAGAR 627011
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9789449362
Email	PRABHUKITS@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	ASYPP4393B
Passport Number	
Aadhar Number	503877161723
Faculty code given by C.O.E.	9523249
Faculty code given by A.I.C.T.E.	13359145492
Date of Birth	29-03-1979
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	2000	GOVERNMENT COLLEGE OF ENGINEERING TIRUNELVELI	MANOMANIAM SUNDARNAR UNIVERSITY	66	FIRST CLASS	
P.G.	M.E.	ENGINEERING DESIGN	2005	GOVERNMENT COLLEGE OF ENGINEERING TIRUNELVELI	ANNA UNIVERSITY	78	FIRST CLASS	
PH.D.	PH.D.	OTHERS - ROBOTICS	2014	OTHERS - NOORUL ISLAM UNIVERSITY	OTHERS - NOORUL ISLAM UNIVERSUTY	Y		

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION
Score :
File :

II. Title of Ph.D. Thesis	FRAMEWORK METHODS FOR DESIGN OPTIMIZATIONOF FIVE AXIS INDUSTRIAL ROBOTS
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
PET ENGINEERING COLLEGE	OTHERS - LECTURER	29-07-2005	02-07-2007	1	11	5
GOVERNMENT COLLEGE OF ENGINEERING TIRUNELVELI	OTHERS - GRADUATE TRAINEE	29-07-2002	28-07-2005	2	11	31
MADHA ENGINEERING COLLEGE	OTHERS - LECTURER	15-08-2000	12-02-2002	1	5	29
OTHERS - KOTTAYAM INSTITUTE OF TECHNOLOGY AND SCIENCE	PRINCIPAL	10-12-2014	31-12-2018	4	0	22
HINDUSTHAN COLLEGE OF ENGINEERING AND TECHNOLOGY(AUTONOMOUS)	ASSISTANT PROFESSOR	04-07-2007	05-05-2009	1	10	2
PSN ENGINEERING COLLEGE	OTHERS - DIRECTOR	02-01-2019	13-05-2023	4	4	12
PSN COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ASSOCIATE PROFESSOR	01-06-2009	09-12-2014	5	6	9
			Total	22	2	23

V. Industrial Experience :

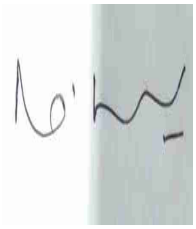
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

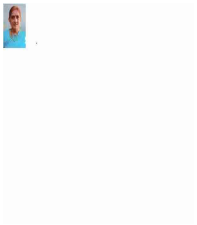
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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)

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

Signature of the Faculty :



Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-ENGLISH
Name of the faculty member	DR. SAVITHRI SUBRAMANIAM S
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	FLAT NO. 1, VIDYA SANKARA APARTMENT, PERUMALPURAM
Line 2	TIRUNELVELI-627070
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9629863822
Email	SAVITHRI1950@GMAIL.COM
Gender	FEMALE
Community	OC
PAN Number	AFPPS5111J
Passport Number	
Aadhar Number	201336292528
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	12488690973
Date of Birth	06-03-1950
Age	70
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	1973	OTHERS - SARAH TUCKER COLLEGE	MADURAI KAMARAJ UNIVERSITY	58	SECOND CLASS	
P.G.	OTHERS - M.A.	OTHERS - ENGLISH	1993	OTHERS - MS UNIVERSITY	MANOMANIAM SUNDARNAR UNIVERSITY	61	FIRST CLASS	
PH.D.	PH.D.	ENGLISH	2011	OTHERS - MS UNIVERSITY	MANOMANIAM SUNDARNAR UNIVERSITY	Y		
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - ENGLISH	1994	OTHERS - MS UNIVERSITY	MANOMANIAM SUNDARNAR 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	MYTH PSYCHOLOGY REALITY INDEPTH STUDY OF EUGENE O NEILLS MAJOR PLACE
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
OTHERS - HOLY CROSS COLLEGE	ASSISTANT PROFESSOR	09-07-1973	30-06-1975	1	11	23
J P COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	01-11-2008	30-04-2009	0	5	30
PSN ENGINEERING COLLEGE	PROFESSOR	01-07-2014	17-03-2020	5	8	17
PSN ENGINEERING COLLEGE	PROFESSOR	01-06-2009	30-01-2012	2	7	29
OTHERS - ST MARYS COLLEGE	ASSISTANT PROFESSOR	01-07-1975	31-05-2008	32	10	31
			Total	43	9	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)
		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	9523 - PSN ENGINEERING COLLEGE
Name of the Department	AUTOMOBILE ENGINEERING
Name of the Degree & Course	B.E.-AUTOMOBILE ENGINEERING
Name of the faculty member	DR. KRISHNAMOORTHY K
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	17 PHASE-2,PIONEER KUMARASAMY NAGAR,PERUMALPURAM
Line 2	PALAYAMKOTTAI-627007
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9488826890
Email	SANGEETHAKRISHNAMOORTHY1972@GMAIL.COM
Gender	MALE
Community	MBC
PAN Number	APVPK2195L
Passport Number	APVPK2195L
Aadhar Number	557037947002
Faculty code given by C.O.E.	9522026
Faculty code given by A.I.C.T.E.	19497087338
Date of Birth	03-12-1972
Age	51
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	GOVERNMENT COLLEGE OF ENGINEERING TIRUNELVELI	MANOMANIAM SUNDARNAR UNIVERSITY	60	FIRST CLASS	
P.G.	M.TECH.	OTHERS - PRODUCTION ENGINEERING	2001	NATIONAL ENGINEERING COLLEGE (AUTONOMOUS)	MANOMANIAM SUNDARNAR UNIVERSITY	64	FIRST CLASS	
PH.D.	PH.D.	MECHANICAL ENGINEERING	2018	LORD JEGANNATH 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	ARTIFICIAL NEURAL NETWORK BASED PREDICTION OF ULTIMATE STRENGTH OF COMPOSITE TENSILE SPECIMEN USING ACOUSTIC EMISSION RMS DATA
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
PSN ENGINEERING COLLEGE	PROFESSOR	14-12-2022	13-05-2023	0	4	31
PSN COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ASSISTANT PROFESSOR	11-07-2005	31-12-2018	13	5	21
PARK COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSOCIATE PROFESSOR	06-09-2019	31-12-2019	0	3	25
J P COLLEGE OF ENGINEERING	PROFESSOR	04-01-2020	11-07-2022	2	6	8
PSN COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	PROFESSOR	02-01-2019	30-04-2019	0	3	30
SARDAR RAJA COLLEGE OF ENGINEERING	OTHERS - LECTURER	01-06-2002	31-05-2005	2	11	30
			Total	20	0	26

V. Industrial Experience :	

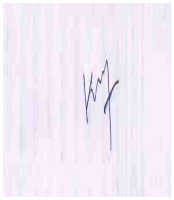
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
CAFAMA AUTO PARTS LTD	PRODUCTION ENGINEER	PRODUCTION	04-06-1994	30-06-2000	6	0	27
				Total	6	0	27

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)

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

Signature of the Faculty :



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	DR. SUKUMAR V N
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	FLAT NO 2,STAFF QUATURES,PSNCET
Line 2	TIRUNELVELI 627152
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9176698299
Email	VNSUKUMAR@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	PKSPS2514N
Passport Number	
Aadhar Number	938725349571
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	15-03-1953
Age	70
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	1975	COLLEGE OF ENGINEERING GUINDY	UNIVERSITY OF MADRAS	68	FIRST CLASS	
P.G.	M.TECH.	OTHERS - SOIL MECHANICS AND FUNDATION ENGINEERING	1997	INDIAN INSTITUTE OF TECHNOLOGY(IIT) - MADRAS	INDIAN INSTITUTE OF TECHNOLOGY MADRAS	63	SECOND CLASS	
PH.D.	PH.D.	CIVIL ENGINEERING	2010	OTHERS - VTU KARNATAKA	OTHERS - VTU KARNATAKA	Y		

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION
Score :
File :

II. Title of Ph.D. Thesis	PASSIVE CONTROL OF HIGH SPEED JED
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
PSN ENGINEERING COLLEGE	PROFESSOR	29-02-2016	13-05-2023	7	2	14
OTHERS - GALGOTIA	PROFESSOR	14-10-2008	06-09-2009	0	10	24
PSN INSTITUTE OF TECHNOLOGY AND SCIENCE	OTHERS - DEAN	12-12-2012	23-12-2015	3	0	12
VELAMMAL COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	PROFESSOR	10-09-2009	11-12-2012	3	3	2
COLLEGE OF ENGINEERING GUINDY	OTHERS - LECTURER	06-06-1977	16-03-1981	3	9	11
OTHERS - SDM COLLEGE OF ENGINEERING	PROFESSOR	01-08-1983	13-10-2008	25	2	13
			Total	43	4	19

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
FOSROC CHEMICAL PVT LIMITED	TECH SERVICE	TRAINING	09-06-1981	19-10-1983	2	4	11
				Total	2	4	12

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	9523 - PSN ENGINEERING COLLEGE
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	DR. JOE ARUN RAJA P
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	319 NATARAJA THEATER ROAD
Line 2	SATTUR-626203
District	VIRUDHUNAGAR
Telephone number	-
Mobile number	+91 - 9942511992
Email	JOEARUNRAJA@YAHOO.COM
Gender	MALE
Community	BC
PAN Number	ASEFJ2548R
Passport Number	
Aadhar Number	248553625472
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1478971907
Date of Birth	02-06-1977
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.SC.	OTHERS - PHYSICS	1997	OTHERS - MKU	MADURAI KAMARAJ UNIVERSITY	78	FIRST CLASS	
P.G.	M.TECH.	OTHERS - COMPUTER AND IT	2005	OTHERS - MS UNIVERSITY	MANOMANIAM SUNDARNAR UNIVERSITY	81	FIRST CLASS	
PH.D.	PH.D.	COMPUTER SCIENCE ENGINEERING	2012	OTHERS - MS UNIVERSITY	MANOMANIAM SUNDARNAR UNIVERSITY	80		

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION
Score :
File :

II. Title of Ph.D. Thesis	PROVISIONING OF ENHANCEMENT ALGORITHM FOR IMAGE APPLICATION TRENDS
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
OTHERS - SSDM COLLEGE	ASSISTANT PROFESSOR	25-07-2006	29-01-2007	0	6	5
OTHERS - ANJAC COLLEGE	ASSISTANT PROFESSOR	15-02-2007	01-02-2011	3	11	15
P S R ENGINEERING COLLEGE (AUTONOMOUS)	ASSISTANT PROFESSOR	12-08-2005	24-02-2006	0	6	13
PSN ENGINEERING COLLEGE	PROFESSOR	02-02-2011	13-05-2023	12	3	12
			Total	17	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)

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.E.-ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the faculty member	DR. MURALIBABU K
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	33,SITHIVINAYAGAR KOIL STREET,BHUVANESWARIPET
Line 2	GUDIYATTAM-632602
District	VELLORE
Telephone number	-
Mobile number	+91 - 9940976170
Email	MAIL2MURALI05@YAHOO.CO.IN
Gender	MALE
Community	BC
PAN Number	ANRPK4552H
Passport Number	
Aadhar Number	545092867372
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	05-06-1980
Age	43
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	2001	OTHERS - VMKV ENGINEERIN COLLEGE	UNIVERSITY OF MADRAS	7.5	FIRST CLASS	
P.G.	M.E.	APPLIED ELECTRONICS	2005	ARULMIGU MEENAKSHI AMMAN COLLEGE OF ENGINEERING	ANNA UNIVERSITY	7.8	FIRST CLASS	
PH.D.	PH.D.	VLSI DESIGN	2016	OTHERS - SATHYABAMA UNIVERSITY	OTHERS - SATHYABAMA UNIVERSITY	8.1		

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION
Score :
File :

II. Title of Ph.D. Thesis	CONZVEX OPTIMIZATION APPROACH TO ULTRA POWER VLSI FLOORPLAN DESIGN
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
PRIYADARSHINI ENGINEERING COLLEGE	OTHERS - LECTURER	11-05-2001	14-07-2003	2	2	4
SRI VENKATESWARA COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSOCIATE PROFESSOR	07-04-2008	24-06-2014	6	2	18
PSN ENGINEERING COLLEGE	PROFESSOR	03-05-2023	13-05-2023	0	0	11
ER PERUMAL MANIMEKALAI COLLEGE OF ENGINEERING	OTHERS - SENIOR LECTURER	02-06-2005	02-04-2008	2	10	1
OTHERS - GANDHI INSTITUTE OF ENGINEERING AND TECHNOLOGY	PROFESSOR	02-02-2019	28-03-2022	3	1	26
PODHIGAI COLLEGE OF ENGINEERING AND TECHNOLOGY	PROFESSOR	01-08-2014	31-01-2018	3	5	31
			Total	17	11	6

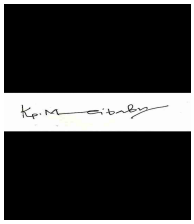
V. Industrial Experience :

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)
18		10		

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.TECH.-AGRICULTURAL ENGINEERING
Name of the faculty member	DR. JEYAKUMAR A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	1/4, MELA THERU , KURUNJAKULAM, TIRUVENGADAM
Line 2	TENKASI, 627719
District	TENKASI
Telephone number	-
Mobile number	+91 - 9443340955
Email	AY.JEYAKUMAR@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AIAPJ4661N
Passport Number	
Aadhar Number	793642823348
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	04-06-1969
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	2003	GOVERNMENT COLLEGE OF ENGINEERING TIRUNELVELI	MANOMANIAM SUNDARNAR UNIVERSITY	64.54	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2007	OTHERS - VINAYAKA MISSIONS UNIVERSITY	OTHERS - VINAYAKA MISSION UNIVERSITY	75	FIRST CLASS	
PH.D.	PH.D.	CIVIL ENGINEERING	2022	OTHERS - NOORUL ISLAM CENTER FOR HIGHER EDUCATION	OTHERS - NOORUL ISLAM CENTER FOR HIGHER EDUCATION	NA		

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION
Score :
File :

II. Title of Ph.D. Thesis	STRENGTHENING OF HIGH PERFORMANCE REINFORCED CEMENT CONCRETE HOLLOW BEAMS USING FIBRE REINFORCED POLYMER LAMINATES
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
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	07-03-2023	13-05-2023	0	2	7
HOLY CROSS ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	03-01-2013	07-06-2019	6	5	5
			Total	6	7	15

V. Industrial Experience :

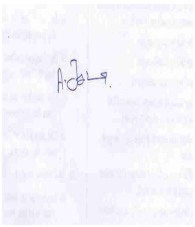
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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)

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

Signature of the Faculty :



