

Anna University, Chennai PSN Engineering College - 9523

Consolidated_Report

13.faculty

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Name of the College	9523 - PSN ENGINEERING COLLEGE					
Name of the Department	STRUCTURAL ENGINEEERING					
Name of the Degree & Course	M.ESTRUCTURAL 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	49					
I. Particulars of Educational Qualification : (only com	pleted)					

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	CIVIL ENGINEE RING	1997	OTHERS - THE INDIAN ENGINEE RING COLLEGE	MANOMA NIAM SUNDARN AR UNIVERSI TY	Y	SECOND CLASS	
P.G.	M.E.	STRUCTU RAL ENGINEE RING	1999	OTHERS - ANNAMAL AI UNIVERSI TY	OTHERS - ANNAMAL AI UNIVERSI TY	Y	FIRST CLASS	
PH.D.	PH.D.	STRUCTU RAL ENGINEE RING	2011	OTHERS - SATHYA BAMA UNIVERSI TY	OTHERS - SATHYA BAMA UNIVERSI TY	Y		Automatical and a second secon
* Upload Sc	anned copy o	ring of Original De	egree Certi	TY				

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) *	

Nome	the College	Decimation	Toinin	a Doto	Relieving Date / Current Date	E	xperienc	9		
Name of the College Designatio		Designation	Joining Date		for Presently Working Institutions	Years	Months	Days		
PSN ENGINI COLLEGE	EERING	PRINCIPAL	29-06-2015		03-02-2020	4	7	5		
OTHERS - SU POLYTECHN	UN IIC COLLEGE	PRINCIPAL	20-09-2	006	30-04-2011	4	7	11		
RAJAS ENGI COLLEGE	NEERING	OTHERS - LECTURER	20-07-2	000	24-08-2004	4	1	5		
PSN ENGINI COLLEGE	EERING	PRINCIPAL	15-02-2	021	04-06-2024	3	3	18		
OTHERS - N ISLAM UNIV		PROFESSOR	05-02-2	020	12-02-2021	1	0	8		
		ASSISTANT PROFESSOR	03-09-2004		18-09-2006	2	0	16		
AMRITA COLLEGE OF ENGINEERING AND TECHNOLOGY		PROFESSOR	02-05-2011		02-05-2011		28-06-2013	2	1	27
OTHERS - NOORUL ISLAM UNIVERSITY		PROFESSOR	01-07-2013		25-06-2015	1	11	25		
					Total	23	9	0		
/. Industrial	Experience :									
Name of th	e	Nature of				Experience		e		
Organisatio	Designation	n Work	Joinin	g Date	Relieving Date	Years	Months	Days		
Capacity at v AUR	Squad	s extended for the External Exa	miner	Centra	l Evaluation	Re-I	Evaluation			
(NO. 01 days)	(No. of days)Member (No. of days)(Practical) (No. of days)(No. of scripts Evaluated)					(No. of scripts Evaluated)				
t is certified	that all the infor	mation provided ar	e true to	the best o	of my knowledge.					
Signature of	the Faculty :	and.								

Name of the College	9523 - PSN ENGINEERING COLLEGE		
Name of the Department	INFORMATION TECHNOLOGY		
Name of the Degree & Course	B.TECHINFORMATION 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 : (or	ly completed)		

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	tł Univ	ne of ne rersit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Clas obtain		tificat e
U.G.	B.TECH.	OTHERS - COMPUTE R SCIENCE AND ENGINEE RING	2008	OTHERS - SRIKALAH ATEESWA RA INSTITUT E OF TECHNOL OGY	OTHI JNTU UNIV TY		66.08	FIRST CLASS		
P.G.	M.TECH.	COMPUTE R SCIENCE AND ENGINEE RING (5 YEAR INTEGRAT ED)	2012	OTHERS - SRI VENKATA SA PERUMAL COLLEGE OF ENGINEE RING TECHNOL OGY	OTHI JNTU UNIV TY	A	77.02	DISTIN ION	CT	
PH.D.	PH.D.	COMPUTE R SCIENCE AND ENGINEE RING	2017	ANNAMAL AI UNIVERSI TY	ANNA AI UNIV TY		7.7		And the second s	
* Upload Sc	anned copy o	of Original D	egree Certi	ficate.	•					
I.a. Additic Score : File :	onal Qualifi	c ation :- NO	ADDITION	AL QUALIFI	CATIO	N				
II. Title of	Ph.D. Thesi	S				ENHANCE QOS IN MANETS USING ANALYSIS OF CA AOMDV ROUTING PROTOCOL TO SECURE AND RELIABLE FOR MULTIHOPE WIRELESS NETWORK				
III. Faculty	III. Faculty in which Ph.D. was awarded					OTHERS				
	nic Experier <mark>m the Curre</mark>		Experienc	e)*						
NT	of the Cell			Icinina		/ Cu	eving Date rrent Date	E	xperienc	e
	e of the Coll	eye D	esignation	Joining 1	V		Presently /orking titutions	Years	Months	Days
PSN ENGI	NEERING CO	OLLEGE PI	ROFESSOR	03-04-2023	3	15-05	5-2023	0	1	13
							Total	0	1	13

Name of the	Designation	Nature of	Icini-	a Data	Doliouing Data	Experience						
Organisation	Decignation Joining Date		Relieving Date	Years	Months	Days						
SRI KALAHASTEES WARA INSTITUTE OF TECHNOLOGY	LECTURER	TEACHING	27-05-2008		27-05-2008		27-05-2008		30-11-2010	2	6	5
SREE INSTITUTE OF TECHNICAL EDUCATION	ASSOSCIATE PROFESSOR	TEACHING	02-07-2016		02-07-2016		02-07-2016		28-10-2017	1	3	27
ELLENKI COLLEGE OF ENGINEERING TECHNOLOGY	ASSISTANT PROFESSOR	TEACHING	HING 01-06-2012		01-06-2012		01-06-2012		12-06-2016	4	0	12
	•				Total	7	10	17				
Capacity at which AUR (No. of			niner l)	Centra (No.	ination during th l Evaluation of scripts aluated)	Re-I (No.	ear Evaluation of script: aluated)					
; is certified that	all the information	on provided are	e true to	the best o	of my knowledge.							

Name of the College	9523 - PSN ENGINEERING COLLEGE				
Name of the Department	AUTOMOBILE ENGINEERING				
Name of the Degree & Course	B.EAUTOMOBILE ENGINEERING				
Name of the faculty member	DR. KRISHNA V				
Regular Or Adjunct	Regular				
Image					
Present Designation	PROFESSOR				
Residential Address Line 1	HOUSE NO 7/B, STREET NO 7, NEAR WATER TENK, SECTOR 1, BHILAI 1, DURG, CHHATTISGARH				
Line 2 CHHATTISGARH-490001					
District	OTHERS - DURG				
Telephone number	-				
Mobile number	+91 - 9087133258				
Email	PRICIPALPSNEC@GMAIL.COM				
Gender	MALE				
Community	BC				
PAN Number	GNNPK3021D				
Passport Number					
Aadhar Number	576144908310				
Faculty code given by C.O.E.					
Faculty code given by A.I.C.T.E.	AU1				
Date of Birth	21-02-1989				
Age	35				
I. Particulars of Educational Qualification : (only completed)					

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	MECHANI CAL ENGINEE RING	2010	OTHERS - SRI PADMAVA THI COLLEGE OF ENGINEE RING	ANNA UNIVERSI TY	71	FIRST CLASS	
P.G.	M.E.	MANUFA CTURING ENGINEE RING	2014	KARPAGA VINAYAGA COLLEGE OF ENGINEE RING AND TECHNOL OGY	ANNA UNIVERSI TY	75	FIRST CLASS	
PH.D.	PH.D.	MECHANI CAL ENGINEE RING	2018	ANNAMAL AI UNIVERSI TY	ANNAMAL AI UNIVERSI TY	Y		
		ENGINEE		UNIVERSI TY	UNIVERSI	Y		

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

File :

II. Title of Ph.D. Thesis	EXPERIMENTAL INVESTIGATION OF THERMAL STORAGE ON THE PYRAMID SOLAR STILL IN PASSIVE AND ACTIVE MODE
III. Faculty in which Ph.D. was awarded	FACULTY OF MECHANICAL ENGINEERING
IV. Academic Experience : (Start from the Current working Experience) *	

Nome of the	Collogo	Decignation	Loinin	a Data	Relieving Date / Current Date	E	xperience	è
Name of the College		Designation	Joinin	g Date	for Presently Working Institutions	Years	Months	Days
VEL TECH		ASSISTANT PROFESSOR	24-05-2	014	31-07-2015	1	2	8
PSN ENGINEE COLLEGE	RING	PROFESSOR	18-09-2	023	04-06-2024	0	8	17
OTHERS - VED ENGINEERINC COLLEGE		ASSISTANT PROFESSOR	16-09-2	017	06-12-2019	2	2	21
OTHERS - SRI PADMAVATHI OF ENGINEER		OTHERS - LECTURER	03-01-2	011	02-07-2012	1	5	31
OTHERS - VEL UNIVERSITY	OTHERS - VELS ASSISTANT UNIVERSITY PROFESSOR		01-08-2015		11-08-2017	2	0	11
					Total	7	7	1
V. Industrial E	xperience	:						
Name of the	Decimpati	Nature of	Nature of		Delieving Dete	Experience		
Organisation	Designati	Work	Johnn	g Date	Relieving Date	Years	Months	Days
VI. C.O.E. App Capacity at wh		Experience : e is extended for the	e conduc	t of Exm	ination during th	e last y	ear	
AURSquadExternal Examiner(No. ofMember(Practical)days)(No. of days)(No. of days)			ıl)	Central Evaluation (No. of scripts Evaluated)		Re-Evaluation (No. of scripts Evaluated)		
It is certified the	at all the inf	formation provided ar	re true to	the best o	of my knowledge.			
Signature of th	ne Faculty	Kaist						

Name of the College	9523 - PSN ENGINEERING COLLEGE		
Name of the Department	MECHANICAL ENGINEERING		
Name of the Degree & Course	B.EMECHANICAL ENGINEERING		
Name of the faculty member	DR. JENARIS DS		
Regular Or Adjunct	Regular		
Image			
Present Designation	PROFESSOR		
Residential Address10F-7,SERVITE CONVENTLine 1STREET,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	52		
I. Particulars of Educational Qualification : (on	ly completed)		

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Nam th Univ y	ie ersit	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	MECHANI CAL ENGINEE RING	2007	GOVERN MENT COLLEGE OF ENGINEE RING TIRUNEL VELI	ANNA UNIV TY		64	SECOND CLASS	
P.G.	M.E.	MANUFA CTURING ENGINEE RING	2009	C S I INSTITUT E OF TECHNOL OGY	ANNA UNIV TY		73	FIRST CLASS	And the second s
PH.D.	PH.D.	MECHANI CAL ENGINEE RING	2019	OTHERS - ST PETERS INSTITUT E OF HIGHER EDUCATI ON AND RESEARC H	OTHE ST PETE INSTI E OF HIGH EDUC ON A RESE H	RS ITUT ER CATI ND	Y		
* Upload Sc	anned copy o	of Original De	egree Certi	ficate.					
I.a. Additio Score : File :	onal Qualific	c ation :- NO	ADDITION	IAL QUALIFI	CATIO	N			
II. Title of Ph.D. Thesis						GRO MET	UPING TEC	L STUDY OF HNIQUES A DOMESTIC LOW	
III. Faculty	y in which P	h.D. was aw	arded			FACULTY OF MECHANICAL ENGINEERING			
	nic Experien n the Curre	ice : nt working]	Experienc	e)*					

Name of the		Designation	Ioinin	g Date	Relieving Date / Current Date for Presently	Experience				
itume of the concyc		Designation	Joining Date		Working Institutions	Years	Months	Days		
	PONJESLY COLLEGE OF ASSISTANT ENGINEERING PROFESSOR			010	31-10-2015	5	1	25		
PSN ENGINEE COLLEGE	ERING	PROFESSOR	02-11-2	015	04-06-2024	8	7	3		
VINS CHRISTI COLLEGE OF ENGINEERING		ASSISTANT PROFESSOR 01-06-2009		03-09-2010	1	3	3			
	15	0	1							
V. Industrial E	7. Industrial Experience :									
Name of the	Name of the Nature of					Experience				
Organisation	Designati	on Work	Joinin	g Date	Relieving Date	Years	Months	Days		
VI. C.O.E. App Capacity at wh		xperience : is extended for the	e conduc	t of Exm	ination during th	ne last y	ear			
AUR (No. of days) 6	Squad Member (No. of days	(Practica (No. of da	External Examiner (Practical)Central (No. Eva(No. of days)Eva			l Evaluation of scripts aluated) 5 Re-Evaluation (No. of scripts Evaluated)				
It is certified the	at all the inf	ormation provided ar	re true to	the best o	of my knowledge.					
D. S. Cent										
		No. M. M.								

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	DR. SATHIYASEELAN M
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	66, SALIYA STREET
Line 2	KUTTALAM -609801
District	NAGAPATTINAM
Telephone number	-
Mobile number	+91 - 9789372287
Email	SATHIYASEELANMANISEKAR@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	DBFPS4472E
Passport Number	
Aadhar Number	523678961456
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	01-10-1988
Age	36
I. Particulars of Educational Qualification : (only comp	leted)

Category	Name of the Degree	Speciali on	izati	Year of Passing	Name the Col	Tho tho		obtaine	1 .	Class obtaine	d Certi	ficate
U.G.	B.SC.	OTHERS CHEMIS		2009	OTHER: BHARA ASAN UNIVEF	ΓHID	BHARATHI ASAN UNIVERSI'	63		RST .ASS		
P.G.	M.SC.	OTHERS CHEMIS		2011 OTHERS BHARAT ASAN UNIVER		ΓHID	BHARATHI ASAN UNIVERSI'	65		RST _ASS		
PH.D.	PH.D.	CHEMIS	TRY	7 2018 OTHERS BHARAT ASAN UNIVER		ΓHID	BHARATHI ASAN UNIVERSI	60				
* Upload Sc	anned copy of (Original D	egree	e Certificat	e.		- -					
I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION Score : File :												
II. Title of	II. Title of Ph.D. Thesis							INDOLOQUII ROUGH ECOI ES			ACRIDIN	E
III. Faculty	in which Ph.	D. was av	varde	d		FAC	ULTY OF SC	CIENCE AND	HUM	IANITIE	S	
	nic Experience n the Current		Expe	erience)*	:							
Nam	ne of the Colle	ge		Designati	ion			Relieving Dat / Current Dat for Presently		e Experienc		e
		-		-					Working Institutions		Months	Days
PSN ENGI	NEERING COL	LEGE	PRO	FESSOR		15-09	-2023	13-02-2024		0	4	29
	ANNAI COLLE SCIENECE	GE OF		ISTANT FESSOR		01-06	06-2016 02-08-2023			7	2	2
								Т	otal	7	7	4
V. Industri	al Experience	:										
Name of	Name of the								E	xperienc	e	
Organisat	ion Designat	ion	Nature of Work		Joir	ing Date	Relieving I	Date	Years	Months	Days	
	Appointment 1 t which servic			for the co	nduct of	⁻ Exmi	nation duri	ing the last	vear			
AUR (No. of days)	Squad M	ember		ternal Exa (Practic (No. of da	aminer al)		Central Ev (No. of Evaluation	valuation scripts			valuation ipts Evalı	
It is certifie	d that all the in	formation	prov	ided are tr	ue to the	best o	f my knowle	dge.				



Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MASTER OF BUSINESS ADMINISTRATION
Name of the Degree & Course	M.B.AMASTER OF BUSINESS ADMINISTRATION
Name of the faculty member	DR. MUTHUKANI R
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	12/47,RAMASAMY KOVIL STREET, PODIYANOOR,AUVAAYANOOR
Line 2	627808
District	SIVAGANGAI
Telephone number	-
Mobile number	+91 - 8883931050
Email	MUTHUKANI.RAMAR@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	HACPP8262A
Passport Number	
Aadhar Number	819648431313
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	01-06-1991
Age	33
I. Particulars of Educational Qualification : (only con	npleted)

			•	-									
Category	Name of the Degree	Specializa tion	Year of Passing	1	me o the llege	-	lame of the niversit	obtained	Class obtaine	d Certi	ficate		
U.G.	B.B.A.	BUSINESS ADMINIST RATION	2012	OTHERS - KARAMAF AJAR GOVERNM ENT ARTS COLLEGE SURANDA		R MA NL M SU AR S UN	VIVERSI	¹ 65	FIRST CLASS				
P.G.	M.B.A.	MASTER OF BUSINESS ADMINIST RATION	2014	MS		OTHERS - MS UNIVERSI		- NL SU I AR	VIVERSI	66	FIRST CLASS		
PH.D.	PH.D.	OTHERS - MS UNIVERSI TY	2022	MS		UNIVERSI		- NL SU I AR	VIVERSI	AWARDED			
OTHERS - MPHIL	OTHERS - MBA	MASTER OF BUSINESS ADMINIST RATION	2017	MS		UNIVERSI		- NL SU I AR	VIVERSI	72	FIRST CLASS		
* Upload Sc	anned copy o	f Original Deg	ree Certifi	icate.									
I.a. Additio Score : File :	onal Qualific	ation :- NO A	DDITIONA	AL QU	ALIF	ICATIC	ON						
II. Title of	Ph.D. Thesis	5				A STUDY ON THE FACTORS INFLUENCING THE FIRST GENERATION ENTREPRENEURS IN TIRUNELVELI DISTRICT							
III. Faculty	in which Pl	1.D. was awa	rded			FACU	ILTY OF	MANAGEMEN	T				
	nic Experien n the Currer	ce : nt working E	xperience)*									
Nome	of the Coller		oignotio		Ict	nine P		Relieving Date / Current Date	e E	xperience)		
	of the Colleg	De De	signation		J01	ning D		for Presently Working Institutions	Years	Months	Days		
	VPMM ARTS NCE COLLEG EN	E ASSIST PROFE			22-05-2017		,	04-12-2017	0	6	14		
								Tota	i 0	6	17		

V. Industrial Experience :

Name of th	e Designation	Nature of Work	Isining Data	Dolioving Doto	Experience		
Organisatio	Designation	Nature of work	Joining Date	Relieving Date	Years	Months	Days
	pointment Expe which service is e	rience : extended for the cond	luct of Exmination	on during the las	t year		
AUR (No. of days)	Squad Member (No. of days)	External Examin (Practical) (No. of days)	(No. o	Evaluation f scripts uated)	Re-Evaluation (No. of scripts Evaluated)		-
It is certified	that all the inform	ation provided are true	to the best of my	knowledge.			
Signature of	the Faculty -	stulei.R.					

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	AUTOMOBILE ENGINEERING
Name of the Degree & Course	M.EAUTOMOBILE 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
	29-03-1979
Date of Birth	

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Nam th Unive y	e ersit	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	MECHANI CAL ENGINEE RING	2000	GOVERN MENT COLLEGE OF ENGINEE RING TIRUNEL VELI	MANC NIAM SUND AR UNIVI TY	ARN	66	FIRST CLASS	
P.G.	M.E.	ENGINEE RING DESIGN	2005	GOVERN MENT COLLEGE OF ENGINEE RING TIRUNEL VELI	ANNA UNIVI TY		78	FIRST CLASS	
PH.D.	PH.D.	OTHERS - ROBOTIC S	2014	OTHERS - NOORUL ISLAM UNIVERSI TY	OTHE NOOR ISLAM UNIVI UTY	RUL 1	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 th	e	Deal				elieving Date / urrent Date for	Experience			
College	-	Designatio	tion Joining Date			esently Working Institutions	Years	Months	Days	
PET ENGINEERI COLLEGE	ING	OTHERS - LECTURER	29-07-20	29-07-2005		02-07-2007		11	5	
GOVERNMENT COLLEGE OF ENGINEERING TIRUNELVELI		OTHERS - GRADUATE TRAINEE	29-07-20	002	28-0)7-2005	2	11	31	
MADHA ENGINEERING COLLEGE		OTHERS - LECTURER	15-08-20	000	12-0	02-2002	1	5	29	
OTHERS - KOTTAYAM INSTITUTE OF TECHNOLOGY A SCIENCE	ND	PRINCIPAL	10-12-20	014	31-1	31-12-2018		0	22	
HINDUSTHAN COLLEGE OF ENGINEERING A TECHNOLOGY(A ONOMOUS)			1 0/1_0.7_71	04-07-2007		05-05-2009		10	2	
PSN ENGINEER COLLEGE	ING	OTHERS - DIRECTOR	02-01-20	02-01-2019)6-2024	5	5	3	
PSN COLLEGE (ENGINEERING A TECHNOLOGY (AUTONOMOUS	AND	ASSOCIATE PROFESSO		01-06-2009		12-2014	5	6	9	
						Total	23	3	15	
/. Industrial Exj	perier	nce :								
Name of the	Dosig	nation	lature of	Ioinin	g Date	Data Deligring Data		Experience		
Organisation	Desig		Work	Joinin	y Date	Relieving Date	Years	Months	Days	
VI. C.O.E. Appoi				o conduc	t of Evm	ination during th	no laet v	oar		
Capacity at which service is extended for the conduct of Exmination during the last yearAURSquadExternal ExaminerCentral EvaluationRe-Evaluation(No. ofMember(Practical)(No. of scripts(No. of scriptsdays)(No. of days)(No. of days)Evaluated)Evaluated)										
t is certified that	all the	e informatior	n provided a	re true to	the best o	of my knowledge.				
it is certified that all the information provided are true to the best of my knowledge.										

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.EELECTRONICS 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 com	pleted)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e	
U.G.	B.E.	ELECTRO NICS AND COMMUNI CATION ENGINEE RING	2001	OTHERS - VMKV ENGINEE RIN COLLEGE	UNIVERSI TY OF MADRAS	7.5	FIRST CLASS		
P.G.	M.E.	APPLIED ELECTRO NICS	2005	ARULMIG U MEENAKS HI AMMAN COLLEGE OF ENGINEE RING	ANNA UNIVERSI TY	7.8	FIRST CLASS		
PH.D.	PH.D.	VLSI DESIGN	2016	OTHERS - SATHYABA MA UNIVERSI TY	OTHERS - SATHYABA MA UNIVERSI TY	8.1			
-									
II. Title of	Ph.D. Thesis	S			CONZVEX OPTIMIZATION APPROACH TO ULTRA POWER VLSI FLOORPLAN DESIGN				
III. Faculty	y in which P	h.D. was awa	rded	(OTHERS				
IV. Acaden	nic Experien	ce :							

				_	Relieving Date / Current Date	Experience				
Name of t	the College	Designation	Joini	ng Date	for Presently Working Institutions	Years	Months	Days		
PRIYADARSH ENGINEERIN		OTHERS - LECTURER	11-05-	2001	14-07-2003	2	2	4		
SRI VENKATE COLLEGE OF AND TECHNO	ENGINEERING	ASSOCIATE PROFESSOR					24-06-2014	6	2	18
PSN ENGINE COLLEGE	ERING	PROFESSOR	03-05-	2023	13-05-2023	0	0	11		
ER PERUMAL MANIMEKAL OF ENGINEE (AUTONOMO	AI COLLEGE RING	OTHERS - SENIOR 02-06-2005 0 LECTURER		02-04-2008	2	10	1			
OTHERS - GA INSTITUTE O ENGINEERIN TECHNOLOG	F G AND	PROFESSOR	ROFESSOR 02-02-2019 2		28-03-2022	3	1	26		
PODHIGAI CC ENGINEERIN TECHNOLOG	G AND	PROFESSOR	SSOR 01-08-2014		31-01-2018	3	5	31		
		I			Total	17	11	6		
V. Industrial	Experience :									
Name of the	Designation	Nature of Work	Ioini	ng Date	Relieving Date	E	xperience	e		
Organisation	Designation		Joini	ny Date	Kellevilig Date	Years	Months	Days		
	ointment Expe		onduct	of Fymin	ation during the	last voa	r			
AUR (No. of days) 18	Squad Member (No. of days)	(Practical) (No. (l Evaluation of scripts lluated)	Re-E (No.	Evaluation of scripts aluated)				
It is certified th	at all the inform	ation provided are t	rue to t	he best of 1	my knowledge.					

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 : (onl	y completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Nam th Univ y	ie ersit	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.A.	ENGLISH	1973	OTHERS - SARAH TUCKER COLLEGE	MADU KAMA UNIV TY	ARAJ	58	SECOND CLASS	
P.G.	OTHERS - M.A.	OTHERS - ENGLISH	1993	OTHERS - MS UNIVERSI TY	MANOMA NIAM SUNDARN AR UNIVERSI TY		61	FIRST CLASS	Anna an An
PH.D.	PH.D.	ENGLISH	2011	OTHERS - MS UNIVERSI TY	MAN(NIAM SUNI AR UNIV TY	[DARN	Y		
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - ENGLISH	1994	OTHERS - MS UNIVERSI TY	MANO NIAM SUNI AR UNIV TY	[DARN	65	FIRST CLASS	
* Upload Sc	canned copy o	of Original De	egree Certi	ificate.	-				
I.a. Additio Score : File :	onal Qualifi	c ation :- NO	ADDITION	IAL QUALIFI	CATIO	N			
II. Title of	Ph.D. Thesi	S				MYTH PSYCHOLOGY REALITY INDEPTH STUDY OF EUGENE O NEILLS MAJOR PLACE			
III. Faculty	y in which P	h.D. was aw	arded			OTH	ERS		

Nama of th	o Collogo	Designation	Icinin	a Doto	Relieving Date / Current Date for Presently	E	xperience	e
Name of th	le College	Designation	Joinin	g Date	Working Institutions	Years	Months	Days
OTHERS - HO COLLEGE	OLY CROSS	ASSISTANT PROFESSOR	09-07-1973		99-07-1973 30-06-1975		11	23
J P COLLEGE ENGINEERIN		ASSISTANT PROFESSOR	01-11-2	008	30-04-2009	0	5	30
PSN ENGINE COLLEGE	ERING	PROFESSOR	01-07-2	014	17-03-2020	5	8	17
PSN ENGINE COLLEGE	ERING	PROFESSOR	01-06-2	009	30-01-2012	2	7	29
OTHERS - ST COLLEGE	MARYS	G ASSISTANT PROFESSOR		975	31-05-2008	32	10	31
Total 43 9 15							15	
V. Industrial								
Name of the	Designati	on Nature of	Ioinin	a Date	Relieving Date	E	xperience	e
Name of the Organisation	Designati	Naturo of	Joinin	g Date	Relieving Date	E Years	xperience Months	
Organisation VI. C.O.E. App	Designati	on Nature of Work Experience : b is extended for the External Exa (Practica (No. of da	e conduc miner al)	t of Exm Centra (No.		Years ne last y Re-F (No.	Months	Days
Organisation VI. C.O.E. App Capacity at w AUR (No. of days)	pointment E hich service Squad Member (No. of day	on Nature of Work Experience : e is extended for the External Exa (Practica (No. of da	e conduc miner al) ays)	t of Exm Centra (No. Ev	ination during th I Evaluation of scripts aluated)	Years ne last y Re-F (No.	ear Evaluation	Days
Organisation VI. C.O.E. App Capacity at w AUR (No. of days)	pointment E hich service Squad Member (No. of day	on Nature of Work Experience : e is extended for the External Exa (Practica (No. of da 2	e conduc miner al) ays)	t of Exm Centra (No. Ev	ination during th I Evaluation of scripts aluated)	Years ne last y Re-F (No.	ear Evaluation	Days
Organisation VI. C.O.E. App Capacity at w AUR (No. of days)	pointment E hich service Squad Member (No. of day	Nature of WorkExperience :is extended for the External Exa (Practica (No. of da 2)s)Cormation provided and	e conduc miner al) ays)	t of Exm Centra (No. Ev	ination during th I Evaluation of scripts aluated)	Years ne last y Re-F (No.	ear Evaluation	Days
Organisation VI. C.O.E. App Capacity at w AUR (No. of days)	pointment E hich service Squad Member (No. of day	Nature of WorkExperience :is extended for the External Exa (Practica (No. of da 2)s)Cormation provided and	e conduc miner al) ays)	t of Exm Centra (No. Ev	ination during th I Evaluation of scripts aluated)	Years ne last y Re-F (No.	ear Evaluation	Days

Name of the College	9523 - PSN ENGINEERING COLLEGE				
Name of the Department	MECHANICAL ENGINEERING				
Name of the Degree & Course	B.EMECHANICAL AND AUTOMATION ENGINEERING				
Name of the faculty member	DR. SELVAM M				
Regular Or Adjunct	Regular				
Image					
Present Designation	PROFESSOR				
Residential Address Line 1	2/1083 VGP NAGAR WEST VALLUDAREDDI VILLUPURAM				
Line 2	VILLUPURAM-605401				
District	VILLUPURAM				
Telephone number	-				
Mobile number	+91 - 9443291255				
Email	PRICIPALPSNEC@GMAIL.COM				
Gender	MALE				
Community	BC				
PAN Number	DBYPS0310C				
Passport Number					
Aadhar Number	429460304783				
Faculty code given by C.O.E.					
Faculty code given by A.I.C.T.E.	AU1				
Date of Birth	16-10-1969				
Age	55				
I. Particulars of Educational Qualification : (only completed)					

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Nam th Univ y	ne ersit	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	MECHANI CAL ENGINEE RING	1997	ANNAMAL AI UNIVERSI TY	ANNA AI UNIV TY		68	FIRST CLASS	
P.G.	M.E.	PRODUCT DESIGN AND DEVELOP MENT	2012	V R S COLLEGE OF ENGINEE RING AND TECHNOL OGY	ANNA UNIV TY		72	FIRST CLASS	
PH.D.	PH.D.	MECHANI CAL ENGINEE RING	2018	ANNAMAL AI UNIVERSI TY	ANNA AI UNIV TY		Y		A CONTRACTOR OF A CONTRACTOR
* Upload Sc	canned copy o	of Original De	egree Certi	ficate.					
I.a. Additio Score : File :	onal Qualific	c ation :- NO	ADDITION	IAL QUALIFI	CATIO	N			
II. Title of	Ph.D. Thesi	s				ANA	LYSIS STUI	E AND EMISS DY ON VARIC DIL AS BIO D	OUS
III. Faculty	y in which P	h.D. was aw	arded				ULTY OF M INEERING	ECHANICAL	