Name of the College	9523 - PSN ENGINEERING COLLEGE
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. BABU P
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	942,PARAMARTHALINGA PURAM,MAHADHANAPURAM POST
Line 2	629702
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9003942943
Email	BASANTHJUNE03@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AQBPB3270G
Passport Number	
Aadhar Number	586338943725
Faculty code given by C.O.E.	9523092
Faculty code given by A.I.C.T.E.	1429879751
Date of Birth	15-11-1980
Age	43
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	PSN COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	Y	FIRST CLASS	
P.G.	M.E.	APPLIED ELECTRONICS	2010	PSN COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	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	07-07-2010	02-05-2023	12	9	27
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	03-05-2023	15-05-2023	0	0	13
PSN COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	OTHERS - LECTURER	01-02-2006	30-07-2007	1	5	27
			Total	14	4	9

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				

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
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. HEPSIBA BEULA R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	19/8,CHURCH STREET
Line 2	SANTHOSA PURAM,627115
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9952671974
Email	BUELADEVA430@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	AUUPH3155M
Passport Number	
Aadhar Number	318878989150
Faculty code given by C.O.E.	9523261
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	14-02-1991
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.B.A.	BUSINESS ADMINISTRATION	2011	OTHERS - GOVINDAMMAL ADITANAR COLLEGE FOR WOMEN	MANOMANIAM SUNDARNAR UNIVERSITY	Y	FIRST CLASS	
P.G.	M.B.A.	OTHERS - HR WITH FINANCE	2013	ANNA UNIVESITY REGIONAL CAMPUS, COIMBATORE	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	ASSOCIATE PROFESSOR	12-10-2021	13-05-2023	1	7	2
OTHERS - PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	01-07-2013	11-10-2021	8	3	11
			Total	9	10	18

V. Industrial Experience :	

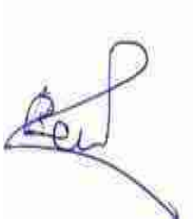
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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)
			1000	1000

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

Signature of the Faculty :



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	11-07-2019	10	1	23
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	12-07-2019	15-05-2023	3	10	4
			Total	13	11	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)

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.TECH.-AGRICULTURAL ENGINEERING
Name of the faculty member	MR. ASHOK KUMARAVEL V K
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	3B, K C NAYANAR STREET, MILITARY LINE, SAMATHANAPURAM
Line 2	TIRUNELVELI-627002
District	TIRUNELVELI
Telephone number	0 -
Mobile number	+91 - 9789943298
Email	ASHOKKUMARAVEL@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	ANGPA2947R
Passport Number	
Aadhar Number	938703554980
Faculty code given by C.O.E.	0
Faculty code given by A.I.C.T.E.	112939845766
Date of Birth	02-10-1985
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	2008	GOVERNMENT COLLEGE OF ENGINEERING TIRUNELVELI	ANNA UNIVERSITY	Y	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2013	ANNA UNIVESITY REGIONAL CAMPUS, MADURAI	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
V V COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	06-12-2013	09-05-2014	1	2	24
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	02-06-2014	28-04-2023	8	10	27
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	02-05-2023	15-05-2023	0	0	14
			Total	10	2	6

V. Industrial Experience :	

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
ITB SEMINTATION INDIA PRILIMITED	ENGINEER	EXECUTION	02-02-2008	31-10-2010	2	8	28
				Total	2	8	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)

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	AUTOMOBILE ENGINEERING
Name of the Degree & Course	B.E.-AUTOMOBILE ENGINEERING
Name of the faculty member	MR. IMMANUEL S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	8, RAMACHANDRA PURAM
Line 2	MAVADI, 627107
District	TIRUNELVELI
Telephone number	00000 - 00000000
Mobile number	+91 - 9789700531
Email	IMANMECH@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	ADBPI5635B
Passport Number	M4505808
Aadhar Number	351814917096
Faculty code given by C.O.E.	9523057
Faculty code given by A.I.C.T.E.	1434127111
Date of Birth	18-03-1982
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.	MECHANICAL ENGINEERING	2003	DR SIVANTHI ADITANAR COLLEGE OF ENGINEERING	MANOMANIAM SUNDARNAR UNIVERSITY	63	FIRST CLASS	
P.G.	M.E.	COMPUTER AIDED DESIGN	2014	ANNA UNIVESITY REGIONAL CAMPUS, TIRUNELVELI	ANNA UNIVERSITY	7.1	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	11-08-2010	13-05-2023	12	9	3
			Total	12	9	7

V. Industrial Experience :	

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
ELTA TOOLS AND DIE PVT LTDPVT	JR ENGINEER	CAD MODELLING	10-10-2006	21-02-2008	1	4	12
GESCO INDIA PVT LTD CHENNAI	JR ENGINEER	CAM PROGRAMMER	01-07-2003	05-10-2006	3	3	5
RAMAKRISHNA ENGINEERING	PRODUCTION MANAGER	SHOP FLOOR INCHARGE	01-03-2008	05-08-2010	2	5	5
				Total	7	0	22

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	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL AND AUTOMATION ENGINEERING
Name of the faculty member	DR. SATISH PANDIAN G
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	3/141, NORTH STREET
Line 2	KOLLANKINAR-PO
District	THOOTHUKUDI
Telephone number	-
Mobile number	+91 - 8667231148
Email	GSPMECH@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	EPIPS6690D
Passport Number	
Aadhar Number	868759564938
Faculty code given by C.O.E.	9225347
Faculty code given by A.I.C.T.E.	2515915997
Date of Birth	03-06-1985
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.TECH.	OTHERS - LEATHER TECHNOLOGY	2007	OTHERS - BHARATH INSTITUTE OF TECHNOLOGY	ANNA UNIVERSITY	6.3	FIRST CLASS	
P.G.	M.E.	INDUSTRIAL ENGINEERING	2010	THIAGARAJAR COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	7.65	FIRST CLASS	
PH.D.	PH.D.	MECHANICAL ENGINEERING	2015	THIAGARAJAR COLLEGE OF ENGINEERING (AUTONOMOUS)	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	MODELS FOR ANALYSIS AND SELECTION SUSTAINABLE PROGRAM A STUDY OF INDIAN MANUFACTURING INDUSTRIES
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
THIAGARAJAR COLLEGE OF ENGINEERING (AUTONOMOUS)	OTHERS - RESEARCH	18-05-2010	31-01-2013	2	8	14
PSN ENGINEERING COLLEGE	PROFESSOR	15-09-2021	13-05-2023	1	7	29
P G P COLLEGE OF ENGINEERING AND TECHNOLOGY	PROFESSOR	01-07-2020	14-09-2021	1	2	14
V S B ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	01-02-2016	30-06-2020	4	4	29
THIAGARAJAR COLLEGE OF ENGINEERING (AUTONOMOUS)	OTHERS - TEACHING ASSOCIATE	01-02-2013	18-09-2015	2	7	18
			Total	12	7	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)
21	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	9523 - PSN ENGINEERING COLLEGE
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MR. MOHANRAJ S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	EAST STREET
Line 2	RETTANAI POST,THINDIVANAM
District	VILLUPURAM
Telephone number	-
Mobile number	+91 - 9842144405
Email	BHARATH_RAJ07@YAHOO.CO.IN
Gender	MALE
Community	BC
PAN Number	AMJPM4065G
Passport Number	
Aadhar Number	721861385986
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1435416091
Date of Birth	26-11-1983
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.	COMPUTER SCIENCE AND ENGINEERING	2005	PSN COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	70	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2007	OTHERS - VMRF UNIVERSITY	OTHERS - VMRF 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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	22-05-2009	01-07-2020	11	1	11
PSN COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ASSISTANT PROFESSOR	13-08-2007	21-05-2009	1	9	9
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	02-07-2020	13-05-2023	2	10	12
			Total	15	9	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)

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECH.-INFORMATION TECHNOLOGY
Name of the faculty member	DR. EDURU NAGARJUNA V
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	3-62,GANDAVARAM, DARGA HARIJANAWADA, GANDAVARAM
Line 2	524317
District	OTHERS - NELLORE
Telephone number	-
Mobile number	+91 - 9908765328
Email	E_NAGROCKS@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AAKFN3932C
Passport Number	
Aadhar Number	722958759571
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	29-12-1986
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.TECH.	INFORMATION TECHNOLOGY	2009	OTHERS - JAWAHARLAL NEHRU TECHNOLOGICAL	OTHERS - JAWARHARLAL NEHRU TECHNOLOGICAL UNIVERSITY	72	FIRST CLASS	
P.G.	M.TECH.	COMPUTER SCIENCE AND ENGINEERING (5 YEAR INTEGRATED)	2011	OTHERS - JAWAHARLAL NEHRU TECHNOLOGICAL	OTHERS - JAWAHARLAL NEHRU TECHNOLOGICAL UNIVERSITY	66.10	FIRST CLASS	
PH.D.	PH.D.	COMPUTER SCIENCE ENGINEERING	2016	OTHERS - HINDUSTAN INSTITUTE OF TECHNOLOGY SCIENCE	OTHERS - HINDUSTAN UNIVERSITY	7.7		

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION
Score :
File :

II. Title of Ph.D. Thesis	DESIGN ANALYSIS OF NOVEL MODIFIED CROSS LAYER CONTROLLER FOR WMSN
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
OTHERS - SHREE INSTITUTE OF TECHNICAL EDUCATION	ASSISTANT PROFESSOR	10-05-2016	30-12-2022	6	7	21
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	05-05-2023	15-05-2023	0	0	11
			Total	6	8	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)

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL AND AUTOMATION ENGINEERING
Name of the faculty member	MR. FRANKLIN MOSES M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	4/83A PURAVASERY THEREKALPUTHUR, NAGERCOIL
Line 2	629901
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9842079728
Email	FRANKLN@REDIFFMAIL.COM
Gender	MALE
Community	BC
PAN Number	AATPF0046Q
Passport Number	
Aadhar Number	423542125693
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU10000
Date of Birth	15-12-1980
Age	43
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	2004	C S I INSTITUTE OF TECHNOLOGY	MANOMANIAM SUNDARNAR UNIVERSITY	64.5	FIRST CLASS	
P.G.	M.E.	MANUFACTURING ENGINEERING	2006	C S I INSTITUTE OF TECHNOLOGY	ANNA UNIVERSITY	61	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
M I E T ENGINEERING COLLEGE	ASSISTANT PROFESSOR	30-11-2011	29-11-2013	1	11	30
FRANCIS XAVIER ENGINEERING COLLEGE (AUTONOMOUS)	ASSISTANT PROFESSOR	27-06-2016	17-11-2016	0	4	21
VINS CHRISTIAN COLLEGE OF ENGINEERING	OTHERS - LECTURER	10-08-2006	23-06-2008	1	10	14
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	05-07-2019	15-05-2023	3	10	11
KALAIVANAR N.S.K COLLEGE OF ENGINEERING (FORMERLY K N S K COLLEGE OF ENGINEERING)	ASSISTANT PROFESSOR	04-12-2013	14-05-2016	2	5	11
UDAYA SCHOOL OF ENGINEERING	OTHERS - LECTURER	03-07-2008	12-11-2011	3	4	10
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	02-01-2017	02-07-2019	2	6	1
			Total	16	5	13

V. Industrial Experience :

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

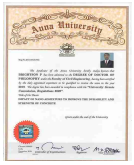
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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)
12				

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

Signature of the Faculty : 

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	DR. P BRIGHTSON
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	AALUVILAI, KNDANVILAI PO KK DIST
Line 2	629810
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9443132823
Email	BRIGHTSONBRIGHT@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BGVPB9724J
Passport Number	
Aadhar Number	309822449845
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	05-06-1984
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.	CIVIL ENGINEERING	2007	SUN COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	75	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2010	R V S COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	80	FIRST CLASS	
PH.D.	PH.D.	CIVIL ENGINEERING	2019	OTHERS - IRTT ERODE	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	IMPACT OF NANO ADMIXTURES TO IMPROVE THE DURABILITY AND STRENGTH OF CONCRETE
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
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	28-10-2022	13-05-2023	0	6	17
SUN COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	21-06-2007	23-11-2008	1	5	3
OTHERS - RAJADHANI INSTITUTE OF ENGINEERING AND TECHNOLOGY	ASSOCIATE PROFESSOR	18-03-2021	18-10-2022	1	7	1
OTHERS - ASHOKA INSTITUTE OF ENGINEERING AND TECHNOLOGY	ASSOCIATE PROFESSOR	03-02-2020	27-02-2021	1	0	25
ARUNACHALA COLLEGE OF ENGINEERING FOR WOMEN	ASSISTANT PROFESSOR	01-07-2010	31-01-2020	9	6	31
			Total	14	2	19

V. Industrial Experience :

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

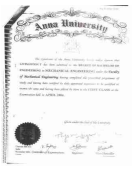
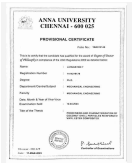
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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)

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	DR. LIVINGSTON T
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	75138 Z, ZION NAGER,
Line 2	TUICKERAMAL PURAM, 627007
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 8870633225
Email	LIVI7323@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AHOPL5459R
Passport Number	
Aadhar Number	433562694135
Faculty code given by C.O.E.	9523068
Faculty code given by A.I.C.T.E.	1728184982
Date of Birth	29-05-1985
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.	MECHANICAL ENGINEERING	2006	DR SIVANTHI ADITANAR COLLEGE OF ENGINEERING	ANNA UNIVERSITY	71	FIRST CLASS	
P.G.	M.E.	MANUFACTURING ENGINEERING	2009	A C T COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	78	FIRST CLASS	
PH.D.	PH.D.	MECHANICAL ENGINEERING	2023	ALAGAPPA CHETTIAR GOVERNMENT COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	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	PROCESSING AND CHARACTERIZATION OF COCONUT SHELL PARTICLES REINFORCED VINYL ESTER COMPOSITES
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
PSN COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ASSISTANT PROFESSOR	11-05-2009	09-10-2011	2	4	30
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	10-10-2011	13-05-2023	11	7	4
			Total	14	0	4

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
VIJEY ELECTRODES AND WIRES PVT LTD	QUALITY CONTROL ENGINEER	QUALITY CHECKING	09-05-2006	07-10-2007	0	10	6
				Total	0	10	10

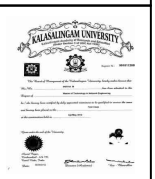
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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	9523 - PSN ENGINEERING COLLEGE
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	M.E.-COMPUTER SCIENCE AND ENGINEERING(WITH SPECIALIZATION IN NETWORKS)
Name of the faculty member	MS. ANITHA M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	7/436A SEETHAKATHI STREET,SAMMANTHAPURAM
Line 2	RAJAPALAYAM-627110
District	VIRUDHUNAGAR
Telephone number	-
Mobile number	+91 - 9944714122
Email	ANITHARANISESI@GMAIL.COM
Gender	FEMALE
Community	MBC
PAN Number	BEDPA5921C
Passport Number	
Aadhar Number	623037990724
Faculty code given by C.O.E.	9523022
Faculty code given by A.I.C.T.E.	11441533482
Date of Birth	14-06-1989
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.	COMPUTER SCIENCE AND ENGINEERING	2010	SOLAMALAI COLLEGE OF ENGINEERING	ANNA UNIVERSITY	76	FIRST CLASS	
P.G.	M.TECH.	OTHERS - NETWORKING	2012	OTHERS - KALASALINGAM UNIVERSITY	OTHERS - KALASALINGAM 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
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	04-06-2022	13-05-2023	0	11	10
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	01-06-2012	03-06-2022	10	0	3
			Total	10	11	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)
10		5	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	9523 - PSN ENGINEERING COLLEGE
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. THANGAPOO A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	51/D,AMMAN KOVIL STREET
Line 2	KURAVERKULAM,627152
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9095581216
Email	THANGAMLOTUS.30@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BCIPT0162M
Passport Number	
Aadhar Number	861937005525
Faculty code given by C.O.E.	9523260
Faculty code given by A.I.C.T.E.	9311059451
Date of Birth	18-03-1991
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.B.A.	BUSINESS ADMINISTRATION	2011	OTHERS - GOVINDAMMAL ADITANAR COLLEGE FOR WOMEN	MANOMANIAM SUNDARNAR UNIVERSITY	Y	FIRST CLASS	
P.G.	M.B.A.	OTHERS - HR AND FINANCE	2013	SCAD COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	Y	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
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	22-06-2021	13-05-2023	1	10	22
OTHERS - PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	03-06-2013	21-06-2021	8	0	19
			Total	9	11	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)
1		3	1000	2000

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	DR. MANOJ ABRAHAM D S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	2/2E9A PONNAPPA NADAR NAGER
Line 2	NAGERCOIL-629004
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9944356354
Email	MANOTH_333@REDIFFMAIL.COM
Gender	MALE
Community	BC
PAN Number	BDAPM0146F
Passport Number	
Aadhar Number	578188907744
Faculty code given by C.O.E.	9523293
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	03-06-1980
Age	43
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	2002	C S I INSTITUTE OF TECHNOLOGY	MANOMANIAM SUNDARNAR UNIVERSITY	61	SECOND CLASS	
P.G.	M.E.	MANUFACTURING ENGINEERING	2009	C S I INSTITUTE OF TECHNOLOGY	ANNA UNIVERSITY	78.5	FIRST CLASS	
PH.D.	PH.D.	MATERIAL SCIENCE AND ENGINEERING	2020	NATIONAL ENGINEERING COLLEGE (AUTONOMOUS)	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	INVESTIGATION OF ACCELERATED AGING EFFECTS IN PHENOLIC ABLATIVE COMPOSITES
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
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	24-11-2021	13-05-2023	1	5	20
PONJESLY COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	08-12-2008	23-06-2014	5	6	16
VINS CHRISTIAN COLLEGE OF ENGINEERING	ASSOCIATE PROFESSOR	07-07-2014	22-12-2014	0	5	16
V V COLLEGE OF ENGINEERING	ASSOCIATE PROFESSOR	05-01-2015	26-12-2016	1	11	22
OTHERS - SATHIYAM COLLEGE OF ENGINEERING	ASSOCIATE PROFESSOR	03-01-2017	05-10-2021	4	9	3
			Total	14	2	20

V. Industrial Experience :

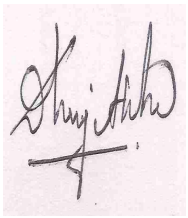
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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)
12				

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

Signature of the Faculty :



Name of the College	9523 - PSN ENGINEERING COLLEGE
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. ROBIN JESUBALAN R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	16,PITCHIVANA STREET
Line 2	PALAYAMCOTTAI,627002
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9943149314
Email	ROBINJESUBALAN@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AZPPR6810B
Passport Number	
Aadhar Number	461110599738
Faculty code given by C.O.E.	9523036
Faculty code given by A.I.C.T.E.	12183393833
Date of Birth	03-09-1969
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.	ELECTRONICS AND COMMUNICATION ENGINEERING	1992	OTHERS - KARUNYA INSTITUTE OF TECHNOLOGY	BHARATHIYAR UNIVERSITY	Y	SECOND CLASS	
P.G.	M.E.	POWER ELECTRONICS AND DRIVES	2010	OTHERS - SATHYABAMA UNIVERSITY	OTHERS - SATHYABAMA 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
HOLY CROSS ENGINEERING COLLEGE	OTHERS - HOD	27-06-2011	12-06-2013	1	11	16
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	12-07-2013	02-03-2023	9	7	22
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	03-05-2023	15-05-2023	0	0	13
INFANT JESUS COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSOCIATE PROFESSOR	01-08-2010	25-06-2011	0	10	25
ST JOHN'S COLLEGE OF ENGINEERING	OTHERS - HOD	01-06-1995	31-07-2010	15	1	30
			Total	27	8	20

V. Industrial Experience :	

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
THE INDIA CEMENTS LTD SANKAR NAGAR TIRUNELVELI	GRADUATE ENGINEER TRAINEE	ADMINISTRATION PRIVE MAINTENANCE	23-08-1993	23-08-1994	1	0	1
				Total	1	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)
4		10		

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	M.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MR. SUDERSINGH K
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	KALLARAPILAI VEEDU
Line 2	THICKURICHY
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9344886617
Email	SUDERSINGH@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	DMWPS9119D
Passport Number	PS9119D0
Aadhar Number	866135619869
Faculty code given by C.O.E.	9523035
Faculty code given by A.I.C.T.E.	1422711133
Date of Birth	04-06-1984
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.	OTHERS - MSC	OTHERS - IT AND ECOMMERCE	2007	OTHERS - VIVEKANANDHA COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	72	FIRST CLASS	
P.G.	M.TECH.	OTHERS - CSE AND IT	2009	OTHERS - MS UNIVERSITY	MANOMANIAM SUNDARNAR 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
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	12-07-2019	15-05-2023	3	10	4
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	10-06-2009	11-07-2019	10	1	2
			Total	13	11	11

V. Industrial Experience :	

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

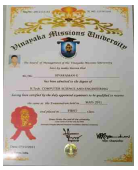
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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)

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	DR. SIVARAMAN G
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	15 A,MANINAYAKAR STREET
Line 2	CHROMEPET-600044
District	CHENNAI
Telephone number	-
Mobile number	+91 - 8803452176
Email	PRICIPALPSNEC@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	FZTPS3856P
Passport Number	
Aadhar Number	776669935934
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	14-01-1989
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.TECH.	OTHERS - COMPUTER SCIENCE AND ENGINEERING	2011	OTHERS - VINAYAKA MISSION UNIVERISTY	OTHERS - VINAYAKA MISSION UNIVERSITY	74	FIRST CLASS	
P.G.	M.TECH.	OTHERS - COMPUTER SCIENCE AND ENGINEERING	2014	OTHERS - BHARATH UNIVERSITY	OTHERS - BHARATH UNIVERSITY	85	DISTINCTION	
PH.D.	PH.D.	COMPUTER SCIENCE ENGINEERING	2019	OTHERS - SRM INSTITUTE OF SCIENCE AND TECHNOLOGY	OTHERS - SRM UNIVERSITY	81		

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION
Score :
File :

II. Title of Ph.D. Thesis	IOT BASED ENERGY EFFICIENT MULTIPATH POWER CONTROL FOR UNDERWATER SENSOR NETWORK
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
OTHERS - SHREE INSTITUTE OF TECHNOLOGY TIRUPATHI	ASSISTANT PROFESSOR	19-05-2011	14-05-2013	1	11	27
OTHERS - VAISHNAVI INSTITUTE OF TECHNOLOGY TIRUPATHI	ASSOCIATE PROFESSOR	16-06-2015	13-05-2021	5	10	28
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	03-04-2023	13-05-2023	0	1	11
			Total	8	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)

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECH.-INFORMATION TECHNOLOGY
Name of the faculty member	MR. LIGIN ARUL JUSTUS M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3-58A KUDUKACHI VILLAI
Line 2	KARUGAL , VILLAVANCODE,KARINKAL
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 8098382346
Email	LIGINARUL@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AZLPL5856H
Passport Number	
Aadhar Number	663013709488
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	
Date of Birth	05-07-1990
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.TECH.	INFORMATION TECHNOLOGY	2012	BETHLAHEM INSTITUTE OF ENGINEERING	ANNA UNIVERSITY	69	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2015	BETHLAHEM INSTITUTE OF ENGINEERING	ANNA 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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	05-02-2020	15-05-2023	3	3	11
			Total	3	3	12

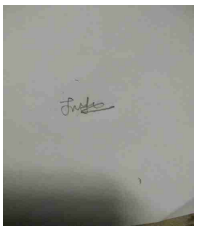
V. Industrial Experience :

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)

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-ENGLISH
Name of the faculty member	MRS. ELIZABETH J
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	209, KURINJI VANA STREET THIRUMAL NAGAR
Line 2	PERUMAL PURAM
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 8220179572
Email	JOSEJERSHA@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	ADMPE6795R
Passport Number	
Aadhar Number	356290552702
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	23-10-1978
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.A.	OTHERS - TAMIL	2011	OTHERS - MSUNIVERSITY	MANOMANIAM SUNDARNAR UNIVERSITY	52.7	SECOND CLASS	
U.G.	B.A.	OTHERS - TAMIL	2014	OTHERS - TAMILNADU TEACHEAR EDUCATION UNIVERSI	OTHERS - TAMILNADU TEACHERS UNIVERSITY	69.7	FIRST CLASS	
P.G.	OTHERS - MA	OTHERS - TAMIL	2016	OTHERS - M S UNIVERSTITY	MANOMANIAM SUNDARNAR UNIVERSITY	65.8	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	26-12-2022	13-05-2023	0	4	19
			Total	0	4	21

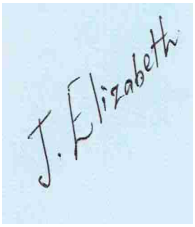
V. Industrial Experience :	

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)

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECH.-INFORMATION TECHNOLOGY
Name of the faculty member	MRS. PETCHITHAI M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	THACHAMOZHI COLONY
Line 2	SATHANKULAM
District	THOOTHUKUDI
Telephone number	-
Mobile number	+91 - 8883270892
Email	PETCHITHAI10@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	FXRPP3540S
Passport Number	
Aadhar Number	366463072729
Faculty code given by C.O.E.	0
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	10-04-1996
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.	COMPUTER SCIENCE AND ENGINEERING	2018	PSN ENGINEERING COLLEGE	ANNA UNIVERSITY	6.65	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING(WITH SPECIALIZATION IN NETWORKS)	2020	PSN ENGINEERING COLLEGE	ANNA UNIVERSITY	8.7	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	17-08-2022	13-05-2023	0	8	28
			Total	0	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)

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	AUTOMOBILE ENGINEERING
Name of the Degree & Course	B.E.-AUTOMOBILE ENGINEERING
Name of the faculty member	MR. MANOJKUMAR K
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	2/99,COLONY STREET,KETCHILAPURAM,KALANKARAIPATTI
Line 2	KAYATHAR-628721
District	THOOTHUKUDI
Telephone number	-
Mobile number	+91 - 8148356032
Email	MANOJKUMARK2812@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	HHBPK9440M
Passport Number	
Aadhar Number	855515529941
Faculty code given by C.O.E.	9523274
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	28-12-1994
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.	MECHANICAL ENGINEERING	2017	SALEM COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.14	FIRST CLASS	
P.G.	M.E.	AUTOMOBILE ENGINEERING	2019	PSN ENGINEERING COLLEGE	ANNA UNIVERSITY	7.32	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	13-03-2021	13-05-2023	2	2	1
			Total	2	2	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)

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
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. GNANA PRINCY V
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	10,D,NORTH STREET ,THAMILAKURUCHI
Line 2	THIDIYOOR ,627152
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9597100103
Email	PRINCYLATHA1990@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	DUYPG2353H
Passport Number	
Aadhar Number	408408747155
Faculty code given by C.O.E.	9523305
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	04-05-1991
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.COM.	COMMERCE	2012	OTHERS - SARA TUCKER COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	75.3	DISTINCTION	
P.G.	M.B.A.	MASTER OF BUSINESS ADMINISTRATION	2014	INFANT JESUS COLLEGE OF ENGINEERING	ANNA UNIVERSITY	75.6	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	31-10-2022	13-05-2023	0	6	14
			Total	0	6	17

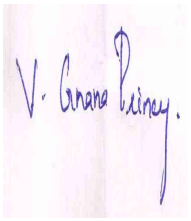
V. Industrial Experience :

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

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

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.TECH.-AGRICULTURAL ENGINEERING
Name of the faculty member	MRS. LIZZY ARPUTHA DORATHY L
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	204 WATER TANK STREET WEST SIVANTHIPURAM VKPURAM
Line 2	AMBASAMUDRAM 627425
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 8778782677
Email	LIZZYANUGRAHA@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	AMDPL1014L
Passport Number	
Aadhar Number	488836229955
Faculty code given by C.O.E.	9523298
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	27-06-1987
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.	CIVIL ENGINEERING	2011	PSN ENGINEERING COLLEGE	ANNA UNIVERSITY	78	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2014	ANNA UNIVESITY REGIONAL CAMPUS,TIRUNELVELI	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	30-09-2022	13-05-2023	0	7	14
A R COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	18-12-2017	16-06-2022	4	5	30
			Total	5	1	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)

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL AND AUTOMATION ENGINEERING
Name of the faculty member	MRS. RAAGAVI R B
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3/498 P.KONDUREDDYPATTI
Line 2	PERAIYUR
District	MADURAI
Telephone number	-
Mobile number	+91 - 9488748441
Email	PRICIPALPSNEC@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BSMPR8083H
Passport Number	
Aadhar Number	586161347690
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	22-11-1994
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.	MECHANICAL ENGINEERING	2016	SRI VIDYA COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	8.2	FIRST CLASS	
P.G.	M.E.	ENGINEERING DESIGN	2018	GOVERNMENT COLLEGE OF ENGINEERING TIRUNELVELI	ANNA UNIVERSITY	8.06	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	05-12-2022	13-05-2023	0	5	9
			Total	0	5	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)