Name of the College		Designation	Ioinin	g Date	Relieving Date / Current Date for Presently	E	Experience	9
Name of (ine contege	Designation	John	y Date	Working Institutions	Years	Months	Days
PSN ENGINI COLLEGE	EERING	PROFESSOR	18-09-20)23	03-06-2024	0	8	16
COLLEGE O	SIR ISSAC NEWTONASSOCIATECOLLEGE OFASSOCIATEENGINEERING ANDPROFESSORTECHNOLOGYASSOCIATE		07-05-20)12	30-10-2018	6	5	24
C.K. COLLEGE OF ENGINEERING & TECHNOLOGY		ASSISTANT PROFESSOR	03-06-20)02	30-04-2012	9	10	28
	Tota							9
Name of th Organisatio	llocianotio	on Nature of Work	Joinin	g Date	Relieving Date	Experience		e I
		WOIK		-	_	Years	Months	Days
		e last year Re-Evaluation (No. of scripts Evaluated)						
	ppointment Ex which service Squad Member (No. of days	is extended for the External Exa (Practica	miner al)	Centra (No.	ination during th Il Evaluation of scripts aluated)	Re-l (No.	Evaluation of scripts	

Name of the College	9523 - PSN ENGINEERING COLLEGE			
Name of the Department	CIVIL ENGINEERING			
Name of the Degree & Course	B.TECHAGRICULTURAL ENGINEERING			
Name of the faculty member	DR. RANGANATHAN A			
Regular Or Adjunct	Regular			
Image				
Present Designation	PROFESSOR			
Residential Address Line 1	NO 235/140, KAVARAI STREET-2 SALEM			
Line 2 SALEM-636003				
District	SALEM			
Telephone number	-			
Mobile number	+91 - 8866321096			
Email	PRICIPALPSNEC@GMAIL.COM			
Gender	MALE			
Community	BC			
PAN Number	AFQPR0755M			
Passport Number				
Aadhar Number	302141204587			
Faculty code given by C.O.E.				
Faculty code given by A.I.C.T.E.	AU1			
Date of Birth	10-05-1965			
Age	59			
I. Particulars of Educational Qualification : (only completed)				

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Nam th Univ S	ersit	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	CIVIL ENGINEE RING	1986	GOVERN MENT COLLEGE OF ENGINEE RING SALEM (AUTONO MOUS)	UNIV TY OF MADI	7	67	FIRST CLASS	
P.G.	M.E.	STRUCTU RAL ENGINEE RING	2002	GOVERN MENT COLLEGE OF ENGINEE RING SALEM (AUTONO MOUS)	PERIY UNIV TY		74	FIRST CLASS	
PH.D.	PH.D.	CIVIL ENGINEE RING	2014	OTHERS - ANNA UNIVERSI TY	ANNA UNIV TY		Y		
* Upload Sc	canned copy o	of Original De	egree Certi	ficate.					
I.a. Additio Score : File :	onal Qualifi	c ation :- NO	ADDITION	IAL QUALIFI	CATIO	N			
II. Title of	Ph.D. Thesi	S				STRENGTH DURABILITY AND SELF COMPACTABILITY OF GEOPOLYMER CONCRETE			
III. Faculty	y in which P	h.D. was aw	arded			FAC	ULTY OF CI	VIL ENGINE	ERING
IV Acadon	nic Experier								

		Designation	T - 8 8	Data	Relieving Date / Current Date	E	xperience	9	
	he College	Designation	Joinin	g Date	for Presently Working Institutions	Years	Months	Days	
KING COLLE TECHNOLOG		ASSOCIATE PROFESSOR	27-11-20	014	29-12-2016	2	1	3	
OTHERS - VI UNIVERSITY ENGINEERII	SCHOOL OF	ASSOCIATE PROFESSOR	21-04-20	009	05-03-2012	2	10	15	
VELAMMAL ENGINEERII (AUTONOMO	NG COLLEGE DUS)	OTHERS - LECTURER	18-05-19	987	31-08-1992	5	3	14	
SRINIVASA (ENGINEERII	OTHERS - VELS SRINIVASA COLLEGE OF A ENGINEERING AND P FECHNOLOGY		18-02-20	004	12-03-2007	3	0	24	
OTHERS - VI SRINIVASA (ENGINEERII TECHNOLO(COLLEGE OF NG AND	ASSOCIATE PROFESSOR	13-03-20	007	08-04-2009	2	0	27	
PSN ENGINE COLLEGE	EERING	PROFESSOR	11-09-2023		04-06-2024	0	8	24	
OTHERS - AG ENGINEERII	CE NG COLLEGE	OTHERS - SENIOR LECTURER	07-08-1995		23-04-1999	3	8	17	
					Total	19	10	9	
V. Industrial	Experience :								
Name of the		Nature of Work	Joinin	g Date	Relieving Date		xperience	perience	
Organisatio		WOIK				Years	Months	Days	
-	pointment Exp which service is	perience : s extended for the	e conduc	t of Exmi	ination during t	ne last v	ear		
AUR (No. of days)	Squad Member (No. of days)	External Exa (Practica	miner l)	Centra (No.	l Evaluation of scripts aluated)	Re-I (No.	Evaluation of script aluated)		
It is certified t	that all the infor	mation provided ar	e true to	the best o	of my knowledge.				
Signature of	the Faculty :	A							

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.ECIVIL ENGINEERING
Name of the faculty member	DR. MADHAVA RAO G
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	PLAT NO 605,TRIVENI RESIDENCY,PRAGATINAGAR
Line 2	HYDRABAD,500090
District	OTHERS - HYDRABAD
Telephone number	-
Mobile number	+91 - 8899532081
Email	GMRAO71@GMAIL.COM
Gender	MALE
Community	OTHERS - BARMAR
PAN Number	ALKPM8790Q
Passport Number	
Aadhar Number	706275613914
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	17-07-1965
Age	59
I. Particulars of Educational Qualification : (on	ly completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name of the Universit y		% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e		
U.G.	B.TECH.	OTHERS - CIVIL ENGINEE RING	1989	OTHERS - UNIVERSI TY COLLEGE OF ENGINEE RING AND TECHNOL OGY	UNIVERSI TY OF MADRAS		85	DISTINCT ION			
P.G.	M.TECH.	OTHERS - STRUCTU RAL ENGINEE RING	1992	ANNAMAL AI UNIVERSI TY	ANNAMAL AI UNIVERSI TY		78	FIRST CLASS			
PH.D.	PH.D.	CIVIL ENGINEE RING	2011	OTHERS - KARUNYA UNIVERSI TY	OTHERS - KARUNYA UNIVERSI TY		90				
* Upload Sc	anned copy o	of Original De	egree Certi	ificate.							
I.a. Additio Score : File :	onal Qualific	cation :- NO	ADDITION	IAL QUALIFI	CATIO	N					
II. Title of Ph.D. Thesis							FEASIBILITY OF LIFT IRRIGATION IN STUDY AREA				
III. Faculty in which Ph.D. was awarded							FACULTY OF CIVIL ENGINEERING				

Nome of th		Designation	Joining Date		Relieving Date / Current Date for Presently	Experience		
Name of th	le Collège	Designation			Working Institutions	Years	Months	Days
OTHERS - SHF INSTITUTE OF EDUCATION		PROFESSOR	ROFESSOR 22-01-2012		30-09-2020	8	8	10
PSN ENGINEE COLLEGE	RING	PROFESSOR	ROFESSOR 18-09-2023		04-06-2024	0	8	17
OTHERS - SRI KALAHASTEES INSTITUTE OF TECHNOLOGY	SWARA	ASSOCIATE PROFESSOR	13-03-2005		22-12-2011	6	9	10
OTHERS - SRI KALAHASTEES INSTITUTE OF TECHNOLOGY	SWARA	ASSISTANT PROFESSOR	02-02-2000		12-03-2005	5	1	11
					Total	21	3	21
V. Industrial E	xperience :							
Name of the	Destantion	Nature of	Laining Data		Dell'active Dete	Experience		
Organisation	Designation	Work	Joining Date		Relieving Date	Years	Months	Days
VI. C.O.E. App Capacity at wh			e conduc	t of Exmi	ination during th	e last y	ear	
AURSquadExtern(No. ofMember(Pr		External Exa	al Examiner Centra ractical) (No.		l Evaluation	Re-Evaluation (No. of scripts Evaluated)		
(No. of	Member	(Practica (No. of day			of scripts aluated)			
(No. of days)	Member (No. of days)		ys)	Eva	aluated)			
(No. of days)	Member (No. of days)	(No. of day	ys)	Eva	aluated)			

Name of the College	9523 - PSN ENGINEERING COLLEGE				
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING				
Name of the Degree & Course	M.EVLSI 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 com	pleted)				

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	ELECTRO NICS AND COMMUNI CATION ENGINEER ING	1999	ARULMIG U MEENAKS HI AMMAN COLLEGE OF ENGINEEF ING	MADRAS	59	SECOND CLASS	
P.G.	M.E.	APPLIED ELECTRO NICS	2001	OTHERS - DR MGR ENGINEEF ING COLLEGE	UNIVERSI TY OF MADRAS	71	FIRST CLASS	
PH.D.	PH.D.	ELECTRO NICS AND COMMUNI CATION ENGINEER ING	2013	OTHERS - MANOMA NIAM SUNDARA NAR UNIVERSI TY	MANOMA NIAM SUNDARN AR UNIVERSI TY	7.8		
* Upload Sc	canned copy o	f Original Deg	ree Certifi	icate.				
I.a. Additio Score : File :	onal Qualific	ation :- NO A	DDITIONA	AL QUALIFIC	CATION			
II. Title of	Ph.D. Thesis	5		1	IR FILTER DES	SIGN USING	G BILINEAR N	METHODS
III. Faculty	y in which Pl	h.D. was awa	rded	(OTHERS			
IV. Academic Experience : (Start from the Current working Experience) *								

Nome of t	ha Callara	Designation	Designation Joining Date			E	e Experience		
Name of the College		Designation Joinin		ing Date	for Presently Working Institutions	Years	Months	Days	
OTHERS - VEL MULTTIMEDIA ENGINEERING	A	ASSISTANT PROFESSOR 20-08-2004			26-06-2006	1	10	7	
PSN ENGINEE COLLEGE	RING	PROFESSOR	11-05-	-2023	13-05-2023	0	0	3	
GOJAN SCHOO BUSINESS AN TECHNOLOGY	D	ASSISTANT PROFESSOR	03-07-	-2006	13-12-2008	2	5	11	
OTHERS - DR I ENGINEERING	-	OTHERS - LECTURER	02-07-1999		10-08-2004	5	1	9	
MEENAKSHI (ENGINEERIN(ASSOCIATE PROFESSOR 02-01-2		2009 24-09-2014		5	8	23	
					Total	15	1	25	
/. Industrial E	Experience :				I	1			
Name of the Organisation	Designation	Nature of Work	Joini	ing Date	Relieving Date	E Years	xperience Months		
						Icuis	Pionens	Duys	
		erience : extended for the co	nduct o	of Exminat	ion during the la	st year			
VI. C.O.E. App Capacity at wh AUR (No. of days) 16			ner	Central (No. c	ion during the la Evaluation of scripts luated)	Re-E (No.	valuation of scripts aluated)		
Capacity at wh AUR (No. of days) 16	nich service is Squad Member (No. of days)	extended for the con External Exami (Practical) (No. of days)	ner)	Central (No. c Eval	Evaluation of scripts luated)	Re-E (No.	of scripts		
Capacity at wh AUR (No. of days) 16	nich service is Squad Member (No. of days)	extended for the con External Exami (Practical) (No. of days) 15	ner)	Central (No. c Eval	Evaluation of scripts luated)	Re-E (No.	of scripts		

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.ECOMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	DR. SAMBASIVA RAO G
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	37-1-38,TRUNK ROAD,ONGOLE PRAKASAM
Line 2	ANDHRA PRADESH,523001
District	OTHERS - ANDHRA PRADESH
Telephone number	-
Mobile number	+91 - 9908463240
Email	RAO@GMAIL.COM
Gender	MALE
Community	OC
PAN Number	GASAS7803A
Passport Number	
Aadhar Number	845610855494
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	15-06-1968
Age	56
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	th Univ	ne of ne versit	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.TECH.	OTHERS - COMPUTE R SCIENCE	1990	OTHERS - VR SIDDHAR THA ENGG COLLEGE	OTHE NAGA NA UNIV TY	ARJU	7.3	FIRST CLASS	A CONTRACT OF CONT
P.G.	M.TECH.	OTHERS - CS AND T	1993	OTHERS - UNIVERSI TY COLLEGE OF ENGG AND TECH	OTHE ANDF UNIV TY	IRA	7.5	FIRST CLASS	
PH.D.	PH.D.	COMPUTE R SCIENCE AND ENGINEE RING	2003	OTHERS - NAGARJU NA UNIVERS UTY	OTHE NAGA NA UNIV TY	ARJU	8.3		And
* Upload Sc	anned copy o	of Original De	egree Certi	ificate.					
I.a. Additic Score : File :	onal Qualifi	c ation :- NO	ADDITION	IAL QUALIFI	CATIO	N			
II. Title of	Ph.D. Thesi	S				FAC	ULTY FOR (COMPUTER S	SCIENCE
III. Faculty	y in which P	h.D. was aw	arded			FAC	ULTY OF TE	ECHNOLOGY	
	V. Academic Experience : (Start from the Current working Experience) *								

Norma of the	0	Desimation	Tatata	- Dete	Relieving Date / Current Date	E	xperience	9
Name of the	ne of the College Designation		Joinin	ig Date	for Presently Working Institutions	Years	Months	Days
PSN ENGINEER COLLEGE	ING	PROFESSOR	11-09-2023		04-06-2024	0	8	24
OTHERS - VR SIDDARTHA EN COLLEGE	GG	ASSISTANT PROFESSOR	04-10-1	993	30-07-1999	5	9	27
OTHERS - ST AN COLLEGE OF EN TECH		PROFESSOR	03-05-2	004	30-04-2007	2	11	29
OTHERS - ML E COLLEGE	NGG	ASSOCIATE PROFESSOR	02-08-1	999	31-03-2004	4	7	30
OTHERS - ST AN ENGG AND PG (PRINCIPAL	02-05-2007		28-06-2013	6	1	27
					Total	20	4	20
V. Industrial Ex	perience :							
Name of the	Designatio	Nature of	Ioinin	a Data	Relieving Date	Experience		
Organisation	Designatio	Work	Joining Date		Kellevilly Date	Years	Months	Days
VI. C.O.E. Appoi Capacity at whic		perience : is extended for the	e conduc	t of Exm	ination during th	e last v	ear	
AUR (No. of days) (N	Centra (No.	l Evaluation of scripts aluated)	Re-I (No.	Evaluation of script aluated)				
It is certified that all the information provided are true to the best of my knowledge.								
Rac								
Signature of the	e Faculty :	16673538						

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	AUTOMOBILE ENGINEERING
Name of the Degree & Course	B.EAUTOMOBILE 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	52
I. Particulars of Educational Qualification : (only comp	leted)