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

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-MATHEMATICS
Name of the faculty member	MRS. ALICE DIANA D
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	53/B GANDHI NAGAR WEST STREET
Line 2	VICKRAMASINGAPURAM 627425
District	TIRUNELVELI
Telephone number	- 0
Mobile number	+91 - 7708277841
Email	ALICEDIANA066@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	CPHPA6847K
Passport Number	
Aadhar Number	702973872375
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	30-04-1991
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.SC.	OTHERS - MATHS	2011	OTHERS - CSI JAYARAJ ANNAPACKIAM COLLEGE NALLUR	MANOMANIAM SUNDARNAR UNIVERSITY	82	DISTINCTION	
P.G.	M.SC.	OTHERS - MATHS	2014	OTHERS - SRI PARAMAKALYANI COLLEGE ALWARKURICHI	MANOMANIAM SUNDARNAR UNIVERSITY	75	DISTINCTION	
OTHERS - M.PHILL	OTHERS - MATHS	OTHERS - MATHS	2018	OTHERS - MOTHER THERASA WOMENS UNIVERSITY KODAIKANAL	MOTHER TERESA WOMEN'S UNIVERSITY	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	
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	29-12-2022	13-05-2023	0	4	16
			Total	0	4	18

V. Industrial Experience :

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

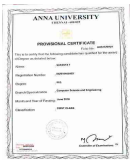
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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)

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MS. SARANYA T
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	17A, KRISHNAN KOVIL STREET KRISHNAPURAM 5TH WARD
Line 2	KADAYANALLUR TK 627751
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9843487628
Email	SARANYAMAGESH95@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	GDKPS3854M
Passport Number	
Aadhar Number	898329637141
Faculty code given by C.O.E.	9523221
Faculty code given by A.I.C.T.E.	
Date of Birth	27-01-1995
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	2016	P S R ENGINEERING COLLEGE (AUTONOMOUS)	ANNA UNIVERSITY	80	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2018	S VEERASAMY CHETTIAR COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	03-06-2019	13-05-2023	3	11	11
			Total	3	11	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)

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-ENGLISH
Name of the faculty member	MR. SUNDERJOHN THINAKARAN S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	NO.1G,C.S.S.NAGAR, THENKASI ROAD, GANDHI NAGAR PO,
Line 2	TIRUNELVELI-627008
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9751376837
Email	THINAKARAN678@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	GQGPS8230G
Passport Number	
Aadhar Number	706625686236
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	
Date of Birth	26-07-1982
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.A.	ENGLISH	2007	OTHERS - GOVERNMENT ARTS COLLEGE SALEM	PERIYAR UNIVERSITY	42	OTHERS - THIRD	
P.G.	OTHERS - M.A.	OTHERS - ENGLISH	2010	OTHERS - GOVERNMENT ARTS COLLEGE SALEM	PERIYAR UNIVERSITY	65	FIRST CLASS	
OTHERS - M.PHIL.	OTHERS - M.PHIL.	OTHERS - ENGLISH	2014	OTHERS - PRIST UNIVERSITY	OTHERS - PRIST UNIVERSITY	78	FIRST CLASS	

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I.a. Additional Qualification :- NET
Score : 89
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	09-09-2014	13-05-2023	8	8	5
OTHERS - AVS COLLEGE OF ARTS AND SCIENCE	ASSISTANT PROFESSOR	01-09-2013	16-04-2014	0	7	16
			Total	9	3	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)
2		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	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-ENGLISH
Name of the faculty member	MR. PAUL KUMAR R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	2/3 ESWARI AMMAN KOVIL STREET,
Line 2	KELAMUNEERPALAM
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9943872305
Email	PAULKUMARMBA@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	DSAFD2563I
Passport Number	
Aadhar Number	656565564823
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	
Date of Birth	24-09-1986
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.A.	ENGLISH	2008	OTHERS - ST XAVIERS COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	66.5	FIRST CLASS	
P.G.	OTHERS - M.A	OTHERS - ENGLISH	2012	OTHERS - MS UNIVERSITY	MANOMANIAM SUNDARNAR UNIVERSITY	55.5	SECOND CLASS	
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - ENGLISH	2015	OTHERS - GOVT ARTS COLLEGE	BHARATHIDASAN UNIVERSITY	70.3	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	02-02-2017	13-05-2023	6	3	12
			Total	6	3	13

V. Industrial Experience :

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

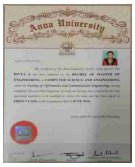
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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	9523 - PSN ENGINEERING COLLEGE
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECH.-INFORMATION TECHNOLOGY
Name of the faculty member	MRS. DIVYA S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	7A, MANIMEGALAI ST,VANNARPETTAI, TIRUNELVELI
Line 2	627003
District	TIRUNELVELI
Telephone number	0462 - 2502430
Mobile number	+91 - 9629630183
Email	DIVYASHUNMUGAM@GMAIL.COM
Gender	FEMALE
Community	MBC
PAN Number	CPJPD9041Q
Passport Number	
Aadhar Number	923311490705
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	
Date of Birth	06-09-1992
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.	COMPUTER SCIENCE AND ENGINEERING	2014	SCAD COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	75	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2016	SCAD COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	81	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	03-06-2019	13-05-2023	3	11	11
			Total	3	11	16

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
MARIA INTERNATIONAL PVT LTD	ASSISTANT SALES MANAGER	CUSTOMER SUPPORT EXECUTIVE	01-10-2018	28-02-2019	0	4	31
				Total	0	4	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)

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MRS. ARUL SELVI K
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	M 121,POTHIGAI NAGAR,PERUMALPURAM
Line 2	PALAYAMKOTTAI,627007
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9488657514
Email	PRICIPALPSNEC@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BHIPA8206J
Passport Number	
Aadhar Number	862796814085
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	27-04-1990
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.	COMPUTER SCIENCE AND ENGINEERING	2011	SCAD COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	76	FIRST CLASS	
P.G.	M.TECH.	OTHERS - MTECH IN NETWORK ENGINEERING	2013	KALASALINGAM INSTITUTE OF TECHNOLOGY	OTHERS - KALASALINGAM 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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	19-10-2022	13-05-2023	0	6	26
			Total	0	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)

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-PHYSICS
Name of the faculty member	MRS. DHIVYA B
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	18 A SANTHAI MADAM, SENAIYAR STREET, AMBASAMUDRAM.
Line 2	AMBASAMUDRAM 627401
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9087531755
Email	DIVYABOOMIBALAN@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	CSXPD6698C
Passport Number	
Aadhar Number	263426709270
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	13-04-1994
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.SC.	OTHERS - PHYSICS	2016	OTHERS - NKR GOVT ARTS COLLEGE FOR WOMEN	PERIYAR UNIVERSITY	59	SECOND CLASS	
P.G.	M.SC.	OTHERS - PHYSICS	2018	OTHERS - ARIGNAR ANNA GOVT ARTS COLLEGE NAMAKKAL	PERIYAR UNIVERSITY	72	FIRST CLASS	
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - PHYSICS	2021	OTHERS - ARIGNAR ANNA GOVT ARTS COLLEGE NAMAKKAL	PERIYAR UNIVERSITY	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	18-04-2022	13-05-2023	1	0	26
			Total	1	0	26

V. Industrial Experience :	

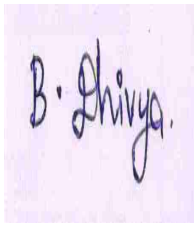
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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

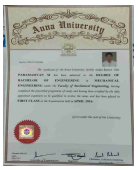
AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)

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

Signature of the Faculty :



Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. PARAMASIVAN M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	42 VETHAKOVIL NORTH STREET
Line 2	T N PUTHUKUDI
District	TENKASI
Telephone number	-
Mobile number	+91 - 8667293509
Email	PRICIPALPSNEC@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	CKEPP2622P
Passport Number	
Aadhar Number	790192662506
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	25-05-1995
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.	MECHANICAL ENGINEERING	2016	S VEERASAMY CHETTIAR COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.5	FIRST CLASS	
P.G.	M.E.	THERMAL ENGINEERING	2021	R. V. S COLLEGE OF ENGINEERING	ANNA UNIVERSITY	8.9	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	04-01-2023	13-05-2023	0	4	10
			Total	0	4	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)

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

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-CHEMISTRY
Name of the faculty member	MRS. ARUL JENIBA A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	4-150A MANCHANA VILAI, ELAVU VILAI POST
Line 2	KANYAKUMARI 629171
District	KANYAKUMARI
Telephone number	- 0
Mobile number	+91 - 9443839321
Email	ARULJENIBA66@GMALIL.COM
Gender	FEMALE
Community	BC
PAN Number	BPIPA4478Q
Passport Number	
Aadhar Number	913314339096
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	13-09-1992
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.SC.	OTHERS - CHEMISTRY	2013	OTHERS - HOLYCROSS COLLEGE TIRUNELVELI	MANOMANIAM SUNDARNAR UNIVERSITY	68	FIRST CLASS	
P.G.	M.SC.	OTHERS - CHEMISTRY	2016	OTHERS - HOLYCROSS COLLEGE TIRUNELVELI	MANOMANIAM SUNDARNAR UNIVERSITY	65	FIRST CLASS	
OTHERS - M.PHILL	OTHERS - M.PHILL	OTHERS - CHEMISTRY	2019	OTHERS - WOMENS CHRISTIAN COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	62.3	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	26-11-2022	13-05-2023	0	5	18
			Total	0	5	20

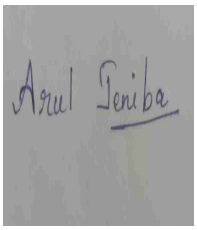
V. Industrial Experience :	

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)

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-CHEMISTRY
Name of the faculty member	MRS. MALAR KODI S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	36/7 SALAI ALANGULAM
Line 2	KEELAPAVOOR 627806
District	TIRUNELVELI
Telephone number	- 0
Mobile number	+91 - 9500400287
Email	MALAR84.SELVARAJ@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	EYEPM9939Q
Passport Number	
Aadhar Number	832164797388
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	05-06-1985
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.SC.	OTHERS - CHEMISTRY	2005	OTHERS - GOVINDAMMAL ADITANAR COLLEGE TIRUCHENDUR	MANOMANIAM SUNDARNAR UNIVERSITY	66.9	FIRST CLASS	
P.G.	M.SC.	OTHERS - CHEMISTRY	2008	OTHERS - NMSSVN COLLEGE MADURAI	MADURAI KAMARAJ UNIVERSITY	64.9	FIRST CLASS	
OTHERS - M.PHILL	OTHERS - M.PHILL	OTHERS - CHEMISTRY	2017	OTHERS - MS UNIVERSITY	MANOMANIAM SUNDARNAR UNIVERSITY	69.2	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	28-11-2022	13-05-2023	0	5	16
			Total	0	5	18

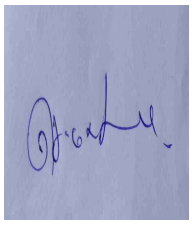
V. Industrial Experience :	

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)

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MRS. VASUKI DEVI K
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	51/11THAMARAI FIRST STREET, SELVA VIGNESH NAGAR
Line 2	TACHANALLUR -627358
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 7598210312
Email	K.VASUKIDEVI@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	ARRPV2896B
Passport Number	
Aadhar Number	760723746014
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	10-11-1991
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.E.	COMPUTER SCIENCE AND ENGINEERING	2014	SCAD COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	73	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2016	SBM COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	81	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	23-03-2022	13-05-2023	1	1	22
			Total	1	1	22

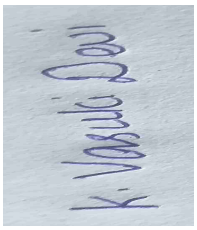
V. Industrial Experience :

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)

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.TECH.-AGRICULTURAL ENGINEERING
Name of the faculty member	MS. ABISHA M S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3/148,CHETTIVILAI
Line 2	KEEZHAKALKURICHY
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 7530070195
Email	PRICIPALPSNEC@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	EDEPA3543A
Passport Number	
Aadhar Number	261029509086
Faculty code given by C.O.E.	9523295
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	03-06-1997
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.	CIVIL ENGINEERING	2019	UNIVERSITY COLLEGE OF ENGINEERING NAGERCOIL	ANNA UNIVERSITY	67	FIRST CLASS	
P.G.	M.E.	AERONAUTICAL ENGINEERING	2021	ANNA UNIVESITY REGIONAL CAMPUS,TIRUNELVELI	ANNA UNIVERSITY	83.5	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	03-08-2022	04-03-2023	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)

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MS. VAJILA P
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1/32 PUTHERY PARAYADI NAGERCOIL
Line 2	629001
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9514694105
Email	VAJILAVAJI.P@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	AQJPV1049F
Passport Number	
Aadhar Number	526050721039
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	14-05-1992
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.	COMPUTER SCIENCE AND ENGINEERING	2019	D M I COLLEGE OF ENGINEERING	ANNA UNIVERSITY	7.4	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2021	M E T ENGINEERING COLLEGE	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	17-11-2021	13-05-2023	1	5	27
			Total	1	5	29

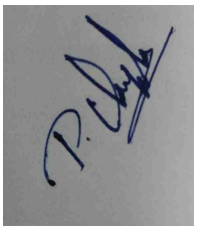
V. Industrial Experience :

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)

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL AND AUTOMATION ENGINEERING
Name of the faculty member	MS. PARVATHI S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	5/70 EAST STREET ,ERACHI ETTAYAPURAM
Line 2	628720
District	THOOTHUKUDI
Telephone number	0 - 0
Mobile number	+91 - 9514916818
Email	JOYPARU95@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	CDWPP1274J
Passport Number	
Aadhar Number	551718872080
Faculty code given by C.O.E.	9523194
Faculty code given by A.I.C.T.E.	0
Date of Birth	14-05-1995
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.	MECHANICAL ENGINEERING	2016	GRACE COLLEGE OF ENGINEERING	ANNA UNIVERSITY	6.98	FIRST CLASS	
P.G.	M.E.	ENGINEERING DESIGN	2018	GOVERNMENT COLLEGE OF ENGINEERING TIRUNELVELI	ANNA UNIVERSITY	7.05	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	13-06-2018	13-05-2023	4	11	1
			Total	4	11	6

V. Industrial Experience :

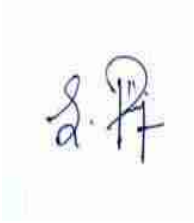
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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)

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

Signature of the Faculty :



Name of the College	9523 - PSN ENGINEERING COLLEGE
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. JESIKA A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	19/8 CHURCH STREET SANTHOSAPURAM
Line 2	TIRUKANKUDI 627115
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9629521961
Email	JESIKARAJA1999@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	CAIPJ5104N
Passport Number	
Aadhar Number	370306740311
Faculty code given by C.O.E.	9523297
Faculty code given by A.I.C.T.E.	43387312232
Date of Birth	12-02-1999
Age	24
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	2019	OTHERS - TDMNS COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	64	FIRST CLASS	
P.G.	M.B.A.	MASTER OF BUSINESS ADMINISTRATION	2021	PSN ENGINEERING COLLEGE	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	25-07-2022	10-02-2023	0	6	17
			Total	0	6	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)

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECH.-INFORMATION TECHNOLOGY
Name of the faculty member	MRS. SUGANYA P
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	8/23 DHANALAKSHMI NAGAR REDDIYARPATTI
Line 2	627007
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9095327125
Email	SUGANYA021186@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	EZWPS6606D
Passport Number	
Aadhar Number	950299673020
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	9523307
Date of Birth	02-11-1986
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.TECH.	INFORMATION TECHNOLOGY (SS)	2009	PSN COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	68	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2014	VINS CHRISTIAN COLLEGE OF ENGINEERING	ANNA UNIVERSITY	75	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	03-02-2023	13-05-2023	0	3	11
			Total	0	3	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)

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
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. SARATHI S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	PLOT NO-71,VIJAYA DURGAPURI NAGAR A COLONY, MAHARAJA NAGAR POST
Line 2	KTC NAGAR NORTH, PALYAMKOTTAI-627011
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9487946293
Email	CHARUMANI24@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	LAYPS5659C
Passport Number	
Aadhar Number	642127634936
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	9523303
Date of Birth	15-04-1997
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.	ELECTRONICS AND COMMUNICATION ENGINEERING	2018	RAJAS ENGINEERING COLLEGE	ANNA UNIVERSITY	6.99	FIRST CLASS	
P.G.	M.E.	VLSI DESIGN	2021	PSN ENGINEERING COLLEGE	ANNA UNIVERSITY	8.47	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	24-11-2022	15-05-2023	0	5	22
			Total	0	5	24

V. Industrial Experience :

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

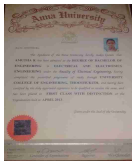
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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	9523 - PSN ENGINEERING COLLEGE
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	M.E.-VLSI DESIGN
Name of the faculty member	MRS. AMUTHA R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	PLOT45,LAKSHMI BHAVANAM,VGP GABRIEL NAGAR,PUDUKULAM
Line 2	KONGADAMPARAI POST-627007
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9894225079
Email	AMUTHAKRISHNA8@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BTTPA7502A
Passport Number	
Aadhar Number	626875881141
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	22-03-1992
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.	ELECTRONICS AND COMMUNICATION ENGINEERING	2021	PSN ENGINEERING COLLEGE	ANNA UNIVERSITY	8.34	FIRST CLASS	
P.G.	M.E.	VLSI DESIGN	2013	UNIVERSITY VOC COLLEGE OF ENGINEERING TUTICORIN	ANNA UNIVERSITY	8.85	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	29-11-2022	15-05-2023	0	5	17
			Total	0	5	19

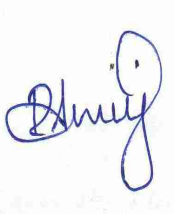
V. Industrial Experience :

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	9523 - PSN ENGINEERING COLLEGE
Name of the Department	AUTOMOBILE ENGINEERING
Name of the Degree & Course	B.E.-AUTOMOBILE ENGINEERING
Name of the faculty member	MR. CHAIRMAKANI R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3/120,MAIN ROAD,LAKSHMIPURAM
Line 2	V.K.PUDUR,627861
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9865281980
Email	CHAIRMAKANI70@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BSVPC1626E
Passport Number	
Aadhar Number	920642173737
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	01-11-1970
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.	MECHANICAL ENGINEERING	1995	OTHERS - SATYABAMA ENGINEERING COLLEGE	UNIVERSITY OF MADRAS	60	SECOND CLASS	
P.G.	M.E.	MANUFACTURING ENGINEERING	2014	SARDAR RAJA COLLEGE OF ENGINEERING	ANNA UNIVERSITY	6.87	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	22-12-2022	13-05-2023	0	4	23
OTHERS - THANGAPAZHAM POLYTECHNIC COLLEGE	OTHERS - LECTURER	08-04-2014	29-07-2016	2	3	22
OTHERS - S VEERASAMY CHETTIAR POLYTECHNIC COLLEGE	OTHERS - LECTURER	03-01-2011	31-12-2012	1	11	29
			Total	4	8	18

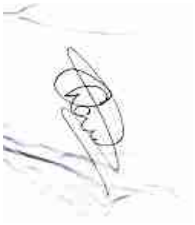
V. Industrial Experience :	

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
QUALITY MOTOR SERVICE CHENNAI	MANAGER	MANEGER	24-10-2002	16-11-2011	9	0	24
KUMARASAMY AUTOMOBILES MARUTHI PVTLTD CHENNAI	SERVICE ENGINEER	SERVICE ENGINEER	14-03-2000	22-10-2002	2	7	9
				Total	11	8	5

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	9523 - PSN ENGINEERING COLLEGE
Name of the Department	AUTOMOBILE ENGINEERING
Name of the Degree & Course	B.E.-AUTOMOBILE ENGINEERING
Name of the faculty member	MR. SHAMMAH STEVENS
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	ANNA NAGAR
Line 2	CHENNAI
District	CHENNAI
Telephone number	-
Mobile number	+91 - 8610100001
Email	SHAMMAHSTEVENS@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	QQTPS2890M
Passport Number	
Aadhar Number	525767371212
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	18-04-1996
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.	AUTOMOBILE ENGINEERING (SS)	2020	OTHERS - NOORUL ISLAM CENTRE FOR HIGHER EDUCATION	OTHERS - NOORUL ISLAM CENTRE FOR HIGHER EDUCATION	7.44	FIRST CLASS	
P.G.	M.E.	AUTOMOBILE ENGINEERING	2022	OTHERS - NOORUL ISLAM CENTRE FOR HIGHER EDUCATION	OTHERS - NOORUL ISLAM CENTRE FOR HIGHER EDUCATION	.9.18	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	01-02-2023	13-05-2023	0	3	13
			Total	0	3	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)	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	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-PHYSICS
Name of the faculty member	MS. RATHI R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	THICKILANVILAI,SOUTH SOORANKUDY POST
Line 2	629 501
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9629380374
Email	RATHI131988@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	CUFPR9601F
Passport Number	
Aadhar Number	999276709686
Faculty code given by C.O.E.	9523164
Faculty code given by A.I.C.T.E.	3633887446
Date of Birth	01-03-1988
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 - HOLY CROSS COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	74	FIRST CLASS	
P.G.	M.SC.	OTHERS - PHYSICS	2010	OTHERS - HOLY CROSS COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	66	FIRST CLASS	
P.G.	OTHERS - M.PHIL	OTHERS - PHYSICS	2011	OTHERS - HOLY CROSS COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	82	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 - SIVANTHI ADITANAR COLLEGE	ASSISTANT PROFESSOR	27-06-2011	23-12-2016	5	5	27
FRANCIS XAVIER ENGINEERING COLLEGE (AUTONOMOUS)	ASSISTANT PROFESSOR	04-01-2017	24-06-2017	0	5	21
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	03-07-2017	13-05-2023	5	10	11
			Total	11	9	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)

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

Signature of the Faculty :

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. KEERTHANA K
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	56/3, MANIPURAM STREET,TIRUNELVELI TOWN
Line 2	TIRUNELVELI, 627006
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 8903321054
Email	KEERTHANAKIRUBAKARAN@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	EUJPK1805E
Passport Number	
Aadhar Number	336692258784
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	15-03-1997
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.	CIVIL ENGINEERING	2018	FRANCIS XAVIER ENGINEERING COLLEGE (AUTONOMOUS)	ANNA UNIVERSITY	7.13	FIRST CLASS	
P.G.	M.TECH.	OTHERS - REMOTE SENSING	2020	ANNA UNIVESITY REGIONAL CAMPUS,TIRUNELVELI	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	14-03-2022	09-02-2023	0	10	27
			Total	0	10	2

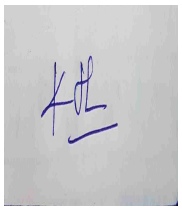
V. Industrial Experience :

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

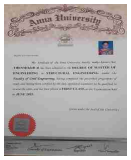
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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)

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	STRUCTURAL ENGINEEERING
Name of the Degree & Course	M.E.-STRUCTURAL ENGINEERING
Name of the faculty member	MRS. THENMOZHI R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	496 GANDHI NAGAR, MALAIYADIPATTI,
Line 2	RAJAPALAYAM 626 117
District	VIRUDHUNAGAR
Telephone number	-
Mobile number	+91 - 9843979756
Email	CIVILLYDIATHENMOZHI@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	AIXPT5585C
Passport Number	
Aadhar Number	230312075959
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	26-04-1989
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.	CIVIL ENGINEERING	2010	SRI VENKATESWARAA COLLEGE OF TECHNOLOGY	ANNA UNIVERSITY	73	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2015	RATHINAM TECHNICAL CAMPUS (AUTONOMOUS)	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
NADAR SARASWATHI COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	26-03-2015	20-03-2021	5	11	26
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	25-03-2021	13-05-2023	2	1	20
			Total	8	1	17

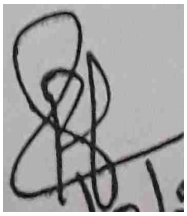
V. Industrial Experience :

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

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

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	B.E.-GENERAL ENGINEERING
Name of the faculty member	MR. JEFFRIN CHRISTO C A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3/137,CHANIVILAI
Line 2	VERKIZHAMBI - 629166
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9976926380
Email	ROCKJEF@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	AZCPJ1496Q
Passport Number	
Aadhar Number	468605225454
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	23-03-1992
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.	ELECTRONICS AND COMMUNICATION ENGINEERING	2013	ST XAVIER'S CATHOLIC COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	6.25	SECOND CLASS	
P.G.	M.E.	COMMUNICATION AND NETWORKING	2016	C S I INSTITUTE OF TECHNOLOGY	ANNA UNIVERSITY	7.56	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) ***	

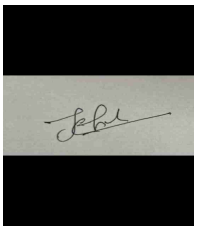
Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	05-01-2023	13-05-2023	0	4	9
			Total	0	4	11

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)

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

Name of the College	9523 - PSN ENGINEERING COLLEGE
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. AMARA SELVI V
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	224C POONTHOTA STREET
Line 2	SANKAR NAGAR POST 627357
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 8610245630
Email	VAMARASELVI@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	BWUPV5956K
Passport Number	
Aadhar Number	315246972839
Faculty code given by C.O.E.	9523246
Faculty code given by A.I.C.T.E.	17439031408
Date of Birth	29-06-1990
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	2012	NATIONAL ENGINEERING COLLEGE (AUTONOMOUS)	ANNA UNIVERSITY	7.2	FIRST CLASS	
P.G.	M.E.	COMMUNICATION SYSTEMS	2014	ANNA UNIVESITY REGIONAL CAMPUS, MADURAI	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	20-01-2020	15-05-2023	3	3	27
			Total	3	3	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)

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MS. THARIK NAZEEM A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	17,RAHMATHNAGER,PETTAI
Line 2	627004
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9789441675
Email	THARIKNAIMS@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	ANOPT1009P
Passport Number	
Aadhar Number	227799447713
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	
Date of Birth	01-04-1992
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.	OTHERS - BTECH	OTHERS - INFORMATION AND COMMUNICATION TECHNOLOGIES	2013	OTHERS - MS UNIVERSITY	MANOMANIAM SUNDARNAR UNIVERSITY	8.75	DISTINCTION	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2016	SCAD COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	8.45	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) ***	

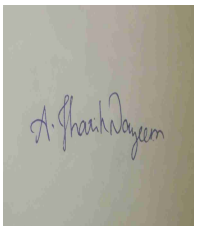
Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	14-06-2019	13-05-2023	3	10	30
			Total	3	10	5

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)

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

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-PHYSICS
Name of the faculty member	MRS. VIJAYALAKSHMI S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1244Z ARUNACHALAPURAM, B COLONY , K.T.C.NAGAR,PALAYAMKOTTAI
Line 2	TIRUNELVELI 627011
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 8248506149
Email	PRICIPALPSNEC@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	BHSPV1728E
Passport Number	
Aadhar Number	596088543585
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	23-08-1993
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.	OTHERS - B.SC	OTHERS - PHYSICS	2015	OTHERS - ST XAVIERS COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	60	FIRST CLASS	
P.G.	M.SC.	OTHERS - PHYSICS	2017	OTHERS - ST XAVIERS COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	64	FIRST CLASS	
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - PHYSICS	2018	OTHERS - MANONMANIUM SUNDARANAR UNIVERSITY	MANOMANIAM SUNDARNAR UNIVERSITY	76	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	23-03-2023	13-05-2023	0	1	22
			Total	0	1	22

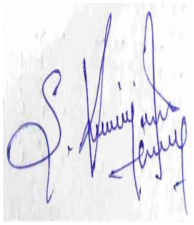
V. Industrial Experience :

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)
		1		

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
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. NIRANJANADEVI V
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3/46,NORTH STREET,PALKULAM,TIRUKALUR POST
Line 2	TUTICORIN,628612
District	THOOTHUKUDI
Telephone number	-
Mobile number	+91 - 9940666008
Email	NIRANJANA68@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BBTPN0007M
Passport Number	
Aadhar Number	453849435145
Faculty code given by C.O.E.	9523129
Faculty code given by A.I.C.T.E.	
Date of Birth	15-07-1989
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	2012	JAYARAJ ANNAPACKIAM CSI COLLEGE OF ENGINEERING	ANNA UNIVERSITY	7.98	FIRST CLASS	
P.G.	M.E.	APPLIED ELECTRONICS	2016	SCAD 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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	29-06-2016	15-05-2023	6	10	17
			Total	6	10	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)

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	AUTOMOBILE ENGINEERING
Name of the Degree & Course	B.E.-AUTOMOBILE ENGINEERING
Name of the faculty member	MR. VINEESH PANDYAN A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	67,MELA STREET,UDHAYA SELVAN PATTI,VADAKARAI
Line 2	TIRUNELVELI, 627812
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 8056650245
Email	VINEESHPANDIYAN2126@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	BPEPV8427A
Passport Number	
Aadhar Number	517483003257
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	26-01-1999
Age	24
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.	AERONAUTICAL ENGINEERING	2020	PSN COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	6.8	FIRST CLASS	
P.G.	M.E.	CRYOGENIC ENGINEERING	2022	PSN COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	03-01-2023	13-05-2023	0	4	11
			Total	0	4	13

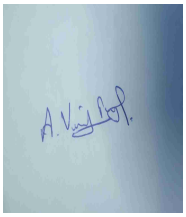
V. Industrial Experience :

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

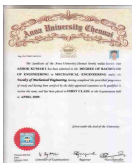
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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)