	1	İ	1	1		1				
Category	Name of the Degree	Specializatio n	Year of Passing	Name of Colleg		Name of th University	bonictdo	Class obtained	d Cert	ificate
U.G.	B.E.	MECHANICA L ENGINEERIN G	1994	GOVERNME NT COLLEG OF 4 ENGINEERI G TIRUNELVE I		MANOMANI M SUNDARNA UNIVERSITY	R 60	FIRST CLA	.SS	
P.G.	M.TECH.	OTHERS - PRODUCTIO N ENGINEERIN G	2001	NATIONA ENGINEE G COLLE (AUTONC US)	ERIN GE	MANOMANI M SUNDARNA UNIVERSITY	R 64	FIRST CLA	SS	
PH.D.	PH.D.	MECHANICA L ENGINEERIN G	2018	LORD JEGANNA COLLEGE ENGINEE G AND TECHNOI Y	E OF ERIN	ANNA UNIVERSITY	Y		And Andrews	
* Upload Sc	canned copy of C)riginal Degree	Certificate	•				-		
I.a. Additic Score : File :	onal Qualificat	ion :- NO ADDI	TIONAL QI	UALIFICAT	ION					
II. Title of	Ph.D. Thesis				UL	TIFICIAL NEU TIMATE STRE ECIMEN USIN	NGTH OF CC	MPOSITE T	ENSILE	
III. Faculty	y in which Ph.I). was awarde	d		FACULTY OF MECHANICAL ENGINEERING					
IV. Acaden (<mark>Start fro</mark> i	nic Experience m the Current	: working Expe	rience) *							
Ni	ame of the Col	leae	Design	ation	Ιο	ining Date	Relieving D / Current D for Presen	ate ¹	te Experience	
		5	5		J	5	Working Institution	Vears	Months	Days
PSN ENGI	NEERING COLI	LEGE I	PROFESSO	R	14-1	12-2022	04-06-2024	1	5	22
	EGE OF ENGIN INOLOGY (AUT		ASSISTANT PROFESSO		11-(07-2005	31-12-2018	13	5	21
PARK COL AND TECH	LEGE OF ENGI INOLOGY		ASSOCIATE PROFESSO		06-0)9-2019	31-12-2019	0	3	25
J P COLLE	GE OF ENGINE	ERING I	PROFESSO	R	04-0	01-2020	11-07-2022	2	6	8
PSN COLL	EGE OF ENGIN	EERING	PROFESSO	 R	02-0	01-2019	30-04-2019	0	3	30

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	Experience			
Name of the Conege	Designation	Johning Date	Working Institutions	Years	Months	Days	
PSN ENGINEERING COLLEGE	PROFESSOR	14-12-2022	04-06-2024	1	5	22	
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	21	1	17	
V. Industrial Experience :							

Name of th	Name of the Designatio		Designation Nature of Work Joining Da		Istata a Data	Dellasta a Data	Experience		
Organisati			lation	Nature of work	Joining Date	Relieving Date	Years	Months	Days
CAFAMA AUTC PARTS LTD)	PRODUCTI ENGINEEF		PRODUCTION	04-06-1994	30-06-2000	6	0	27
						Tota	6	0	27
VI. C.O.E. Appo Capacity at wh				the conduct of Ex		-			
AUR (No. of days) 3		d Member of days)	(External Examiner (Practical) (No. of days)		aluation scripts (N))	Re-Evaluation (No. of scripts Evaluated) 48		
It is certified tha	it all th	e informatio	on provided	are true to the bes	st of my knowledge) .			
			WY						

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	M.ECOMPUTER 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	50
I. Particulars of Educational Qualification :	(only completed)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e	
U.G.	B.E.	COMPUTE R SCIENCE AND ENGINEE RING	1997	OTHERS - BHARATH IYAR UNIVERIS TY	BHARATH IYAR UNIVERSI TY	64	FIRST CLASS		
P.G.	M.TECH.	COMPUTE R SCIENCE AND ENGINEE RING (5 YEAR INTEGRAT ED)	2006	OTHERS - BHARATH UNIVERIS TY	OTHERS - BHARATH UNIVERSI TY	89	FIRST CLASS		
PH.D.	PH.D.	COMPUTE R SCIENCE ENGINEE RING	2016	OTHERS - SRM UNIVERSI TY	OTHERS - SRM UNIVERIS TY	85			
* Upload Sc	canned copy o	of Original De	gree Certi	ficate.					
I.a. Additic Score : File :					CATION				
II. Title of	Ph.D. Thesi	s			AN HIGH EFFICIENCY BREAST CANCER DETECTION USING DEEP LEARNING ALGORITHM				
III. Faculty	y in which P	h.D. was awa	arded		OTHERS				
	nic Experien <mark>m the Curre</mark>	ice : nt working l	Experienc	e)*					

Name of the			Designation	Ioini	ng Date	Relieving Date / Current Date for Presently	E	Experience	9
	conege		resignation	Jonn	ly Date	Working Institutions	Years	Months	Days
LORD AYYAPPA OF ENGINEERI TECHNOLOGY		PR	OFESSOR	16-06-2009		25-05-2017	7	11	10
ANNAI TERESA OF ENGINEERI			SISTANT OFESSOR	16-06-2	2003	21-05-2008	4	11	6
OTHERS - BRILL GRAMMER SCH EDUCATIONAL GROUP OF INST HYDERABAD	IOOL SOCITIES	PR	OFESSOR	13-06-2	2017	10-03-2020	2	8	28
PSN ENGINEEF COLLEGE	NING	PR	OFESSOR	05-05-2023		04-06-2024	1	0	31
						Total	16	8	20
Name of the Designation		on	n Nature of Work Joint		ing Date	Relieving Date	Experience		
Organisation JK INFOTECH	PROGRAMM R	1E	PROGRAMME R	16-0	5-1998	03-04-2000	Years 1	Months 9	Days 18
			ι.			Total	1	9	21
VI. C.O.E. Appointment Experience : Capacity at which service is extended for the AUR Squad External Exa (No. of Member (Practica days) (No. of days) (No. of da				niner Central Eva l) (No. of sc		nation during th l Evaluation of scripts aluated)	e last year Re-Evaluation (No. of scripts Evaluated)		-
It is certified that	t all the inform	natio	on provided are	true to	the best of	f my knowledge.			
			~ 0 I						

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.EMECHANICAL 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	39
I. Particulars of Educational Qualification : (or	ly completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Nam th Univ y	ersit	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e	
U.G.	B.E.	MECHANI CAL ENGINEE RING	2006	DR SIVANTHI ADITANA R COLLEGE OF ENGINEE RING	ANNA UNIV TY		71	FIRST CLASS		
P.G.	M.E.	MANUFA CTURING ENGINEE RING	2009	A C T COLLEGE OF ENGINEE RING AND TECHNOL OGY	ANNA UNIV TY		78	FIRST CLASS		
PH.D.	PH.D.	MECHANI CAL ENGINEE RING	2023	ALAGAPP A CHETTIAR GOVERN MENT COLLEGE OF ENGINEE RING AND TECHNOL OGY (AUTONO MOUS)	ANNA UNIV TY		Y			
* Upload Sc	anned copy o	of Original De	egree Certi	ficate.						
I.a. Additic Score : File :	onal Qualific	c ation :- NO	ADDITION	IAL QUALIFI	CATIO	N				
II. Title of	II. Title of Ph.D. Thesis						PROCESSING AND CHARACTERIZATION OF COCONUT SHELL PARTICLES REINFORCED VINYL ESTER COMPOSITES			
III. Faculty	in which P	h.D. was aw	arded				ULTY OF M INEERING	ECHANICAL		
	nic Experien n the Curre	ice : nt working I	Experienc	e)*						

Name of t	he (College	D	esignation	Ioinin	g Date	Relieving Date / Current Date for Presently	E	xperience	9	
	iii v	concge		congnition	John	g Dute	Working Institutions	Years	Months	Days	
PSN ENGINI COLLEGE	EER	ING		OCIATE FESSOR	11-10-2011		04-06-2024	12	7	25	
ENGINEERII TECHNOLO(SN COLLEGE OF NGINEERING AND ECHNOLOGY AUTONOMOUS) Industrial Experience :			ISTANT FESSOR	11-05-20	-2009 09-10-2011		2	4	30	
							Total	15	0	25	
7. Industrial	Exp	perience :									
Name of th	ne	Destant	•	Nature of	T	- Data	Dellasia a Dete	E	Experience		
Organisatio	on	Designat	lion	Work	Vork Joining Date		Relieving Date	Years	Months	Day	
VIJEY ELECTRODE AND WIRES PVT LTD	S	QUALITY CONTROI ENGINEE		QUALITY CHECKING	09-05-20)06	07-10-2007	0	10	6	
					•		Total	0	10	10	
T. C.O.E. Ap apacity at v					e conduc	t of Exm	ination during th	e last y	ear		
AUR (No. of days) 5		Squad Member Io. of days		External Exam (Practica (No. of day 2	l)	(No.	al Evaluation al Evaluation (No. of scripts valuated) Re-Evaluation (No. of scripts Evaluated)				
t is certified t	hat	all the info	rmati	on provided ar	e true to	the best o	of my knowledge.				
			(Hyst							
		Faculty :									

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.ECOMPUTER 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	41
I. Particulars of Educational Qualification : (o	only completed)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	COMPUTE R SCIENCE AND ENGINEE RING	2005	PSN COLLEGE OF ENGINEE RING AND TECHNOL OGY (AUTONO MOUS)	ANNA UNIVERSI TY	70	FIRST CLASS	
P.G.	M.E.	COMPUTE R SCIENCE AND ENGINEE RING	2007	OTHERS - VMRF UNIVERSI TY	OTHERS - VMRF UNIVERSI TY	80	FIRST CLASS	A state

* 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	Loining Data	Relieving Date / Current Date for Presently	Experience						
Name of the College	Designation	Joining Date	Working Institutions	Years	Months	Days				
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	22-05-2009	01-07-2020	11	1	11				
SN COLLEGE OF CNGINEERING AND ASSISTANT ECHNOLOGY PROFESSOR AUTONOMOUS)		13-08-2007	21-05-2009		9	9				
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	02-07-2020	04-06-2024	3 11 3		3				
		•	Total	16	9	28				
V. Industrial Experience :	V. Industrial Experience :									
Name of the Designation	Nature of	Loining Data	Polioving Data	Experience						
Organisation	on Work	Joining Date	Relieving Date	Years	Months	Days				

-	pointment Expe which service is a	rience : extended for the conduc	t of Exmination during t	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 t	that all the inform	ation provided are true to	the best of my knowledge.	
Signature of	the Faculty :	ha		

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECHINFORMATION TECHNOLOGY
Name of the faculty member	MRS. VANITHAVANI J
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	6/101, SILVER STREET
Line 2	ALANDUR - 600016
District	KANCHEEPURAM
Telephone number	-
Mobile number	+91 - 9908754765
Email	VANITHAVANI1984@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	AAGCV1902P
Passport Number	
Aadhar Number	661424159449
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	27-06-1984
Age	40
I. Particulars of Educational Qualification : (only cor	npleted)

PSN ENGINEERING COLLEGEASSOCIATE PROFESSOR11-09-202304-06-20240824	Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Nam th Unive	e	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		ificat e
P.G.M.E.COMPUTE SCIENCE AND ENGINEE RINGSRM INSTITUT E OF SCIENCE TECHNOL OGYSRM INSTITUT E OF SCIENCE TECHNOL OGY7.8FIRST CLASSIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	U.G.	B.E.	R SCIENCE AND ENGINEE	2006	DR MGR EDUCATIO N AND RESEARC H INSTITUT	DR MC EDUC N ANI RESEA H INSTI	GR ATIO) ARC	71.4		to the reference of the second s	A S And Karl Carl A S And Karl Carl A S And Karl Carl A S And Carl A
PH.D. R AND ENGINEE RING 2015 OTHERS - KARUNYA UNIVERSI TY OTHERS - TO TY OTHERS - TO TY	P.G.	M.E.	R SCIENCE AND ENGINEE	2008	SRM INSTITUT E OF SCIENCE TECHNOL	SRM INSTI E OF SCIEN TECHI	TUT ICE	7.8			
I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION Score : File : II. Title of Ph.D. Thesis III. Title of Ph.D. Thesis III. Faculty in which Ph.D. was awarded FACULTY OF TECHNOLOGY IV. Academic Experience : (Start from the Current working Experience) * Name of the College Designation Designation 11-09-2023 04-06-2024 0 8 24	PH.D.	PH.D.	R SCIENCE AND ENGINEE	2015	KARUNYA UNIVERSI	KARUI UNIVE	NYA	70			The second UNIVERSITY OF THE SECOND THE SECOND OF THE SECONDOF THE SECOND OF THE SECOND OF THE SECON
PARAMETERS MONITORING SYSTEM IN INCUBATOR USING BLYNK APP AND GSM90 III. Faculty in which Ph.D. was awarded FACULTY OF TECHNOLOGY IV. Academic Experience : (Start from the Current working Experience) * Relieving Date / Current Date for Presently Working Institutions Experience / Years Months Designation PSN ENGINEERING COLLEGE ASSOCIATE PROFESSOR 11-09-2023 04-06-2024 0 8 24	I .a. Additio Score :										
V. Academic Experience : (Start from the Current working Experience) * Relieving Date Experience Name of the College Designation Joining Date Relieving Date Experience Name of the College Associate 11-09-2023 04-06-2024 0 8 24	II. Title of	Ph.D. Thesis	6			PARAN	METE	RS MONITO	RING SY	STEM IN	
(Start from the Current working Experience) * Name of the College Designation Relieving Date / Current Date for Presently Working Institutions Years Months Date PSN ENGINEERING COLLEGE ASSOCIATE PROFESSOR 11-09-2023 04-06-2024 0 8 24	III. Faculty	in which Pl	n.D. was awa	arded		FACULTY OF TECHNOLOGY					
Name of the CollegeDesignationJoining Date/ Current Date for Presently Working InstitutionsExperiencePSN ENGINEERING COLLEGEASSOCIATE PROFESSOR11-09-202304-06-20240824	IV. Academ (Start from	nic Experien n the Currer	ce : nt working F	Experience	e)*						
PSN ENGINEERING COLLEGEASSOCIATE PROFESSOR11-09-202304-06-20240824	Nome	the College	Deci	mation	Toinin -	Data	/ Cu	rrent Date	e Experience		
COLLEGE PROFESSOR 11-09-2023 04-06-2024 0 8 24	name oi	the College	Working		Vorking	Years	Months	Days			
Total 0 8 28		NEERING			04-06-2024		0	8	24		
								Total	0	8	28

Name of the		Nature of Work Joining Date		Delievin a Dete	Experience				
Organisatio			Joining Date	Relieving Date	Years	Months	Days		
-	pointment Expe /hich service is		conduct of Exmi	nation during the	last yea	ar			
AUR (No. of days)	No. of Member (Practical) (No. of scripts						Re-Evaluation (No. of scripts Evaluated)		
is certified t	hat all the inform	ation provided are	true to the best o	f my knowledge.					
	٦	rethan							

Name of the College	9523 - PSN ENGINEERING COLLEGE		
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING		
Name of the Degree & Course	B.EELECTRONICS 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	44		
I. Particulars of Educational Qualification : (only com	pleted)		

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	ELECTRO NICS AND COMMUNI CATION ENGINEE RING	2005	PSN COLLEGE OF ENGINEE RING AND TECHNOL OGY (AUTONO MOUS)	ANNA UNIVERSI TY	Y	FIRST CLASS	
P.G.	M.E.	APPLIED ELECTRO NICS	2010	PSN COLLEGE OF ENGINEE RING AND TECHNOL OGY (AUTONO MOUS)	ANNA UNIVERSI TY	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) \ast