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL AND AUTOMATION ENGINEERING
Name of the faculty member	MR. ASHOK KUMAR I
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1/25/38 MARIAMMAL ILLAM, RAJIVE NAGAR
Line 2	ARUPPUKOTTAI-626101
District	VIRUDHUNAGAR
Telephone number	-
Mobile number	+91 - 9486278280
Email	PRICIPALPSNEC@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	ATGPA0787M
Passport Number	
Aadhar Number	641424139856
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	15-06-1987
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	2009	SRI RAMAKRISHNA INSTITUTE OF TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	66	FIRST CLASS	
P.G.	M.E.	COMPUTER AIDED DESIGN	2014	ANNA UNIVESITY REGIONAL CAMPUS,TIRUNELVELI	ANNA UNIVERSITY	7.21	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	10-01-2023	13-05-2023	0	4	4
			Total	0	4	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)

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
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. KARPAGA SANKARI A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	2C 18TH VOC STREET SUTHAMALLI GOBALASAMUTHIRAM ROAD
Line 2	TIRUNELVELI 627-604
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9003438887
Email	KSANKARI1997@GMAIL.COM
Gender	FEMALE
Community	OC
PAN Number	JNPPK1502N
Passport Number	
Aadhar Number	255378803096
Faculty code given by C.O.E.	9523243
Faculty code given by A.I.C.T.E.	
Date of Birth	08-06-1997
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.B.A.	BUSINESS ADMINISTRATION	2017	OTHERS - SRI SARADHA COLLEGE FOR WOMEN	MANOMANIAM SUNDARNAR UNIVERSITY	61	FIRST CLASS	
P.G.	M.B.A.	MASTER OF BUSINESS ADMINISTRATION (PART TIME)	2019	OTHERS - ANNAMALAI UNIVERSITY	ANNAMALAI UNIVERSITY	65	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	03-09-2019	13-05-2023	3	8	11
			Total	3	8	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)
			500	500

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

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. MAHESH RAJA A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	59 MUTHUTAMIL RANI NAGAR
Line 2	MUNNIRPALLAM POST 627356
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9994586143
Email	AKMAHESHRAJA9@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	BOOMP4364L
Passport Number	
Aadhar Number	403924001184
Faculty code given by C.O.E.	0
Faculty code given by A.I.C.T.E.	0
Date of Birth	09-02-1990
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.	MECHANICAL ENGINEERING	2011	OTHERS - NOORUL ISLAMCOLLEGE OF ENHINNERING	ANNA UNIVERSITY	66	FIRST CLASS	
P.G.	M.E.	COMPUTER AIDED DESIGN	2015	ADHIYAMAAN COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	86	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	12-06-2018	13-05-2023	4	11	2
NARAYANAGURU COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	07-06-2015	08-06-2018	3	0	2
			Total	7	11	9

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
VIKI INDURSTIES PVT LTD	PRODUCTION ENGINNER	PRODUCTION	08-08-2011	02-04-2013	1	7	26
				Total	1	7	28

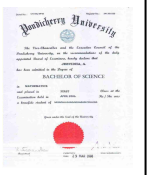
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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)
9				

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-MATHEMATICS
Name of the faculty member	MRS. JEEVIDHA A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	NO 5 EAST STREET RETTANAI POST
Line 2	TINDIVANAM 604306
District	VILLUPURAM
Telephone number	-
Mobile number	+91 - 8220211118
Email	JEEVIDHA@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	ANBAZ5056D
Passport Number	
Aadhar Number	675822767124
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	
Date of Birth	25-09-1985
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.SC.	OTHERS - MATHS	2006	OTHERS - SARATHA GANGADHARAN	PONDICHERRY UNIVERSITY	76	FIRST CLASS	
P.G.	M.SC.	OTHERS - MATHAMATICS	2015	OTHERS - SARADHA GANGADHARAN COLLEGE	PONDICHERRY UNIVERSITY	79.30	FIRST CLASS	
P.G.	OTHERS - M.PHIL	OTHERS - MATHAMATICS	2011	OTHERS - PRIST UNIVERSITY	PONDICHERRY UNIVERSITY	86	DISTINCTION	

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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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	20-01-2020	13-05-2023	3	3	25
			Total	3	3	26

V. Industrial Experience :

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

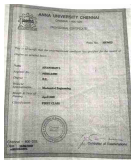
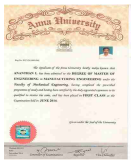
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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)

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	AUTOMOBILE ENGINEERING
Name of the Degree & Course	B.E.-AUTOMOBILE ENGINEERING
Name of the faculty member	MR. ANANTHAN L
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1/16 C THANGAMMAN KOIL STREET,
Line 2	ANDIPATTI, ALANGULAM TALUK, PINCODE - 627851
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9786121664
Email	ANANTHANMECH02@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AMZPA8676P
Passport Number	
Aadhar Number	327599273657
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	9321784181
Date of Birth	09-05-1987
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	2009	SARDAR RAJA COLLEGE OF ENGINEERING	ANNA UNIVERSITY	2009	FIRST CLASS	
P.G.	M.E.	MANUFACTURING ENGINEERING	2014	SARDAR RAJA COLLEGE OF ENGINEERING	ANNA UNIVERSITY	2014	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 INSTITUTE OF TECHNOLOGY AND SCIENCE	ASSISTANT PROFESSOR	19-12-2019	17-02-2023	3	1	30
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	03-03-2023	13-05-2023	0	2	11
			Total	3	4	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)

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
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. UMA DEVI P
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	6/1164 MIDDLE STREET, VELLUR
Line 2	VIRUDHUNAGAR - 626005
District	VIRUDHUNAGAR
Telephone number	-
Mobile number	+91 - 8220375506
Email	UMAPALRAJ26@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	AFAPU7379H
Passport Number	
Aadhar Number	587321170233
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	9523232
Date of Birth	07-01-1993
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.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2014	NELLAI COLLEGE OF ENGINEERING	ANNA UNIVERSITY	7.8	FIRST CLASS	
P.G.	M.E.	APPLIED ELECTRONICS	2016	NELLAI COLLEGE OF ENGINEERING	ANNA UNIVERSITY	8.1	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	31-05-2019	15-05-2023	3	11	16
			Total	3	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.

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECH.-INFORMATION TECHNOLOGY
Name of the faculty member	MS. MUTHULAKSHMI M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	8/127 GANDHI COLONY STREET
Line 2	VISWANATHAPERI-627757
District	TENKASI
Telephone number	-
Mobile number	+91 - 8220094892
Email	MUTHU2291996@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	EYWPM7758D
Passport Number	
Aadhar Number	965616643342
Faculty code given by C.O.E.	9523291
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	22-09-1996
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.	COMPUTER SCIENCE AND ENGINEERING	2018	PSN ENGINEERING COLLEGE	ANNA UNIVERSITY	6.27	SECOND CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2020	THIAGARAJAR COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	7.96	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) ***	

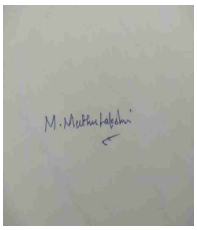
Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	10-05-2022	15-05-2023	1	0	6
			Total	1	0	6

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)

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

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	AUTOMOBILE ENGINEERING
Name of the Degree & Course	B.E.-AUTOMOBILE ENGINEERING
Name of the faculty member	MR. SHANKAR K
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1/883 LAKSHMI BHAVANAM,6TH STREET,GURUNAGAR,
Line 2	SUTHAMALLI,TIRUNELVELI-627604
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9488286985
Email	KSANKAR66@YAHOO.COM
Gender	MALE
Community	BC
PAN Number	EABPS2346A
Passport Number	
Aadhar Number	430720208807
Faculty code given by C.O.E.	9523
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	10-12-1967
Age	56
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	2017	GOVERNMENT COLLEGE OF ENGINEERING TIRUNELVELI	ANNA UNIVERSITY	6.34	SECOND CLASS	
P.G.	M.E.	AUTOMOBILE ENGINEERING	2020	PSN ENGINEERING COLLEGE	ANNA UNIVERSITY	8.17	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	01-12-2021	13-05-2023	1	5	13
			Total	1	5	15

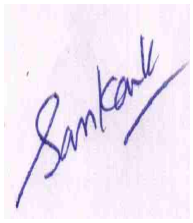
V. Industrial Experience :

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)

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. GLADSON D
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	24-4/1 ELLAMAVILAI
Line 2	KALKULAM
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9486679168
Email	PRICIPALPSNEC@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BUEPG8096H
Passport Number	
Aadhar Number	620362065520
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	21-10-1994
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.	AUTOMOBILE ENGINEERING	2016	OTHERS - NOORUL ISLAM CENTRE FOR HIGHER EDUCATION	OTHERS - NOORUL ISLAM CENTRE FOR HIGHER EDUCATION	75	FIRST CLASS	
P.G.	M.E.	AUTOMOBILE ENGINEERING	2018	OTHERS - NOORUL ISLAM CENTRE FOR HIGHER EDUCATION	OTHERS - NOORUL ISLAM FOR CENTRE FOR HIGHER EDUCATION	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	06-12-2022	13-05-2023	0	5	8
			Total	0	5	10

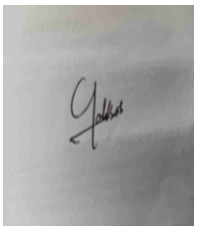
V. Industrial Experience :

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

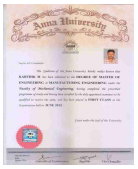
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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)

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL AND AUTOMATION ENGINEERING
Name of the faculty member	MR. KARTHIK M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1/180 ALWAR NADAR STREET
Line 2	KURUMBALAPERI
District	TENKASI
Telephone number	-
Mobile number	+91 - 9442148728
Email	PRICIPALPSNEC@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	GTSPK2803K
Passport Number	
Aadhar Number	327928083291
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	30-12-1988
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	2013	SARDAR RAJA COLLEGE OF ENGINEERING	ANNA UNIVERSITY	64	SECOND CLASS	
P.G.	M.E.	MANUFACTURING ENGINEERING	2015	SARDAR RAJA COLLEGE OF ENGINEERING	ANNA UNIVERSITY	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	04-01-2023	13-05-2023	0	4	10
			Total	0	4	12

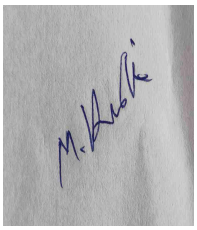
V. Industrial Experience :

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)

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. ASAIKKANI S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	2 MIDDLE KARUPAZAGHU STREET
Line 2	PULIYANKUDI-627855
District	TENKASI
Telephone number	-
Mobile number	+91 - 8526560275
Email	KANI73ANNAM@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	GTXPS5943E
Passport Number	
Aadhar Number	952072618699
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	15-06-1973
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.E.	MECHANICAL ENGINEERING	1994	OTHERS - REGIONAL ENGIEERING COLLEGE	BHARATHIYAR UNIVERSITY	56	SECOND CLASS	
P.G.	M.E.	MANUFACTURING ENGINEERING	2013	OTHERS - VINAYAGA MISSIONS UNIVERSITY	OTHERS - VINAYAGA MISSIONS UNIVERSITY	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
S VEERASAMY CHETTIAR COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	15-06-2015	19-02-2021	5	8	5
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	05-04-2021	13-05-2023	2	1	9
			Total	7	9	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)

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

Signature of the Faculty : 

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. VASUMATHI D
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	14/3, AZHAGIYA NAGAR
Line 2	ARALVAIMOZHI
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 8248222075
Email	VASUMATHICIVIL1997@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	BXSPV5465J
Passport Number	
Aadhar Number	614127467388
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	01-10-1997
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.	CIVIL ENGINEERING	2018	DMI ENGINEERING COLLEGE	ANNA UNIVERSITY	74	FIRST CLASS	
P.G.	M.E.	SOIL MECHANICS AND FOUNDATION ENGINEERING	2020	SOLAMALAI COLLEGE OF ENGINEERING	ANNA UNIVERSITY	81.3	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	06-04-2022	13-05-2023	1	1	8
			Total	1	1	8

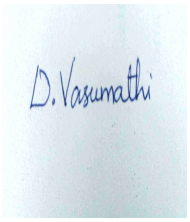
V. Industrial Experience :

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)

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-MATHEMATICS
Name of the faculty member	MR. GOPALAKRISHNAN K
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	9/168,SURYA NAGAR
Line 2	KALLIGUDI
District	MADURAI
Telephone number	-
Mobile number	+91 - 9585843048
Email	GOPAL08MAT12@GMAIL.COM.COM
Gender	MALE
Community	BC
PAN Number	BSDPG9073P
Passport Number	
Aadhar Number	270820410635
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	11-04-1991
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.SC.	OTHERS - MATHEMATICS	2011	OTHERS - THE AMERICAN COLLEGE	MADURAI KAMARAJ UNIVERSITY	57	SECOND CLASS	
P.G.	M.SC.	OTHERS - MATHEMATICS	2014	OTHERS - AYYA NADAR JANAKAI AMMAL COLLEGE	MADURAI KAMARAJ UNIVERSITY	63	FIRST CLASS	
OTHERS - MPHIL	OTHERS - MATHEMATICS	OTHERS - MATHEMATICS	2015	OTHERS - ANJAC COLLEGE	MADURAI KAMARAJ 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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	26-04-2022	13-05-2023	1	0	18
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	07-07-2016	31-10-2018	2	3	25
			Total	3	4	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)	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	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-MATHEMATICS
Name of the faculty member	MRS. FATHIMA JASMINE G
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3/14 NESA NAYANAR STREET,SAMATHANAPURAM
Line 2	PALAYAMKOTTAI 627002
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9790613781
Email	FATHI.JAS@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	ABPPF3801N
Passport Number	
Aadhar Number	801741474636
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	01-09-1986
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 - MATHS	2007	OTHERS - SADAKATHULLAH APPA COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	90	DISTINCTION	
P.G.	M.SC.	OTHERS - MATHS	2009	OTHERS - STJOHNS COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	80	DISTINCTION	
OTHERS - M.PHILL	OTHERS - M.PHILL	OTHERS - MATHS	2010	OTHERS - STXAVIERS COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	80	DISTINCTION	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION
Score :
File :

II. Title of Ph.D. Thesis	
III. Faculty in which Ph.D. was awarded	
IV. Academic Experience : **(Start from the Current working Experience) ***	

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
THAMIRABHARANI ENGINEERING COLLEGE	ASSISTANT PROFESSOR	15-03-2013	15-12-2015	2	9	1
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	08-11-2022	13-05-2023	0	6	6
FRANCIS XAVIER ENGINEERING COLLEGE (AUTONOMOUS)	ASSISTANT PROFESSOR	07-07-2010	18-12-2012	2	5	12
			Total	5	8	24

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	9523 - PSN ENGINEERING COLLEGE
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.E.-CIVIL ENGINEERING
Name of the faculty member	MRS. MISPA BROWN S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	69A TUCKKARAMMAL PURAM
Line 2	627602
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 7502292711
Email	MISPA.SV@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	CZHPM0153Q
Passport Number	
Aadhar Number	823737576875
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU10000
Date of Birth	11-04-1987
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.	CIVIL ENGINEERING	2011	PSN ENGINEERING COLLEGE	ANNA UNIVERSITY	78	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2015	PSN ENGINEERING COLLEGE	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	07-06-2011	09-09-2012	1	3	3
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	05-10-2020	13-05-2023	2	7	9
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	01-07-2015	08-11-2015	0	4	8
			Total	4	2	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)

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

Signature of the Faculty :

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	MR. JACINTH SELVA DOSS K
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	69A TUCKERAMMALPURAM
Line 2	627001
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 7502292610
Email	JACINTH.K.SELVADOSS@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AKCPJ3570V
Passport Number	
Aadhar Number	492858430045
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	06-11-1986
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.E.	CIVIL ENGINEERING	2007	OTHERS - KARUNYA INISTITUTE OF TECHNOLOGY	ANNA UNIVERSITY	80	FIRST CLASS	
P.G.	M.TECH.	ENVIRONMENTAL SCIENCE AND TECHNOLOGY	2009	ANNA UNIVESITY REGIONAL CAMPUS,TIRUNELVELI	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	06-06-2011	13-05-2023	11	11	8
			Total	11	11	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	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-MATHEMATICS
Name of the faculty member	MRS. GIRIJA S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	4/19 DHASARATHARAM STREET
Line 2	MUKKUDAL 627-601
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9025927905
Email	GIRI19AUG88@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BWLPG9776R
Passport Number	
Aadhar Number	224621165018
Faculty code given by C.O.E.	9506296
Faculty code given by A.I.C.T.E.	
Date of Birth	19-05-1988
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 - MATHAMATICS	2008	OTHERS - MANO COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	56	SECOND CLASS	
P.G.	M.SC.	OTHERS - MATHAMATICS WITH INFORMATION TECHNOLOGY	2010	OTHERS - SREE PARAMA KALYANI COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	72	FIRST CLASS	
P.G.	OTHERS - M.PHIL	OTHERS - MATHS	2012	OTHERS - STJOHNS COLLEGE	MANOMANIAM SUNDARNAR 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
PSN INSTITUTE OF TECHNOLOGY AND SCIENCE	ASSISTANT PROFESSOR	14-05-2012	09-12-2013	1	6	27
SCAD COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	07-07-2011	10-05-2012	0	10	4
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	07-06-2019	13-05-2023	3	11	7
EINSTEIN COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	02-01-2017	03-06-2019	2	5	2
			Total	8	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)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
1			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	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. RENU K
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	7-73/69NESAVALAR COLONY
Line 2	ARALVOIMOZHI,629301
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 8531981958
Email	RENU.KATHIR97@GMAIL.COM
Gender	FEMALE
Community	MBC
PAN Number	FWBPR5960L
Passport Number	
Aadhar Number	565282795777
Faculty code given by C.O.E.	9523276
Faculty code given by A.I.C.T.E.	9523276
Date of Birth	21-05-1997
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.	CIVIL ENGINEERING	2018	DMI ENGINEERING COLLEGE	ANNA UNIVERSITY	85	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2020	A R 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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	13-12-2021	13-05-2023	1	5	1
			Total	1	5	3

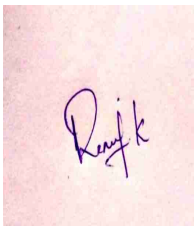
V. Industrial Experience :

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)

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

Signature of the Faculty : 

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. MAKESHWARI N
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	2/7, MARIAMMAN KOVIL NORTH STREET,
Line 2	T K KULAM PETTAI -627010
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 8220653704
Email	SRCEMAHESHWARI@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BHLMN3116K
Passport Number	
Aadhar Number	924103249666
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	
Date of Birth	12-08-1987
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.	CIVIL ENGINEERING	2012	SARDAR RAJA COLLEGE OF ENGINEERING	ANNAMALAI UNIVERSITY	79	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2017	SARDAR RAJA COLLEGE OF ENGINEERING	ANNA UNIVERSITY	81	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	14-06-2019	13-05-2023	3	10	30
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	06-09-2012	12-03-2014	1	6	7
			Total	5	5	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)

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-CHEMISTRY
Name of the faculty member	MS. BHARATHI T
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	SREE KRISHNAPURAM, GANAPATHIPURAM
Line 2	KANNYAKUMARAI 629-502
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9789390050
Email	PRIYABHARATHI1994@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BJBPT4953L
Passport Number	
Aadhar Number	504569741251
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	
Date of Birth	13-04-1993
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.SC.	OTHERS - CHEMISTRY	2013	OTHERS - HOLY CROSS COLLEGE NAGERCOIL	MANOMANIAM SUNDARNAR UNIVERSITY	70	FIRST CLASS	
P.G.	OTHERS - M.PHIL	OTHERS - CHEMISTRY	2017	JAYARAJ ANNAPACKIAM CSI COLLEGE OF ENGINEERING	MANOMANIAM SUNDARNAR UNIVERSITY	77	FIRST CLASS	
P.G.	M.SC.	OTHERS - CHEMISTRY	2016	OTHERS - HOLY CROSS COLLEGE NAGERCOIL	MANOMANIAM SUNDARNAR UNIVERSITY	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	10-06-2019	13-05-2023	3	11	4
OTHERS - BABUJI MEMORIAL HIGHER SECONDARY SCHOOL	OTHERS - TEACHER	04-06-2018	20-05-2019	0	11	17
			Total	4	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)
		1	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	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-CHEMISTRY
Name of the faculty member	MRS. MUTHULAKSHMI T
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	317,SELVA VINAYAGAR KOVIL STREET
Line 2	VICKRAMASINGAPURAM-627425
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 7806986043
Email	LACHUVEL2222@GMAIL.COM
Gender	FEMALE
Community	MBC
PAN Number	CXYPM3149P
Passport Number	
Aadhar Number	220632391366
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	02-02-1993
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.SC.	OTHERS - CHEMISTRY	2013	OTHERS - STXAVIERS COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	63	FIRST CLASS	
P.G.	OTHERS - M.PHIL	OTHERS - CHEMISTRY	2017	OTHERS - MSUNIVERSITY	MANOMANIAM SUNDARNAR UNIVERSITY	71	FIRST CLASS	
P.G.	M.SC.	OTHERS - CHEMISTRY	2016	OTHERS - ANJAC COLLEGE	MADURAI KAMARAJ 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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	06-04-2022	13-05-2023	1	1	8
			Total	1	1	8

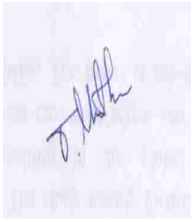
V. Industrial Experience :

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

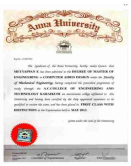
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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)

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL AND AUTOMATION ENGINEERING
Name of the faculty member	MR. MEYYAPPAN E
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	144/53 THAMBA PILLAI STREET
Line 2	RAJAPALAYAM
District	VIRUDHUNAGAR
Telephone number	-
Mobile number	+91 - 9942022121
Email	MEYYAPPAN90@GMAIL.COM
Gender	MALE
Community	MBC
PAN Number	BOCPM6049E
Passport Number	
Aadhar Number	951705104105
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	20-06-1990
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.	MECHANICAL ENGINEERING	2011	M KUMARASAMY COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	8	FIRST CLASS	
P.G.	M.E.	COMPUTER AIDED DESIGN	2013	ALAGAPPA CHETTIAR GOVERNMENT COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	8.5	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	07-12-2022	13-05-2023	0	5	7
			Total	0	5	9

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	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL AND AUTOMATION ENGINEERING
Name of the faculty member	MR. BALAMURUGAN A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	7/111, SOUTH STREET, MARUTHANVALVOO
Line 2	THOOTHUKUDI,628303
District	THOOTHUKUDI
Telephone number	-
Mobile number	+91 - 9842434675
Email	ALWINBALA95@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	CGEPB5066R
Passport Number	
Aadhar Number	754511766771
Faculty code given by C.O.E.	9523301
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	20-06-1995
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.	MECHANICAL ENGINEERING	2016	GRACE COLLEGE OF ENGINEERING	ANNA UNIVERSITY	6.98	FIRST CLASS	
P.G.	M.E.	THERMAL ENGINEERING	2020	UNIVERSAL 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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	14-09-2022	13-05-2023	0	7	30
			Total	0	7	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)

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-ENGLISH
Name of the faculty member	MR. JANARTHANAN M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	S/O,MADASAMY,2/91,SOUTH STREET, VEPPANKULAM P.0, KALAPPAIPATTI,
Line 2	KADAMBUR, PINCODE - 628714
District	THOOTHUKUDI
Telephone number	-
Mobile number	+91 - 8870146065
Email	JANARAJA4.JR@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	BUJPJ3900N
Passport Number	
Aadhar Number	923146815837
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	07-03-1989
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.A.	ENGLISH	2010	OTHERS - ST XAVIERS COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	47	OTHERS - THIRD	
P.G.	OTHERS - M.A.	OTHERS - ENGLISH	2015	OTHERS - ST JOHNS COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	56	SECOND CLASS	
OTHERS - M.PHI.	OTHERS - M.PHIL	OTHERS - ENGLISH	2016	OTHERS - ST JOHNS COLLEGE	MANOMANIAM SUNDARNAR 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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	22-04-2022	13-05-2023	1	0	22
			Total	1	0	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)

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-PHYSICS
Name of the faculty member	MRS. SHINY C L
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	10-92/A,THAMMATHUVILAI,KUMARAPURAM
Line 2	KANYAKUMARI,629164
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9952847658
Email	SHINYGOLD163@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BRDPC3845A
Passport Number	
Aadhar Number	445796787818
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	16-03-1992
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.SC.	OTHERS - PHYSICS	2012	OTHERS - NESAMONY MEMORIAL CHRISTIAN COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	75	FIRST CLASS	
P.G.	M.SC.	OTHERS - PHYSICS	2014	OTHERS - SCOTT CHRISTIAN COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	69	FIRST CLASS	
OTHERS - MPHIL	OTHERS - MPHIL	OTHERS - PHYSICS	2017	OTHERS - MUSLIM ARTS COLLEGE	MANOMANIAM SUNDARNAR 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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	29-04-2022	13-05-2023	1	0	15
			Total	1	0	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)

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	B.E.-GENERAL ENGINEERING
Name of the faculty member	MR. MUTHU KUMAR S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3.6TH MAIN ROAD,AMBAI
Line 2	MELAPALAYAM,627005
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9442591146
Email	SHUMARSECE@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	RGSEM2455R
Passport Number	
Aadhar Number	455437941164
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1435234001
Date of Birth	03-02-1983
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.	ELECTRONICS AND COMMUNICATION ENGINEERING	2005	PSN COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	Y	FIRST CLASS	
P.G.	M.E.	COMMUNICATION SYSTEMS	2011	PSN COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	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	02-07-2011	13-05-2023	11	10	12
PSN ENGINEERING COLLEGE	OTHERS - LECTURER	01-12-2008	01-05-2009	0	5	1
			Total	12	3	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)

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	B.E.-GENERAL ENGINEERING
Name of the faculty member	MR. GANESH M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	181/14 FIRST EXTENSION , NETHAJI ROAD,KOKKIRAKULAM
Line 2	TIRUNELVELI
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9944112036
Email	MECGANCLASSIC@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	DRGEG6314U
Passport Number	
Aadhar Number	582752786832
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	
Date of Birth	03-11-1985
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.	MECHANICAL ENGINEERING	2008	SCAD COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	Y	FIRST CLASS	
P.G.	M.E.	MANUFACTURING ENGINEERING	2014	LORD JEGANNATH COLLEGE OF ENGINEERING AND TECHNOLOGY	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	OTHERS - LECTURER	17-01-2011	31-07-2012	1	6	15
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	11-06-2014	13-05-2023	8	11	3
FRANCIS XAVIER ENGINEERING COLLEGE (AUTONOMOUS)	OTHERS - LETURER	01-06-2010	14-01-2011	0	7	14
			Total	11	1	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)

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	B.E.-GENERAL ENGINEERING
Name of the faculty member	MRS. BERLIN SONY T
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	MAVARA VILAI
Line 2	KALLANKUZHI-629166
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9488142575
Email	BERLINSONY1992@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	CKGPT5769K
Passport Number	
Aadhar Number	399878627239
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	18-05-1992
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.	ELECTRONICS AND COMMUNICATION ENGINEERING	2013	SUN COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	8.1	FIRST CLASS	
P.G.	M.E.	APPLIED ELECTRONICS	2015	LOYOLA INSTITUTE OF TECHNOLOGY AND SCIENCE	ANNA UNIVERSITY	8.7	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	01-03-2023	13-05-2023	0	2	13
			Total	0	2	14

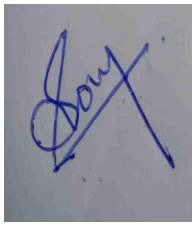
V. Industrial Experience :

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)	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	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MRS. SUBHA SHREE M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	21/ B2 KURICHI MAIN ROAD
Line 2	627001
District	TIRUNELVELI
Telephone number	0462 - 0
Mobile number	+91 - 9894934802
Email	MSUBHASHREE1617@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BWEPS8999D
Passport Number	
Aadhar Number	673723865975
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	
Date of Birth	16-10-1986
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.TECH.	POLYMER TECHNOLOGY	2008	KAMARAJ COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	84	DISTINCTION	
P.G.	M.E.	INDUSTRIAL ENGINEERING	2014	BHARATH NIKETAN ENGINEERING COLLEGE	ANNA UNIVERSITY	8.5	DISTINCTION	

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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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	27-01-2020	13-05-2023	3	3	18
			Total	3	3	19

V. Industrial Experience :

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

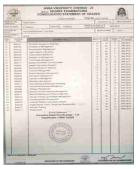
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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	9523 - PSN ENGINEERING COLLEGE
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. VINOTHINI P
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	96 ANTONIYAR NAGAR
Line 2	VADAKKANKULAM 627116
District	TIRUNELVELI
Telephone number	- 0
Mobile number	+91 - 6385515779
Email	VINO97.P@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	CHYPV0551J
Passport Number	
Aadhar Number	260187099488
Faculty code given by C.O.E.	9523289
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	21-08-1997
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.B.A.	BUSINESS ADMINISTRATION	2017	OTHERS - SARDAR RAJAS ARTS AND SCIENCE COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	70	FIRST CLASS	
P.G.	M.B.A.	MASTER OF BUSINESS ADMINISTRATION	2019	PSN ENGINEERING COLLEGE	ANNA 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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	24-03-2022	13-05-2023	1	1	21
			Total	1	1	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.