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently	Experience		
Name of the Conege	Designation	Joining Date	Working Institutions	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	04-06-2024	1	1	2
PSN COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	OTHERS - LECTURER	01-02-2006	30-07-2007	1	5	27
			Total	15	4	28
V. Industrial Experience :						

Name of th	e Designation	- Designation Natiire of Work Joining Date Relieving Date		Joining Date R		Experience		
Organisatio	n			Keneving Date	Years Months Da		Days	
	pointment Expe vhich service is		conduct of	f Exmin	ation during the	last yea	ar	
Capacity at which service is extended for the conduct of Exmination during the last yearAUR (No. of days)Squad Member 								
t is certified t	that all the inform	ation provided are	true to the	best of	my knowledge.			
		ALA						
		Appenc						
Signature of	gnature of the Faculty :							

Name of the College	9523 - PSN ENGINEERING COLLEGE				
Name of the Department	MECHANICAL ENGINEERING				
Name of the Degree & Course	B.EMECHANICAL 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	39				
I. Particulars of Educational Qualification : (only completed)					

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name the Unive y	e	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.TECH.	OTHERS - LEATHER TECHNOL OGY	2007	OTHERS - BHARATH INSTITUT E OF TECHNOL OGY	ANNA UNIVE TY		6.3	FIRST CLASS	
P.G.	M.E.	INDUSTRI AL ENGINEE RING	2010	THIAGAR AJAR COLLEGE OF ENGINEE RING (AUTONO MOUS)	ANNA UNIVE TY		7.65	FIRST CLASS	
PH.D.	PH.D.	MECHANI CAL ENGINEE RING	2015	THIAGAR AJAR COLLEGE OF ENGINEE RING (AUTONO MOUS)	ANNA UNIVE TY		Y		
* Upload Sc	anned copy o	of Original De	egree Certi	ificate.	-		-	-	·
I.a. Additic Score : File :	onal Qualifi	c ation :- NO	ADDITION	IAL QUALIFI	CATION	1			
II. Title of	Ph.D. Thesi	S				SELE STUI	ECTION SU	NALYSIS AN STAINABLE I AN MANUFA	PROGRAM A
III. Faculty	y in which P	h.D. was aw	arded				ULTY OF M INEERING	ECHANICAL	
	nic Experier m the Curre	ice: nt working]	Experienc	e)*					

Name of the College		Designation	Ioinin	g Date	Relieving Date / Current Date for Presently	Experience		
Name of th	e conege	Designation	John	ly Date	Working Institutions	Years	Months	Days
THIAGARAJAR OF ENGINEER (AUTONOMOU	RING	OTHERS - RESEARCH	18-05-2010		31-01-2013	2	8	14
PSN ENGINEE COLLEGE	RING	PROFESSOR	15-09-2	021	03-06-2024	2	8	19
P G P COLLEG ENGINEERING TECHNOLOGY	G AND	PROFESSOR	01-07-2	020	14-09-2021	1	2	14
V S B ENGINE COLLEGE (AUTONOMOU		ASSOCIATE PROFESSOR 01-02		016	30-06-2020	4	4	29
OF ENGINEER	THIAGARAJAR COLLEGE OF ENGINEERING (AUTONOMOUS)		01-02-2013		18-09-2015	2	7	18
			•		Total	13	8	8
V. Industrial E	xperience :							
Name of the	Designation	Nature of	Ioinin	g Date	Relieving Date	Experience		
Organisation		Work	John	ly Date	Keneving Date	Years	Months	Days
VI. C.O.E. Appointment Experience :								
			e conduc	t of Exm	ination during th	e last v	ear	
Capacity at wh AUR (No. of		s extended for the External Example (Practica	miner l)	Centra (No.	ination during th I Evaluation of scripts aluated) 10	Re-E (No.	ear Evaluation of scripts aluated) 2	
Capacity at wh AUR (No. of days) 28	nich service i Squad Member (No. of days) 2	s extended for the External Exa (Practica (No. of da	miner l) ys)	Centra (No. Ev	l Evaluation of scripts aluated) 10	Re-E (No.	Evaluatior of scripts aluated)	
Capacity at wh AUR (No. of days) 28	tich service i Squad Member (No. of days) 2 at all the infor	s extended for the External Exam (Practica (No. of day 10	miner l) ys)	Centra (No. Ev	l Evaluation of scripts aluated) 10	Re-E (No.	Evaluatior of scripts aluated)	

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.ECOMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	DR. KANIMOZHI J
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	15,BHARATHI NAGAR,TIRUPATTUR
Line 2	TIRUPATTUR TK,635601
District	TIRUPATHUR
Telephone number	-
Mobile number	+91 - 9966532675
Email	KANI@GMAIL.COM
Gender	FEMALE
Community	ос
PAN Number	BDKPK3836N
Passport Number	
Aadhar Number	707843172087
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	05-04-1990
Age	34
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Nam th Univ y	ersit	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Clas: obtain		ificat e
U.G.	B.TECH.	OTHERS - CSE	2011	OTHERS - ANNA UNIVERSI TY COLLEGE	ANNA UNIV TY		72	FIRST CLASS	Let un the second secon	
P.G.	M.TECH.	COMPUTE R SCIENCE AND ENGINEE RING (5 YEAR INTEGRAT ED)	2013	VEL TECH	OTHE VEL 7 UNIV TY	ГЕСН	8.55	FIRST CLASS	A set of the set of th	However, and the second
PH.D.	PH.D.	COMPUTE R SCIENCE AND ENGINEE RING	2018	ANNAMAL AI UNIVERSI TY	ANNA AI UNIV TY		8.1		John Maria	DURA CARACTERISTICS
* Upload Sc	anned copy o	of Original De	egree Certi	ficate.						
I.a. Additic Score : File :	onal Qualific	ation :- NO	ADDITION	IAL QUALIFI	CATIO	N				
II. Title of	Ph.D. Thesi	5				FACULTY OF COMPUTER SCIENCE				E
III. Faculty	y in which P	h.D. was aw	arded			FACULTY OF TECHNOLOGY				
	nic Experien n the Curre		Experienc	e)*						
						/ Cu	eving Date rrent Date	E	xperience	e
Name of	f the College	e Desig	JNATION	Joining I	Date	N	Presently /orking titutions	Years	Months	Days
PSN ENGI COLLEGE	NEERING	ASSOCIA PROFESS		11-09-2023	3	04-06	5-2024	0	8	24
ARCHANA OF TECHN	INSTITUTE IOLOGY	ASSOCIA PROFES		07-01-2013	}	24-03	3-2014	1	2	18
S R I COLI ENGINEEI TECHNOL	RING AND	ASSOCIA PROFES		05-05-2014	Ŀ	24-11	-2014	0	6	20
							Total	2	6	5

V. Industrial	Experience :							
Name of the	Designation	Designation Nature of Joining		a Doto	Polioving Data	Experience		
Organisatio	n Designation	Work	Joining Date		Relieving Date	Years	Months	Days
-	VI. C.O.E. Appointment Experience : Capacity at which service is extended for the conduct of Exmination during the last yea							
AUR (No. of days)	Squad Member (No. of days)	Squad External Examiner Centra ember (Practical) (No.				l Evaluation Re-Evaluation of scripts (No. of scripts aluated) Evaluated)		
It is certified t	hat all the inform	ation provided ar	e true to	the best o	of my knowledge.			
		1. 1.						
	17	Kanimozhi						
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.ECOMPUTER 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	35
I. Particulars of Educational Qualification : (only con	npleted)

Category	Name of the Degree Specializa tion		Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	COMPUTE R SCIENCE AND ENGINEE RING	2010	SOLAMAL AI COLLEGE OF ENGINEE RING	ANNA UNIVERSI TY	76	FIRST CLASS	
P.G.	M.TECH.	OTHERS - NETWORK ING	2012	OTHERS - KALASALI NGAM UNIVERSI TY	OTHERS - KALASALI NGAM UNIVERSI TY	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	Experience		
Name of the Conege	Designation	Joining Date	Working Institutions	Years	Months	Days
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	04-06-2022	04-06-2024	2	0	1
PSN ENGINEERING COLLEGE PROFESSOR		01-06-2012	03-06-2022	10	0	3
	12	0	4			

V. Industrial Experience :

Name of the	Decimation	Nature of Work	Joining Data	Polioving Data	E	Experience		
Organisation	Designation	Nature of work	Joining Date	Keneving Date	Years	Months	Days	

VI. C.O.E. Appointment Experience :

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

AUR (No. of days) 20Squad Member (No. of days)	External Examiner (Practical) (No. of days) 5	Central Evaluation (No. of scripts Evaluated) 150	Re-Evaluation (No. of scripts Evaluated) 100	
---	--	--	--	--

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

Manitha

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.ECIVIL 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	40
I. Particulars of Educational Qualification : (only comp	leted)

		•		1	•			
Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	CIVIL ENGINEE RING	2007	SUN COLLEGE OF ENGINEE RING AND TECHNOL OGY	ANNA UNIVERSI TY	75	FIRST CLASS	
P.G.	M.E.	STRUCTU RAL ENGINEE RING	2010	R V S COLLEGE OF ENGINEE RING AND TECHNOL OGY (AUTONO MOUS)	ANNA UNIVERSI TY	80	FIRST CLASS	
PH.D.	PH.D.	CIVIL ENGINEE RING	2019	OTHERS - IRTT ERODE	ANNA UNIVERSI TY	Y		
* Upload Sc	anned copy o	f Original De	gree Certif	licate.				
I.a. Additio Score : File :	onal Qualific	ation :- NO A	ADDITION.	AL QUALIFIC	ATION			
II. Title of Ph.D. Thesis					IMPACT OF NANO ADMIXTURES TO IMPROVE THE DURABILITY AND STRENGTH OF CONCRETE			
III. Faculty	y in which P	h.D. was awa	rded		FACULTY OF	F CIVIL ENG	GINEERING	
IV. Academic Experience : (Start from the Current working Experience) *								

					Relieving Date / Current Date	E	Experience		
Name of t	he College	Designation	Joining Date		for Presently Working Institutions	Years	Months	Days	
PSN ENGINEERING COLLEGE		ASSOCIATE PROFESSOR	28-10-2022		04-06-2024	1	7	8	
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	
ARUNACHAL OF ENGINEE WOMEN		ASSISTANT PROFESSOR	01-07-2010		31-01-2020	9	6	31	
	•		Total		15	3	10		
V. Industrial	Experience :								
Name of the						E	xperience		
Organisation	Inocianation	Nature of Work	Joining Date Relieving		Relieving Date	Years	Months	Days	
	pointment Expo	erience : extended for the co	onduct	of Fymina	ation during the	last vea	r		
AUR (No. of days) 10	Squad Member (No. of days)	External Exam (Practical) (No. of days 4	iner			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.TECHINFORMATION 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 : (onl	ly completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Nam th Univ y	ersit	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.TECH.	INFORMA TION TECHNOL OGY	2009	OTHERS - JAWAHAR LAL NEHRU TECHNOL OGICAL	AHAR RLAL NEHRU IRU TECHNOL HNOL OGICAL		72	FIRST CLASS	
P.G.	M.TECH.	COMPUTE R SCIENCE AND ENGINEE RING (5 YEAR INTEGRAT ED)	2011	OTHERS - JAWAHAR JAWAHAR LAL		HAR RU INOL AL	66.10	FIRST CLASS	
PH.D.	PH.D.	COMPUTE R SCIENCE ENGINEE RING	2016	OTHERS - HINDUST AN INSTITUT E OF TECHNOL OGY SCIENCE	OTHE HIND AN UNIV TY	UST	7.7		
* Upload Sc	anned copy o	of Original De	egree Certi	ificate.					
I.a. Additio Score : File :	onal Qualifi	cation :- NO	ADDITION	IAL QUALIFI	CATIO	N			
II. Title of	II. Title of Ph.D. Thesis							SIS OF NOVI SS LAYER CO	EL ONTROLLER
III. Faculty	y in which P	h.D. was aw	arded			ОТН	ERS		
	V. Academic Experience : Start from the Current working Experience) *								

Name of the College OTHERS - SHREE INSTITUTE OF TECHNICAL EDUCATION		Designation	Joining Date		Relieving Date / Current Date for Presently	Experience		
		Designation	John	g Date	Working Institutions	Years	Months	Days
		ASSISTANT PROFESSOR	10-05-2	016	30-12-2022	6	7	21
PSN ENGINEERING COLLEGE		ASSOCIATE PROFESSOR	05-05-2	023	15-05-2023	0	0	11
					Total	6	8	5
V. Industrial	Experience	:						
Name of the	Destant	Nature of	l loining listo		Delieurine Dete	Experience		
Organisation	Designati	Work			Relieving Date	Years	Months	Days
	hich service Squad	xperience : is extended for the External Exa			ination during th l Evaluation		ear Evaluatior	1
	hich service	Extended for the External Exa (Practica	miner 1)	Centra (No.		Re-I (No.		
Capacity at w AUR (No. of days)	hich service Squad Member (No. of day	Extended for the External Exa (Practica	miner 1) ys)	Centra (No. Eva	l Evaluation of scripts aluated)	Re-I (No.	Evaluatior of scripts	
Capacity at w AUR (No. of days)	hich service Squad Member (No. of day	s is extended for the External Exa (Practica s) (No. of da	miner 1) ys)	Centra (No. Eva	l Evaluation of scripts aluated)	Re-I (No.	Evaluatior of scripts	
Capacity at w AUR (No. of days)	hich service Squad Member (No. of day	s is extended for the External Exa (Practica s) (No. of da	miner 1) ys)	Centra (No. Eva	l Evaluation of scripts aluated)	Re-I (No.	Evaluatior of scripts	
Capacity at w AUR (No. of days)	hich service Squad Member (No. of day	s is extended for the External Exa (Practica s) (No. of da	miner 1) ys)	Centra (No. Eva	l Evaluation of scripts aluated)	Re-I (No.	Evaluatior of scripts	

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.EMECHANICAL 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	44
I. Particulars of Educational Qualification : (only	completed)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANI CAL ENGINEER ING	2002	C S I INSTITUTE OF TECHNOL OGY	MANOMA NIAM SUNDARN AR UNIVERSI TY	61	SECOND CLASS	
P.G.	M.E.	MANUFAC TURING ENGINEER ING	2009	C S I INSTITUTE OF TECHNOL OGY	ANNA UNIVERSI TY	78.5	FIRST CLASS	A the second sec
PH.D.	PH.D.	MATERIAL SCIENCE AND ENGINEER ING	2020	NATIONAL ENGINEER ING COLLEGE (AUTONO MOUS)	ANNA UNIVERSI TY	Y		

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) *	

(Start from the Current working Experience) *

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently	Experience			
Name of the Conege	Designation	Joining Date	Working Institutions	Years	Months	Days	
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	24-11-2021	04-06-2024	2	6	11	
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	15	3	11	

V. Industrial	Experience :							
Name of the Organisation Designation		Nature of Work	Joining Date		Relieving Date		ExperienceYearsMonthsDays	
	pointment Expension which service is e	rience : xtended for the con	duct	of Exminati	on during the la	ist year		
AUR (No. of days) 17	Squad Member (No. of days)	External Examir (Practical) (No. of days) 2) (No. of s			Re-Evaluation (No. of scripts Evaluated)		
It is certified t	hat all the informa	ation provided are true	e to th	ne best of my	knowledge.			
Signature of	the Faculty :	hujutih						