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	AUTOMOBILE ENGINEERING
Name of the Degree & Course	B.E.-AUTOMOBILE ENGINEERING
Name of the faculty member	MR. SURESH D
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	32/4, NALAYIRAMUDAIYAKULAM,SONAGAN VILAI
Line 2	TIRUCHENDUR,628201
District	THOOTHUKUDI
Telephone number	-
Mobile number	+91 - 7667764969
Email	DSURESHENG02@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	EXGPS8543M
Passport Number	
Aadhar Number	958389902942
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	02-04-1979
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	GOVERNMENT COLLEGE OF ENGINEERING TIRUNELVELI	ANNA UNIVERSITY	57	SECOND CLASS	
P.G.	M.E.	THERMAL ENGINEERING	2016	UNIVERSAL COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.68	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
OTHERS - SAMUEL POLYTECHNIC COLLEGE	OTHERS - LECTURER	23-06-2008	10-09-2010	2	2	18
OTHERS - CHANDY COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	20-06-2016	29-07-2020	4	1	10
OTHERS - PSN POLYTECHNIC COLLEGE	OTHERS - LECTURER	14-09-2010	29-07-2011	0	10	16
OTHERS - CHANDY ITI	PRINCIPAL	13-08-2020	22-12-2022	2	4	10
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	10-01-2023	13-05-2023	0	4	4
			Total	9	10	3

V. Industrial Experience :	

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

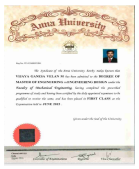
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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)

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. VIJAYA GANESA VELAN M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	B2 RAAGHAR ENCLAVE
Line 2	PILLAIYAR KOVIL STREET, SS COLONY-625016
District	MADURAI
Telephone number	-
Mobile number	+91 - 9600892665
Email	PRICIPALPSNEC@GMAIL.COM
Gender	MALE
Community	MBC
PAN Number	ANPPV6034M
Passport Number	
Aadhar Number	750435775493
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	24-02-1991
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	2012	THIAGARAJAR COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	83.6	DISTINCTION	
P.G.	M.E.	ENGINEERING DESIGN	2015	OTHERS - SVS SCHOOL OF ENGINNEERING	ANNA UNIVERSITY	76.6	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	30-01-2020	13-05-2023	3	3	15
			Total	3	3	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)

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

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.TECH.-AGRICULTURAL ENGINEERING
Name of the faculty member	MRS. SINDHAMANI M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3/81, EAST STREET, SOUTH PANAVADALI
Line 2	SANKARANKOVIL, 627953
District	OTHERS - TENKASI
Telephone number	-
Mobile number	+91 - 8056080788
Email	SINDHAMANIM@GMAIL.COM
Gender	FEMALE
Community	MBC
PAN Number	JWAPS0649E
Passport Number	
Aadhar Number	919071543934
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	09-03-1994
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.	CIVIL ENGINEERING	2015	S VEERASAMY CHETTIAR COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	69.93	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2017	ANNA UNIVESITY REGIONAL CAMPUS,TIRUNELVELI	ANNA UNIVERSITY	82.34	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
ARUL THARUM VPMM COLLEGE OF ENGINEERING AND TECHNOLOGY (FORMERLY V P MUTHAIAH PILLAI MEENAKSHI AMMAL ENGINEERING COLLEGE FOR WOMEN)	ASSISTANT PROFESSOR	21-05-2017	10-10-2019	2	4	21
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	20-01-2021	13-05-2023	2	3	25
			Total	4	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)	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	9523 - PSN ENGINEERING COLLEGE
Name of the Department	AUTOMOBILE ENGINEERING
Name of the Degree & Course	M.E.-AUTOMOBILE ENGINEERING
Name of the faculty member	MR. ARUN M R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	52 METTU STREET,VADIVEESWARAM
Line 2	NAGERCOIL
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9500426637
Email	ARUNMR1094@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	CFVPA4138K
Passport Number	
Aadhar Number	347811993867
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	
Date of Birth	12-10-1994
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.	AUTOMOBILE ENGINEERING	2016	OTHERS - NOORUL ISLAM CENTER FOR HIGHER EDUCATION	OTHERS - NOORUL ISLAM CENTER FOR HIGHER EDUCATOIN	75	FIRST CLASS	
P.G.	M.E.	AUTOMOBILE ENGINEERING	2018	OTHERS - NOORUL ISLAM CENTER FOR HIGHER EDUCATION	OTHERS - NOORUL ISLAM CENTER FOR HIGHER EDUCATION	80	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	27-01-2020	13-05-2023	3	3	18
			Total	3	3	19

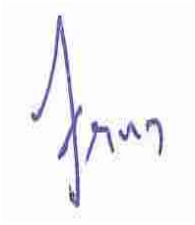
V. Industrial Experience :

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	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.TECH.-AGRICULTURAL ENGINEERING
Name of the faculty member	MR. MURUGAPERUMAL A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1H/549,TN HOUSING BOARD,
Line 2	MILERPURAM-628008
District	THOOTHUKUDI
Telephone number	-
Mobile number	+91 - 8838840931
Email	AMPERUMALME@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	CCSPM3917L
Passport Number	
Aadhar Number	532821435819
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	23-01-1995
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.	MECHANICAL ENGINEERING	2016	S S M COLLEGE OF ENGINEERING	ANNA UNIVERSITY	71	FIRST CLASS	
P.G.	M.E.	ENGINEERING DESIGN	2018	GOVERNMENT COLLEGE OF ENGINEERING TIRUNELVELI	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	20-01-2021	13-05-2023	2	3	25
			Total	2	3	26

V. Industrial Experience :

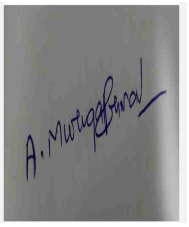
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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)

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

Signature of the Faculty :



Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. THIVAGAR A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1/1 MUPPDATHI AMMAN KOVIL SECOND STREET
Line 2	PULINYANUKUDI
District	TENKASI
Telephone number	-
Mobile number	+91 - 9894841109
Email	PRICIPALPSNEC@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	BMHPT5886P
Passport Number	
Aadhar Number	941142554927
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	14-09-1999
Age	24
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	2020	PSN COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	68	FIRST CLASS	
P.G.	M.E.	CRYOGENIC ENGINEERING	2022	PSN COLLEGE OF ENGINEERING AND 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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	22-08-2022	13-05-2023	0	8	23
			Total	0	8	27

V. Industrial Experience :	

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

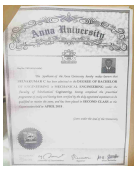
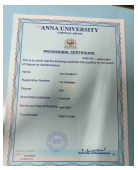
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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)

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. SELVAKUMAR C
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3/122 NAGESHWARI NAGAR
Line 2	SUBRAMANIYAPURAM MARANERI SIVAKASI
District	VIRUDHUNAGAR
Telephone number	-
Mobile number	+91 - 8098007565
Email	SELVASWAMY21@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	CVJPC5046E
Passport Number	
Aadhar Number	990310548236
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	21-09-1995
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.	MECHANICAL ENGINEERING	2018	EXCEL COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	6.3	SECOND CLASS	
P.G.	M.E.	CAD/CAM	2022	M P NACHIMUTHU M JAGANATHAN ENGINEERING COLLEGE	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	10-05-2023	13-05-2023	0	0	4
			Total	0	0	4

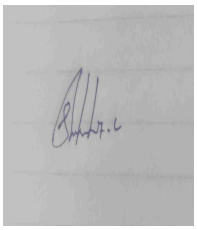
V. Industrial Experience :

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

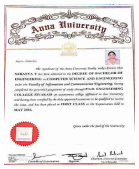
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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)

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MS. RENUKA DEVI M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	571/3 INAMANIYACHI BYPASS ROAD
Line 2	KOVILPATTI 628-501
District	THOOTHUKUDI
Telephone number	-
Mobile number	+91 - 9384695849
Email	SRUTHISUHI@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BSGPR8200J
Passport Number	
Aadhar Number	297973476093
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	
Date of Birth	05-06-1992
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.	COMPUTER SCIENCE AND ENGINEERING	2013	P.S.R.R COLLEGE OF ENGINEERING	ANNA UNIVERSITY	73.5	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2015	P.S.R.R COLLEGE OF ENGINEERING	ANNA 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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	12-06-2019	13-05-2023	3	11	2
			Total	3	11	7

V. Industrial Experience :

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

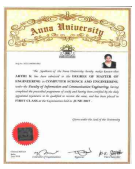
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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)

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	B.E.-GENERAL ENGINEERING
Name of the faculty member	MS. ARTHY K
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	118 PEEDAR ROAD
Line 2	MELPURAM STREET,KALLIDAIKURICHI
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9751480537
Email	ARTHIKUAMR27993@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	CSWPA7679F
Passport Number	
Aadhar Number	295424626309
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	
Date of Birth	27-09-1993
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.E.	COMPUTER SCIENCE AND ENGINEERING	2015	SACS M A V M M ENGINEERING COLLEGE	ANNA UNIVERSITY	76	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2017	PSN ENGINEERING COLLEGE	ANNA UNIVERSITY	8.4	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	02-01-2020	13-05-2023	3	4	12
			Total	3	4	14

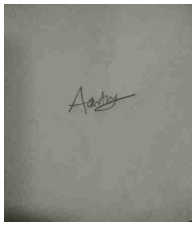
V. Industrial Experience :

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)	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	9523 - PSN ENGINEERING COLLEGE
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECH.-INFORMATION TECHNOLOGY
Name of the faculty member	MRS. SALINI T
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	264 MAIN ROAD
Line 2	PANAGUDI-627109
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 7598165960
Email	SALINI14R@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	GNWPS8261J
Passport Number	
Aadhar Number	693362754396
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1452654281
Date of Birth	14-02-1985
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.	COMPUTER SCIENCE AND ENGINEERING	2006	PET ENGINEERING COLLEGE	ANNA UNIVERSITY	72.6	FIRST CLASS	
P.G.	M.TECH.	OTHERS - COMPUTER AND INFORMATION TECHNONLEGY	2014	OTHERS - MS UNINVERSITY	MANOMANIAM SUNDARNAR UNIVERSITY	80	DISTINCTION	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION
Score :
File :

II. Title of Ph.D. Thesis	
III. Faculty in which Ph.D. was awarded	
IV. Academic Experience : **(Start from the Current working Experience) ***	

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	03-06-2014	13-05-2023	8	11	11
			Total	8	11	16

V. Industrial Experience :

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

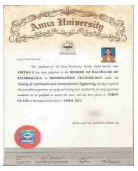
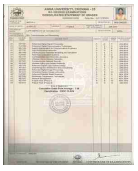
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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)

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECH.-INFORMATION TECHNOLOGY
Name of the faculty member	MRS. ABITHA JAYAPAL J
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	7/72 POTTAL JUNCTION,SOUTH SOORANKUDY POST
Line 2	DHARMAPURAM
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 8754648071
Email	ABIMARSHLIN@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BZGPJ7307D
Passport Number	BZGPJ7307D
Aadhar Number	914642037918
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	03-04-1992
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.TECH.	INFORMATION TECHNOLOGY	2013	CAPE INSTITUTE OF TECHNOLOGY	ANNA UNIVERSITY	6.98	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING(WITH SPECIALIZATION IN NETWORKS)	2015	CAPE INSTITUTE OF TECHNOLOGY	ANNA UNIVERSITY	7.68	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	12-10-2022	13-05-2023	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)

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. ABIMANYU A M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	5/217 KUNNANKADU
Line 2	KALKULAM
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9488887176
Email	PRICIPALPSNEC@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BSDPA3591L
Passport Number	
Aadhar Number	363596624436
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	10-06-1994
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.	MECHANICAL ENGINEERING	2015	SUN COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	6.8	FIRST CLASS	
P.G.	M.E.	COMPUTER INTEGRATED MANUFACTURING	2018	OTHERS - NOORUL ISLAM CENTRE FOR HIGHER EDUCATION	OTHERS - NOORUL ISLAM CENTRE FOR HIGHER EDUCATION	9.2	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	06-12-2022	13-05-2023	0	5	8
			Total	0	5	10

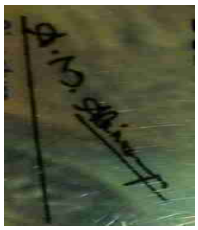
V. Industrial Experience :

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)

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
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. JEBIN STEWART S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	S.G.S VILLA KAPPUVILLAI,VERKILAMBI POST
Line 2	THIRUVATTAR-629166
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9442456116
Email	JEBINSTEWART@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	FKUPS5035J
Passport Number	
Aadhar Number	463410847395
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	11-08-1991
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	2013	ST XAVIER'S CATHOLIC COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	6.5	SECOND CLASS	
P.G.	M.E.	COMMUNICATION AND NETWORKING	2017	C S I INSTITUTE OF TECHNOLOGY	ANNA UNIVERSITY	7.26	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) ***	

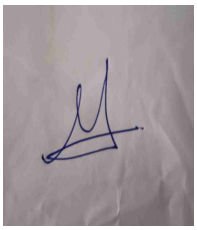
Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	04-01-2023	15-05-2023	0	4	12
			Total	0	4	14

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)	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	9523 - PSN ENGINEERING COLLEGE
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. BALASUBRAMANIAN M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	14, NORTH ANAVARATHA VINAYAGAR KOVIL STREET
Line 2	TIRUNELVELI TOWN 627-006
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9585600947
Email	BALASUBRAMANIANB6@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BVBPB6954M
Passport Number	
Aadhar Number	596504484884
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	9523248
Date of Birth	21-11-1987
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	2012	MAHAKAVI BHARATHIYAR COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	66	FIRST CLASS	
P.G.	M.E.	APPLIED ELECTRONICS (PART TIME)	2017	GOVERNMENT COLLEGE OF ENGINEERING TIRUNELVELI	ANNA UNIVERSITY	67	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	09-12-2019	15-05-2023	3	5	7
			Total	3	5	9

V. Industrial Experience :

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

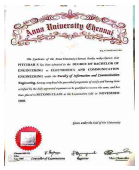
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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	9523 - PSN ENGINEERING COLLEGE
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. PITCHAIAH S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	4/244, SOUTH CAR STREET
Line 2	KADAYAM,627415
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9952782900
Email	PITCHIAHSUBU@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	DUDPS3665B
Passport Number	
Aadhar Number	963822602031
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	9523228
Date of Birth	14-04-1985
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.	ELECTRONICS AND COMMUNICATION ENGINEERING	2006	SCAD COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	70	SECOND CLASS	
P.G.	M.E.	COMMUNICATION SYSTEMS	2011	ANAND INSTITUTE OF HIGHER TECHNOLOGY	ANNA 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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	18-06-2019	15-05-2023	3	10	28
A R COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	03-06-2013	24-05-2019	5	11	22
			Total	9	10	25

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
PROPHOENIX	PROGRAMMER	DATABASE	05-07-2012	31-05-2013	0	10	27
				Total	0	10	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)
5				

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

Signature of the Faculty :