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.EMECHANICAL 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	44
I. Particulars of Educational Qualification :	(only completed)

Category Name of the Degree Specializa tion		Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e	
U.G.	B.E.	MECHANI CAL ENGINEE RING	2004	C S I INSTITUT E OF TECHNOL OGY	MANOMA NIAM SUNDARN AR UNIVERSI TY	64.5	FIRST CLASS	
P.G. M.E. MANUFAC TURING ENGINEE RING		2006	C S I INSTITUT E OF TECHNOL OGY	ANNA UNIVERSI TY	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		Desimation	Toinin	- Data	Relieving Date / Current Date	E	Experience	e		
	the College	Designation	Joinin	ıg Date	for Presently Working Institutions	Years	Months	Days		
M I E T ENGINEERING COLLEGE (AUTONOMOUS)		ASSISTANT PROFESSOR			29-11-2013	1	11	30		
FRANCIS XA ENGINEERII (AUTONOM)	NG COLLEGE	ASSISTANT PROFESSOR	27-06-2	016	17-11-2016	0	4	21		
VINS CHRIS COLLEGE OI ENGINEERII	7	OTHERS - LECTURER	10-08-2	006	23-06-2008	1	10	14		
PSN ENGINI COLLEGE	EERING	ASSOCIATE PROFESSOR	05-07-2	019	03-06-2024	4	10	30		
KALAIVANA COLLEGE OI ENGINEERII (FORMERLY COLLEGE OI ENGINEERII	F NG KNSK F	ASSISTANT PROFESSOR	04-12-2	013	14-05-2016	2	5	11		
UDAYA SCH ENGINEERII		OTHERS - LECTURER			008 12-11-2011		4	10		
PSN ENGINI COLLEGE	EERING	ASSISTANT PROFESSOR	02-01-2017		02-07-2019	2	6	1		
					Total	17	5	2		
V. Industrial	Experience :									
Name of th		Nature of	Ioinir	ng Date	Relieving Date	E	Experience	e		
Organisatio	n	Work	Joinin	ly Date	Kellevilly Date	Years	Months	Days		
	pointment Exj vhich service i	perience : s extended for the	conduc	t of Exmi	ination during th	e last y	ear			
AUR (No. of days) 12	External Exar (Practica (No. of day	l)	(No.	ll Evaluation of scripts aluated)	(No.	Evaluatior of script: aluated)				
It is certified	hat all the infor	mation provided are	e true to	the best c	of my knowledge.					
	th.	1								
	Front									
Signature of	Signature of the Faculty : \ Given									

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. ARUMUGASELVI P
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	79, ANNATHANA VINAYAGA KOIL STEET
Line 2	PETTAI-627004
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9952256936
Email	PSELVI56SM@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BQEPA1901M
Passport Number	
Aadhar Number	973321188956
Faculty code given by C.O.E.	9523321
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	29-05-1974

Category	Name of the Degree	Specializ ation	tł Univ	ne of ne versit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e			
U.G.	OTHERS - B.LITT	OTHERS - TAMIL	2000	OTHERS - MADRAS UNIVERS TIY	OTHE MADI UNIV Y	RAS	45	SECOND CLASS		
P.G. OTHERS - OTHERS - OTHERS - OTHERS - A UNIVERSI UN M.A OTHERS - TAMIL 2005							58	SECOND CLASS		
PH.D. PH.D. OTHERS - TAMIL 2017 OTHERS - MA DTHERS - TAMIL 2017 OTHERS - MIA MDT SUD HINDU AR COLLEGE UN TY							60			
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - TAMIL	AR		67	FIRST CLASS				
* Upload Scanned copy of Original Degree Certificate.										
I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION Score : File :										
II. Title of	Ph.D. Thesi	S				CON	FC ELAKKU TRIBUTION CREATIVIT	I TO TAMIL I	LITERATURE	

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

OTHERS

Name of the	o Collogo	Designation	Ioinin	g Date	Relieving Date / Current Date for Presently	E	xperience	9			
Name of the	e conege	Designation	John	ly Date	Working Institutions	Years	Months	Days			
PSN ENGINEE COLLEGE	ERING	ASSOCIATE PROFESSOR	29-09-2	023	05-06-2024	0	8	7			
OTHERS - ALA LIBERAL ARTS SCIENCE COL	S AND	ASSISTANT PROFESSOR	19-06-2	023	28-09-2023	0	3	10			
OTHERS - MD' COLLEGE	T HINDU	ASSISTANT PROFESSOR	03-12-2	012	09-12-2014	2	0	7			
OTHERS - RAN GOVERNMEN COLLEGE		ASSISTANT PROFESSOR	02-07-2	018	04-05-2023	4	10	3			
			•		Total	7	9	2			
7. Industrial Experience : Name of the Nature of Experience											
Name of the		Nature of	Ioinin	a Data	Polioving Date	E	xperience	e			
	Designati	Nature of	Joinin	ıg Date	Relieving Date	E Years	xperience Months	e Days			
Name of the Organisation VI. C.O.E. App Capacity at wh AUR (No. of	Designati	on Nature of Work xperience : is extended for th External Exa (Practica	e conduc miner al)	t of Exm Centra (No.		Years he last y Re-I (No.	Months	Days			
Name of the Organisation VI. C.O.E. App Capacity at wh AUR (No. of days)	Designati pointment E hich service Squad Member (No. of day	on Nature of Work xperience : is extended for th External Exa (Practica	e conduc uminer al) ays)	t of Exm Centra (No. Ev	ination during t I Evaluation of scripts aluated)	Years he last y Re-I (No.	Months ear Evaluation of scripts	Days			
Name of the Organisation VI. C.O.E. App Capacity at wh AUR (No. of days)	Designati pointment E hich service Squad Member (No. of day	on Nature of Work xperience : is extended for th External Exa (Practica s) (No. of da	e conduc uminer al) ays)	t of Exm Centra (No. Ev	ination during t I Evaluation of scripts aluated)	Years he last y Re-I (No.	Months ear Evaluation of scripts	Days			
Name of the Organisation VI. C.O.E. App Capacity at wh AUR (No. of days)	Designati pointment E hich service Squad Member (No. of day	on Nature of Work xperience : is extended for th External Exa (Practica s) (No. of da	e conduc uminer al) ays)	t of Exm Centra (No. Ev	ination during t I Evaluation of scripts aluated)	Years he last y Re-I (No.	Months ear Evaluation of scripts	Days			
Name of the Organisation VI. C.O.E. App Capacity at wh AUR (No. of days)	Designati Dointment E hich service Squad Member (No. of daya nat all the inf	on Nature of Work xperience : is extended for th External Exa (Practica (No. of da ormation provided at	e conduc uminer al) ays)	t of Exm Centra (No. Ev	ination during t I Evaluation of scripts aluated)	Years he last y Re-I (No.	Months ear Evaluation of scripts	Days			

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.ECIVIL 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	ССОРК4843Н
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	39
I. Particulars of Educational Qualification : (on	ly completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	CIVIL ENGINEE RING	2006	AMRITA COLLEGE OF ENGINEE RING AND TECHNOL OGY	ANNA UNIVERSI TY	Y	FIRST CLASS	Remote
P.G.	M.E.	SOIL MECHANI CS AND FOUNDAT ION ENGINEE RING	2008	COLLEGE OF ENGINEE RING GUINDY	ANNA UNIVERSI TY	Y	FIRST CLASS	
-		of Original De c ation :- NO	CATION					

III. Faculty in which Ph.D. was awarded

Name of the (Designation Joining Date		Relieving Date / Current Date	Experience			
Name of the (Jonege	Designation	Joining Date	for Presently Working Institutions	Years	Months	Days	
PSN ENGINEER COLLEGE		SSISTANT ROFESSOR	20-05-2009	11-07-2019	10	0 1 2		
PSN ENGINEER COLLEGE		SSOCIATE ROFESSOR	12-07-2019	04-06-2024	4	4 10 24		
	·			Total	15	0	17	
V. Industrial Experience :								
Name of the	Designation	Nature of	Joining Date	Relieving Date	Experience			

Name of the OrganisationDesignationNature of WorkJoining DateRelieving DateExperienceYearsMonthsDays	Name of the	Designation	Nature of	Joining Date	Relieving Date	xperience	,
	Organisation	Designation	Work	Joining Date		Months	Days

	ppointment Expe which service is (rience : extended for the conduc	t 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 inform	ation provided are true to	the best of my knowledge	
	B	R. Ramy		
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	DR. ARUN BALAJI R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	76, VALARPURAM
Line 2	PERUNGULATHUR-604407
District	CHENNAI
Telephone number	-
Mobile number	+91 - 8015476077
Email	ARUNREVATHY4@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AFJPR7643J
Passport Number	
Aadhar Number	145959866987
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	05-05-1981
Age	43
I. Particulars of Educational Qualification : (only complet	ed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e		
U.G.	B.SC.	OTHERS - PHYSICS	2002	OTHERS - UNIVERSI TY OF MADRAS	UNIVERSI TY OF MADRAS	65	FIRST CLASS			
P.G. M.SC. OTHERS - 2005 OTHERS - UNIVERSI TY OF MADRAS 68 FIRST CLASS										
PH.D. PH.D. OTHERS - 2011 OTHERS - UNIVERSI TY OF MADRAS 60 60										
* Upload Scanned copy of Original Degree Certificate.										
I.a. Additic Score : File :	I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION Score :									

II. Title of Ph.D. Thesis	MOLECULAR CONFORMATIONAL STUDIES ON SOME ANTIBIOTICAL DURGS
III. Faculty in which Ph.D. was awarded	FACULTY OF SCIENCE AND HUMANITIES
IV. Academic Experience : (Start from the Current working Experience) *	

Name of the College	Designation	Laining Data	Relieving Date / Current Date for Presently	Experience			
Name of the College	Designation	Joining Date	Working Institutions	Years	Months	Days	
OTHERS - WOLLEGA UNIVERSITY	ASSOCIATE PROFESSOR	24-10-2017	30-07-2019	1	9	7	
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	18-09-2023	13-02-2024	0	4	26	
G R T INSTITUTE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	15-10-2010	11-03-2013	2	4	28	
SAVEETHA ENGINEERING COLLEGE (AUTONOMOUS)	ASSISTANT PROFESSOR	13-06-2013	03-04-2014	0	9	21	
RAJIV GANDHI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	08-10-2008	10-06-2010	1	8	3	
OTHERS - VIGNAN JYOTHI INSTIUTE OF ENGINEERING AND TECHNOLOGY	ASSOCIATE PROFESSOR	07-12-2016	11-10-2017	0	10	5	
VEL TECH	ASSOCIATE PROFESSOR	07-05-2014	09-06-2015	1	1	3	
		•	Total	9	0	5	
V. Industrial Experience :							
Name of the Designation	Nature of	Joining Date	Relieving Date	Experience		9	
Organisation	Work			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	Squad	External Examiner	Central Evaluation	Re-Evaluation				
(No. of	Member	(Practical)	(No. of scripts	(No. of scripts				
days)	(No. of days)	(No. of days)	Evaluated)	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.EELECTRONICS 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	55
I. Particulars of Educational Qualification : (only com	pleted)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	ELECTRO NICS AND COMMUNI CATION ENGINEER ING	1992	OTHERS - KARUNYA INSTITUT E OF TECHNOL OGY	BHARATHI YAR UNIVERSI TY	Y	SECOND CLASS	A state of the sta
P.G.	M.E.	POWER ELECTRO NICS AND DRIVES	2010	OTHERS - SATHYABA MA UNIVERSI TY	OTHERS - SATHYABA MA UNIVERSI TY	Y	FIRST CLASS	

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

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently	Experience					
Name of the Coneye	Designation	Joining Date	Working Institutions	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	04-06-2024	1	1	2			
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	28	9	10			
V. Industrial Experience :	V. Industrial Experience :								

Name of th	e	Desimution	Nature of	Tala	in a Data	Relieving	E	xperience	e
Organisatio	n	Designation	Work	Join	ing Date	Date	Years	Months	Days
THE INDIA CEMENTS LT SANKAR NAGAR TIRUNELVEI		GRADUATE ENGINEER TRAINEE	ADMINISTRATI ON PRIVE MAINTENANC E	PRIVE 23-08-1993 2		23-08-1994	1	0	1
						Total	1	0	1
	(No. of days)Squad Member (No. of days)(Practical) (No. of days)(No. of scripts Evaluated)(No. of sc Evaluated)					Evaluation of scripts aluated)	-		
It is certified t	hat	all the informatio	n provided are tru	ie to th	e best of m	y knowledge.			
Signature of	the	P	Part V						

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	AUTOMOBILE ENGINEERING
Name of the Degree & Course	M.EAUTOMOBILE 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 - 0000000
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	42
I. Particulars of Educational Qualification : (only	completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	MECHANI CAL ENGINEE RING	2003	DR SIVANTHI ADITANA R COLLEGE OF ENGINEE RING	MANOMA NIAM SUNDARN AR UNIVERSI TY	63	FIRST CLASS	
P.G.	M.E.	COMPUTE R AIDED DESIGN	2014	ANNA UNIVESIT Y REGIONA L CAMPUS, TIRUNELV ELI	ANNA UNIVERSI TY	7.1	FIRST CLASS	

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

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

Name of the College	Designation	Loining Data	Relieving Date / Current Date	Experience		
Name of the College	Designation	Joining Date	for Presently Working Institutions	Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	11-08-2010	02-06-2023	12	9	23
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	03-06-2023	04-06-2024	1	0	2
	·		Total	13	9	29
V. Industrial Experience	•:					

Name of the	Designation	Nature of	Joining Date	Relieving	E	xperience	9		
Organisation	Designation	Work	Joining Date	Date	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 PROGRAMME R	01-07-2003	05-10-2006	3	3	5		
RAMAKRISHN A ENGINEERIN G	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 External Examiner Original France in the conduct of the service of the s									
Capacity at whi AUR		<u>tended for the c</u> External Exami	nor	nation during th Evaluation	Ŭ	ear Evaluatior	1		
Capacity at whi AUR (No. of days)	ich service is ext	tended for the c	ner Central (No. c		Re-I (No.				
Capacity at whi AUR (No. of days) 5 (ich service is ext Squad Member	tended for the c External Exami (Practical) (No. of days) 2	ner Central (No. d Eva	Evaluation of scripts luated)	Re-I (No.	Evaluatior of scripts			
Capacity at whi AUR (No. of days) 5 (ich service is ext Squad Member No. of days)	tended for the c External Exami (Practical) (No. of days) 2	ner Central (No. d Eva	Evaluation of scripts luated)	Re-I (No.	Evaluatior of scripts			

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	MR. KUMARASAMY S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	134, CHURCH STREET
Line 2	VEERAVANALLUR-627426
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 6383771525
Email	SKSWAMY.CM@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AESOI7856M
Passport Number	
Aadhar Number	159135732582
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	9523328
Date of Birth	16-08-1979
Age	45
I. Particulars of Educational Qualification : (on	ly completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.SC.	OTHERS - CHEMIST RY	2000	OTHERS - MDT HINDU COLLEGE	MANOMA NIAM SUNDARN AR UNIVERSI TY	73	FIRST CLASS	
P.G.	M.SC.	OTHERS - CHEMIST RY	2002	OTHERS - SRI PARAMAK ALYANI COLLEGE	MANOMA NIAM SUNDARN AR UNIVERSI TY	63	FIRST CLASS	
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - CHEMIST RY	2009	OTHERS - VINAYAKA MISSION UNIVERSI TY	OTHERS - VINAYAGA MISSION UNIVERSI TY	63	FIRST CLASS	

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

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently	Experience			
Name of the Conege	Designation	Joining Date	Working Institutions	Years	Months	Days	
FRANCIS XAVIER ENGINEERING COLLEGE (AUTONOMOUS)	ASSISTANT PROFESSOR	22-07-2015	26-02-2018	2	7	5	
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	22-01-2024	04-06-2024	0	4	14	
EINSTEIN COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	20-08-2018	11-12-2023	5	3	23	
OTHERS - KALASALINGAM UNIVERSITY	ASSISTANT PROFESSOR	02-08-2008	15-12-2014	6	4	14	
			Total	14	7	0	

V. Industria	l Expo	erience :							
Name of the		Designation	Nature of	Ioinin	g Date	Relieving Date	Experience		
Organisati	on	Designation	Work	John	y Date	Keneving Date	Years	Months	Days
STERLITE GROUP OF COMPANIES		CHEMIST	ANALAYSIS	22-01-2024		05-06-2024	0	4	15
	•					Total	0	4	16
AUR (No. of days)	N	Squad Aember 5. of days)	(Practica (No. of da 6	,		of scripts aluated) 6	(No. of scripts Evaluated) 1		
t is certified	that a	ll the informat	ion provided ar	re true to	the best c	of my knowledge.			
Signature of	the	Faculty :	y-						

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	M.ECOMPUTER 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	40
I. Particulars of Educational Qualification : (only completed	1)

Category	Name of the Degree	Specializ ation	Year of Passing	Name o the College	or tl	ne of ne versit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		tificat e
U.G.	OTHERS - MSC	OTHERS - IT AND ECOMME RCE	2007	OTHERS VIVEKAN ANDHA COLLEG	I SUNI AR	1 DARN	72	FIRST CLASS	A second se	
P.G.	M.TECH.	OTHERS - CSE AND IT	2009	OTHERS MS UNIVERS TY	SUNI SI AR		75	FIRST CLASS	The second secon	
* Upload Sc	anned copy o	of Original De	egree Certi	ficate.						
I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATIO Score : File : II. Title of Ph.D. Thesis						N				
III. Faculty	y in which P	h.D. was aw	arded							
	nic Experien n the Curre		Experienc	e)*						
						Relieving Date / Current Date for Presently Working Institutions				e
Name of	the College	Desig	nation	Joinin	g Date			Years	Months	Days
PSN ENGI COLLEGE	NEERING	ASSOCIA PROFESS		12-07-2019		04-06-2024		4	10	24
PSN ENGI COLLEGE	NEERING	ASSISTAL PROFESS		10-06-20	009	11-07-2019		10	1	2
		I		-1		1	Total	14	11	1
V. Industri	al Experien	ce :								
Name of	the	N	ature of					Experience		e
Organisation Designat		ation	Work	Joinin	g Date	Relie	eving Date	Years	Months	Days
	Appointmen t which serv			e conduc	t of Fym	inatio	n during t	he last v	ear	
AUR (No. of days)	(No. of Member (Practical) (No.			Centra (No.		uation ripts	Re-E (No.	Evaluation of script aluated)		

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.EAUTOMOBILE ENGINEERING
Name of the faculty member	DR. SENTHUR N S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	13B SIVAN KOIL SOUTH MADA STREET PALAYAMKOTTAI
Line 2	TIRUNELVELI-627002
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9942926967
Email	PRICIPALPSNEC@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	CEKPS9225P
Passport Number	
Aadhar Number	462741701892
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	04-06-1986
Age	38
I. Particulars of Educational Qualification : (or	alv completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name of the Universit y		% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	MECHANI CAL ENGINEE RING	2008	SCAD COLLEGE OF ENGINEE RING AND TECHNOL OGY	ANNA UNIVERSI TY		63	FIRST CLASS	
P.G.	M.E.	CAD/CAM	2011	KONGU ENGINEE RING COLLEGE (AUTONO MOUS)	ANNA UNIVERSI TY		7.44	FIRST CLASS	
PH.D.	PH.D.	MECHANI CAL ENGINEE RING	2019	OTHERS - HINDUST AN INSTITUT E OF TECHNOL OGY AND SCIENCE	OTHERS - HINDUST AN UNIVERSI TY		Y		A CONTRACTOR OF A CONTRACTOR O
* Upload Sc	anned copy o	of Original De	egree Certi	ficate.					
I.a. Additic Score : File :	onal Qualifi	c ation :- NO	ADDITION	IAL QUALIFI	CATION	1			
II. Title of Ph.D. Thesis						ANALYSIS OF PERFORMANCE COMBUSTION AND EMISSION CHARACTERISTICS OF BIODIESEL WATER EMULSIONS IN LOW HEAT REJECTION DI DIESEL ENGINE			
III. Faculty	III. Faculty in which Ph.D. was awarded					FACULTY OF MECHANICAL ENGINEERING			
	nic Experier m the Curre	nce: nt working]	Experienc	e)*					

Name of t	he College	Designation	Loinin	a Doto	Relieving Date / Current Date for Presently				
Name of the College		Designation	nation Joining Date		Working Institutions	Years	Months	Days	
DHANALAKS SRINIVASAN OF ENGINEH TECHNOLOO	I COLLEGE ERING AND	ASSOCIATE PROFESSOR	22-01-2020		20-01-2021	0	11	30	
DHANALAKS COLLEGE OF ENGINEERIN	7	ASSISTANT PROFESSOR	15-05-2	012	30-06-2018	6	1	17	
PSN ENGINE COLLEGE	EERING	ASSOCIATE PROFESSOR	11-09-2	023	04-06-2024	0	8	24	
JOE SURESH ENGINEERIN	I NG COLLEGE	ASSISTANT PROFESSOR	10-07-2	800	08-07-2009	0	11	30	
	EINSTEIN COLLEGE OF ENGINEERING		02-07-2	018	07-01-2020		6	6	
INFANT JESUS COLLEGE OF ENGINEERING AND TECHNOLOGY		ASSISTANT PROFESSOR	01-04-2011		30-04-2012	1	0	30	
OTHERS - BHARATH INSTITUTE OF HIGHER EDUCATION AND RESEARCH		ASSOCIATE PROFESSOR	01-02-2021		30-06-2023		4	28	
					Total	13	10	20	
V. Industrial	Experience :								
Name of the		Nature of	Ioinin	g Date	Relieving Date	E	xperience	9	
Organisatio	n	Work	John	g Date	Keneving Date	Years	Months	Days	
	pointment Ex which service i		e conduc	t of Exm	ination during th	ne last y	ear		
AUR (No. of days)	(No. of Member (Practical) (No. of scripts						Re-Evaluation (No. of scripts Evaluated)		
It is certified t	hat all the info	rmation provided a	re true to	the best o	of my knowledge.				
		0.0							
		Xth							
Signature of	the Faculty :	formed by Cantonner							

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MASTER OF BUSINESS ADMINISTRATION
Name of the Degree & Course	M.B.AMASTER 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	33
I. Particulars of Educational Qualification : (only completed)

Category	Name of the Degree	Specializa tion	Year of Passing	Name o the College	the)	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	obtaine	1 Corti	ficate	
U.G.	B.B.A.	BUSINESS ADMINIST RATION	2011	OTHERS GOVINDA MMAL ADITANA COLLEGI FOR WOMEN	A NIAM NIAM R SUNDA	RN	Y	FIRST CLASS			
P.G.	M.B.A.	OTHERS - HR AND FINANCE	2013	SCAD COLLEGH OF ENGINEH ING AND TECHNO OGY	ER UNIVER TY	RSI	Y	FIRST CLASS	Anna II		
∗ Upload Sc	canned copy of	f Original Deg	ree Certifi	cate.							
III. Faculty IV. Acaden (Start from	Ph.D. Thesis y in which Ph nic Experience n the Curren	n.D. was awat ce : it working E			ning Data	/ C 1	ieving Da urrent Da r Present	ite 🔤	Experience	e	
Name	of the Coney		signation	Jon	Joining Date		Working Stitution	Vears	Months	Days	
PSN ENGI COLLEGE	NEERING	ASSOCI PROFES		22-06	6-2021	021 04-06-2024		2	11	13	
OTHERS - ENGINEEI	PSN RING COLLEC	ASSIST. GE PROFES		03-06	6-2013	013 21-06-2		8	0	19	
		•				•	То	tal 11	0	2	
V. Industri	al Experienc	e :									
Name of	Name of the							I	Experience	erience	
	Organisation Designation Nature of Work		гк Јоіі	ning Date Relieving Date			Years	Months	Days		
VI. C.O.E. Appointment Experience : Capacity at which service is extended for the conduct of Exmination during the last year AUR External Examiner Central Evaluation Re-Evaluation (No. of Squad Member (Practical) (No. of scripts (No. of scripts 1 5 400 120											

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.TECHAGRICULTURAL 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	55
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Nam th Unive y	e ersit	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	CIVIL ENGINEE RING	2003	GOVERN MENT COLLEGE OF ENGINEE RING TIRUNEL VELI	MANO NIAM SUND AR UNIVI TY	OARN	64.54	FIRST CLASS	
P.G.	M.E.	STRUCTU RAL ENGINEE RING	2007	OTHERS - VINAYAKA MISSIONS UNIVERSI TY	OTHE VINAY MISSI UNIVI TY	YAKA ION	75	FIRST CLASS	A second se
PH.D.	PH.D.	CIVIL ENGINEE RING	2022	OTHERS - NOORUL ISLAM CENTER FOR HIGHER EDUCATI ON	OTHE NOOF ISLAM CENT FOR HIGH EDUC ON	RUL A ER ER	NA		
* Upload Sc	canned copy of	of Original De	egree Certi	ficate.					
I.a. Additic Score : File :	onal Qualific	c ation :- NO	ADDITION	IAL QUALIFI	CATIO	N			
II. Title of Ph.D. Thesis						STRENGTHENING OF HIGH PERFORMANCE REINFORCED CEMENT CONCRETE HOLLOW BEAMS USING FIBRE REINFORCED POLYMER LAMINATES			
III. Faculty	y in which P	h.D. was aw	arded			FAC	ULTY OF CI	VIL ENGINE	ERING
	nic Experier m the Curre	nce : nt working]	Experienc	e)*					

Name of the College			Designation Joining Date			Relieving Date / Current Date for Presently			
Name of th				Joining Date		Working Institutions	Years	Months	Days
PSN ENGINE COLLEGE	ERING		OCIATE DFESSOR	07-03-2)23	04-06-2024	1	2	29
HOLY CROSS ENGINEERIN COLLEGE		ASSOCIATE PROFESSOR 03-01-2013 07-06-2019			6	5	5		
		•				Total	7	8	7
V. Industrial	Experience	:							
Name of the	Name of the		Nature of		a Data	Relieving Date	Experience		
Organisatio	n Designat	.1011	Work Joining Date		Keneving Date	Years	Months	Days	
VI. C.O.E. Ap Capacity at w				e conduc	t of Exm	ination during th	e last y	ear	
AUR (No. of days)	Squad Member (No. of day		External Exa (Practica (No. of day	l)	(No.	l Evaluation of scripts aluated)	Re-Evaluation (No. of scripts Evaluated)		
It is certified t	hat all the in	form	ation provided ar	e true to	the best o	of my knowledge.			
			A-Jang.						
Signature of									

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.TECHAGRICULTURAL 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	39
I. Particulars of Educational Qualification : (only com	pleted)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	CIVIL ENGINEER ING	2008	GOVERNM ENT COLLEGE OF ENGINEER ING TIRUNELV ELI	ANNA UNIVERSI TY	Y	FIRST CLASS	
P.G.	M.E.	STRUCTU RAL ENGINEER ING	2013	ANNA UNIVESIT Y REGIONAL CAMPUS, MADURAI	ANNA UNIVERSI TY	Y	FIRST CLASS	

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) *

Designation		for Dressentles	Experience		
-	Joining Date	for Presently Working Institutions	Years	Months	Days
ASSISTANT PROFESSOR	06-12-2013	09-05-2014	1	2	24
ASSISTANT PROFESSOR	02-06-2014	28-04-2023	8	10	27
ASSOCIATE PROFESSOR	02-05-2023	04-06-2024	1	1	3
		Total	11	2	25
]	PROFESSOR ASSISTANT PROFESSOR ASSOCIATE	PROFESSOR 06-12-2013 ASSISTANT PROFESSOR 02-06-2014 ASSOCIATE 02-05-2023	ASSISTANT PROFESSOR06-12-201309-05-2014ASSISTANT PROFESSOR02-06-201428-04-2023ASSOCIATE PROFESSOR02-05-202304-06-2024	ASSISTANT PROFESSOR06-12-201309-05-20141ASSISTANT PROFESSOR02-06-201428-04-20238ASSOCIATE PROFESSOR02-05-202304-06-20241	ASSISTANT PROFESSOR 06-12-2013 09-05-2014 1 2 ASSISTANT PROFESSOR 02-06-2014 28-04-2023 8 10 ASSOCIATE PROFESSOR 02-05-2023 04-06-2024 1 1

Name of t	ho		Nature of				E	xperience	e														
	Organisation De		Work	Joining Date		Relieving Date	Years	Months															
ITB SEMINTATIC INDIA PRILIMITED)N	ENGINEER	EXECUTION	02-02-2008		02-02-2008		02-02-2008		02-02-2008		02-02-2008		02-02-2008		02-02-2008		02-02-2008		2008 31-10-2010		8	28
	Total 2 8 1																						
	(No. of Member (Practical)				t of Exmination during the last year Central Evaluation (No. of scripts Evaluated) Evaluated)				-														
It is certified t	hat all	the information	n provided are tr	ue to th	e best of m	y knowledge.																	
Signature of	the Fa	aculty :																					

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	32
I. Particulars of Educational Qualification : (on	ly completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.SC.	OTHERS - CHEMIST RY	2013	OTHERS - HOLYCRO SS COLLEGE TIRUNEL VELI	MANOMA NIAM SUNDARN AR UNIVERSI TY	68	FIRST CLASS	
P.G.	M.SC.	OTHERS - CHEMIST RY	2016	OTHERS - HOLYCRO SS COLLEGE TIRUNEL VELI	MANOMA NIAM SUNDARN AR UNIVERSI TY	65	FIRST CLASS	
OTHERS - M.PHILL	OTHERS - M.PHILL	OTHERS - CHEMIST RY	2019	OTHERS - WOMENS CHRISTIA N COLLEGE	MANOMA NIAM SUNDARN AR UNIVERSI TY	62.3	FIRST CLASS	
* Upload Sc	anned copy o	of Original De	egree Certi	ficate.				

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

File :

II. Title of Ph.D. Thesis	
---------------------------	--

IV. Academic Experience : (Start from the Current working Experience) *

Name of the College		Designation	Relieving Date / Current Date for Presently	Experience			
Name of the Conege		Designation	Joining Date	Working Institutions	Years Months		Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR		26-11-2022	05-06-2024	1	6	10
				Total	1	6	13
V. Industrial Experien	ce :						
Name of the Design	ation	Nature of	Joining Date	Relieving Date	Experienc		9
Organisation	auon	Work	Joining Date	Reneving Date	Years	Months	Days

AUR (No. of days)	o. of Member (Practical) (No. of scripts			Re-Evaluation (No. of scripts Evaluated)			
It is certified that all the information provided are true to the best of my knowledge.							
		-	, S	•			
		. to all a					
	A	rul Jeriba		·			
	A	rul Jeniba		<u>.</u>			

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	39
I. Particulars of Educational Qualification : (only co	mpleted)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name the Univer	;	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtaine		ificat e
U.G.	B.SC.	OTHERS - CHEMISTR Y	2005	OTHERS - GOVINDA MMAL ADITANAR COLLEGE TIRUCHEN DUR	AR	ARN	66.9	FIRST CLASS		
P.G.	M.SC.	OTHERS - CHEMISTR Y	2008	OTHERS - NMSSVN COLLEGE MADURAI	MADUH KAMAF UNIVE TY	RAJ	64.9	FIRST CLASS		
OTHERS - M.PHILL	OTHERS - M.PHILL	OTHERS - CHEMISTR Y	2017	OTHERS - MS UNIVERSI TY	MANOI NIAM SUNDA AR UNIVE TY	ARN	69.2	FIRST CLASS		
* Upload Sc	canned copy o	of Original Deg	gree Certif	icate.						
I.a. Additic Score : File :	onal Qualific	a tion :- NO A	ADDITION A	AL QUALIFI	CATION					
II. Title of	Ph.D. Thesis	5								
III. Faculty	y in which P	h.D. was awa	rded							
	IV. Academic Experience : (Start from the Current working Experience) *			e)*						
Name o	Name of the College Designation		Joinin	g Date	/ Cu	Relieving Date / Current Date for Presently		xperience	e	
	g			J		1	Working stitutions	Years	Months	Days
PSN ENGI COLLEGE	NEERING	ASSISTA PROFES		28-11-2	022	05-0	6-2024	1	6	8

Nature of Work

Joining Date

Name of the

Organisation

V. Industrial Experience :

Designation

Years

Total 1

Relieving Date

6

Experience

Months Days

11

-	VI. C.O.E. Appointment Experience : Capacity at which service is extended for the conduct of Exmination during the last year									
AUR (No. of days)	Squad External Examiner Central Evaluation Re-Evaluation (No. of scripts (No. of scripts))									
It is certified t	hat all the informa	tion provided are true to th	ne best of my knowledge.							
	6	forth.								
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	СРНРА6847К		
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	33		
I. Particulars of Educational Qualification : (only o	completed)		

Category	Name of the Degree	Specializa tion	Year of Passing	Name o the College	th		% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		ificat e
U.G.	B.SC.	OTHERS - MATHS	2011	OTHERS CSI JAYARAJ ANNAPA KIAM COLLEGI NALLUR	$ \begin{array}{c c} MANC \\ NIAM \\ SUNE \\ AR \\ UNIV \\ E \\ TY \end{array} $	I DARN	82	DISTIN ON		
P.G.	M.SC.	OTHERS - MATHS	2014	OTHERS SRI PARAMA ALYANI COLLEGI ALWARK RICHI	K NIAM SUNE	I DARN	75	DISTIN ON		
OTHERS - M.PHILL	OTHERS - MATHS	OTHERS - MATHS	2018	OTHERS MOTHER THERASA WOMENS UNIVERS TY KODAIKA NAL	A MOTH TERE WOM UNIV	SA EN'S	69	FIRST CLASS		
-	canned copy o	5			FICATION	N				
II. Title of	Ph.D. Thesis	5								
IV. Acader	y in which Pl nic Experien <mark>m the Curre</mark>	ce :		e)*			eving Date		xperienco	
Name of	f the College	Desig	J nation	Joinin	g Date	for V	rrent Date Presently Vorking stitutions	Years	Months	
PSN ENGI COLLEGE		ASSISTA PROFESS		29-12-2	022		6-2024	1	5	8
		I		1		•	Total	1	5	10
/. Industr	ial Experienc	c e :								
Name of	I Hocian	ation	ature of	Ioinin	g Date	Reli	eving Date		xperience	1
Organisat	tion = 551911		Work		J		5 - 200	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)	uad External Examiner Central Evaluation Re-Evaluation nber (Practical) (No. of scripts (No. of scripts						
It is certified	that all the inform	ation provided are true to t	the best of my knowledge					
	0	Au Diere						
	D.	Alice Diara						
Signature of	the Faculty :	Bren						

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	38
I. Particulars of Educational Qualification : (onl	y completed)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.A.	ENGLISH	2008	OTHERS - ST XAVIERS COLLEGE	MANOMA NIAM SUNDARN AR UNIVERSI TY	66.5	FIRST CLASS	
P.G.	OTHERS - M.A	OTHERS - ENGLISH	2012	OTHERS - MS UNIVERSI TY	MANOMA NIAM SUNDARN AR UNIVERSI TY	55.5	SECOND CLASS	
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - ENGLISH	2015	OTHERS - GOVT ARTS COLLEGE	BHARATH IDASAN UNIVERSI TY	70.3	FIRST CLASS	

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		Designation Joining Date Relieving Date		E	xperience	e
Name of the	College	Designation	on Joining Date		Working Institutions	Years	Months	Days
PSN ENGINEE COLLEGE	RING	ASSISTANT PROFESSOR	02-02-20	17	05-06-2024	7	4	4
					Total	7	4	6
V. Industrial E	xperience :							
Name of the	Designati	Nature of	Ioining	Joining Date Relievi		Experience		e

Name of the	Designation	Designation Nature of Work Joining Date	Relieving Date	E	xperience	e	
Organisation	Designation	Work	Juilling Date	Kellevilig Date	Years	Months	Days

VI. C.O.E. Appointment Experience : Capacity at which service is extended for the conduct of Exmination during the last year									
AUR (No. of days)	AUR (No. ofSquad MemberExternal Examiner (Practical)Central Evaluation (No. of scriptsRe-Evaluation (No. of scripts								
It is certified	that all the inform	ation provided are true to	the best of my knowledge.						
	ą	Partlement							

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	36
I. Particulars of Educational Qualification : (or	ly completed)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.SC.	OTHERS - PHYSICS	2008	OTHERS - HOLY CROSS COLLEGE	MANOMA NIAM SUNDARN AR UNIVERSI TY	74	FIRST CLASS	
P.G.	M.SC.	OTHERS - PHYSICS	2010	OTHERS - HOLY CROSS COLLEGE	MANOMA NIAM SUNDARN AR UNIVERSI TY	66	FIRST CLASS	
P.G.	OTHERS - M.PHIL	OTHERS - PHYSICS	2011	OTHERS - HOLY CROSS COLLEGE	MANOMA NIAM SUNDARN AR UNIVERSI TY	82	DISTINCTI ON	

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) \ast

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently	Experience		
Name of the Conege	Designation	Johning Date	Working Institutions	Years	Months	Days
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	05-06-2024	6	11	3
			Total	12	10	26
V. Industrial Experience :						

Name of th	e Designation	Nature of Joining Date		a Data	Dolioring Data	Experience		
Organisatio	Designation	Work	Joinin	iy Date	Relieving Date	Years	Months	Days
	I. C.O.E. Appointment Experience : apacity at which service is extended for the conduct of Exmination during the last year							
AUR (No. of days)	Squad Member (No. of days)	External Exa (Practica (No. of da	l)	(No.	l Evaluation of scripts aluated)	(No.	Evaluation of scripts aluated)	-
It is certified	that all the inform	ation provided ar	e true to	the best o	of my knowledge.			
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	Face		
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	30		
I. Particulars of Educational Qualification : (only completed)		

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.SC.	OTHERS - PHYSICS	2016	OTHERS - NKR GOVT ARTS COLLEGE FOR WOMEN	PERIYAR UNIVERSI TY	59	SECOND CLASS	
P.G.	M.SC.	OTHERS - PHYSICS	2018	OTHERS - ARIGNAR ANNA GOVT ARTS COLLEGE NAMAKKA L	PERIYAR UNIVERSI TY	72	FIRST CLASS	
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - PHYSICS	2021	OTHERS - ARIGNAR ANNA GOVT ARTS COLLEGE NAMAKKA L	PERIYAR UNIVERSI TY	64	FIRST CLASS	

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	Е	xperience	÷
Name of the Coneye	Designation	Joining Date	Working Institutions	Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	18-04-2022	05-06-2024	2	1	18
			Total	2	1	18
V. Industrial Experience	:					

Name of th	Designation	Nature of Joining Date		Relieving Date	Experience			
Organisatio	n	Work	John	g Date	Keneving Date	Years Months		Days
	VI. C.O.E. Appointment Experience : Capacity at which service is extended for the conduct of Exmination during the last year							
AUR (No. of days)	AURSquadExternal ExaminerCentral EvaluationRe-EvaluationNo. ofMember(Practical)(No. of scripts(No. of scripts)					-		
It is certified	that all the inform	ation provided are	e true to t	the best o	f my knowledge.			
B. Shivya.								
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	31			
I. Particulars of Educational Qualification : (only con	npleted)			

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Nam th Unive	e	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		ificat e
U.G.	OTHERS - B.SC	OTHERS - PHYSICS	2015	OTHERS - ST XAVIERS COLLEGE	MANC NIAM SUND AR UNIVI TY	ARN	60	FIRST CLASS		
P.G.	M.SC.	OTHERS - PHYSICS	2017	OTHERS - ST XAVIERS COLLEGE	MANC NIAM SUND AR UNIVI TY	ARN	64	FIRST CLASS		
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - PHYSICS	2018	OTHERS - MANONM ANIUM SUNDARA NAR UNIVERSI TY	SUND AR	ARN	76	DISTIN(ON		
Score : File : II. Title of	onal Qualific Ph.D. Thesis y in which Pl	6		AL QUALIF	ICATION	1				
	nic Experien m the Currei		Experienc	e)*						
Name of	f the College	Desir	gnation	Joinin	n Data	/ Cu	eving Date rrent Date Presently			9
	the concyc	DUSIĘ	gnation	Jouni	g Dutt	V	Vorking stitutions	Years	Months	Days
PSN ENGI COLLEGE	NEERING	ASSISTA PROFESS		23-03-20	23	05-0	6-2024	1	2	14
							Total	1	2	15
V. Industri	al Experienc	ce :								
Name of t Organisat	Inocian	ation	ature of Work	Joining	g Date	Reli	eving Date		xperience	
	-							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 								
It is certified	that all the inform	ation provided are true to	the best of my knowledge.					
Signature of	the Faculty :	S. Amini and						

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	B.EGENERAL 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	32
I. Particulars of Educational Qualification : (only	y completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name o the College	r tl	ne of ne versit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Clas: obtain		ificat e
U.G.	B.E.	ELECTRO NICS AND COMMUN ICATION ENGINEE RING	2013	ST XAVIER'S CATHOLI C COLLEGI OF ENGINEH RING (AUTONO MOUS)	E ANNA E UNIV E TY		6.25	SECON CLASS		
P.G.	M.E.	COMMUN ICATION AND NETWORK ING	2016	C S I INSTITU E OF TECHNO OGY	UNIV		7.56	FIRST CLASS		
III. Faculty IV. Acaden	Ph.D. Thesis 7 in which Pl nic Experien n the Currer	n.D. was aw ce :		e)*						
Name of the College Designation Joining Date					Relieving Date / Current Date for Presently Working		E	xperience	e	
							titutions	Years	Months	Days
PSN ENGINEERING ASSISTANT COLLEGE PROFESSOR				05-01-2023		05-06-2024		1	5	1
						-	Total	1	5	3
V. Industri	al Experienc	ce :								
Name of the Nature of							E	xperience	rience	
Organisation Designation Work Jo			Joinin	Joining Date		Relieving Date		Months	Days	
Capacity at	Appointment t which servi	ice is exten	ded for th							
AUR (No. of days)	AURSquadExternal ExaminerCe(No. ofMember(Practical)			(No.	ral Evaluation o. 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.ECIVIL ENGINEERING
Name of the faculty member	MS. UDAYA JEBISHA J
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	17-17/4, COILPILAVILAI
Line 2	MEKKAMANDAPAM,629166
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 7397675227
Email	PRICIPALPSNEC@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	AEMPU5606P
Passport Number	
Aadhar Number	486315613117
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	27-09-1996
Age	28
I. Particulars of Educational Qualification : (on	ly completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	th Univ	ne of ne rersit V	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Clas: obtain		tificat e
U.G.	B.E.	CIVIL ENGINEE RING	2018	ARUNACH ALA COLLEGE OF ENGINEE RING FOR WOMEN	ANNA UNIV TY		7.76	FIRST CLASS	HARD	
P.G.	M.E.	CONSTRU CTION ENGINEE RING AND MANAGE MENT	2020	ARUNACH ALA COLLEGE OF ENGINEE RING FOR WOMEN	ANNA UNIV TY		8.87	DISTIN ION	DISTINCT ION	
Score : File : II. Title of										
	IV. Academic Experience : (Start from the Current working Experience) *									
					Relieving Date / Current Date for Presently			xperienc	rience	
Name of	Name of the College Designation Joining Date				Jale	N	Vorking titutions	Years	Months	Days
M E T ENGINEERING COLLEGE ASSISTANT PROFESSOR 13-02-2023					05-04-2024		1	1	21	
PSN ENGI COLLEGE	PSN ENGINEERING COLLEGE ASSISTANT PROFESSOR 08-04-2024				1	04-06-2024		0	1	27
							Total	1	3	19
V. Industri	al Experien	ce :		1				1		1
Name of Organisat	I Docium	ation	ature of Work	Joining 1	Date	Relie	eving Date	E Years	xperienc Months	e Days

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)
is certified	that all the inform	ation provided are true to	the best of my knowledge	
		1 Tlicha		
	U	doya Jebisha		

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECHINFORMATION TECHNOLOGY
Name of the faculty member	MRS. JELIN D
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	9/24 NORTH STREET
Line 2	MEYNANAPURAM
District	THOOTHUKUDI
Telephone number	-
Mobile number	+91 - 7299556094
Email	PRICIPALPSNEC@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	AUTPJ7604E
Passport Number	
Aadhar Number	542379608178
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	18-09-1990
Age	34
I. Particulars of Educational Qualification : (or	nly completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	tl Univ	ne of ne versit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Clas: obtain		tificat e
U.G.	B.E.	COMPUTE R SCIENCE AND ENGINEE RING	2011	KINGS ENGINEE RING COLLEGE			68	FIRST CLASS		Anna Reliteration
P.G.	M.E.	COMPUTE R SCIENCE AND ENGINEE RING	2017	PSN ENGINEE RING COLLEGE			72	FIRST CLASS		An or a state of the state of t
core : 'ile : I. Title of II. Faculty V. Acaden	onal Qualific Ph.D. Thesis / in which Ph nic Experience	n.D. was aw	varded		FICATIO	N				
	n the Currer		Experienc Junation	e)*	j Date	/ Cur for W	eving Date rrent Date Presently Vorking titutions	E Years	xperience Months	e Days
PSN ENGINEERING ASSISTANT COLLEGE PROFESSO				09-01-20				4	4	27
							Total	4	4	29
. Industri	al Experienc	e :		1					•	
Name of t Organisat		ition i	ature of Work	Joining	g Date	Relie	eving Date	E Years	xperienco Months	Days
	Appointment t which servi Squad	<u>ce is exten</u>		miner	Centra	l Eval	n during th uation ripts		Evaluation	



Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE				
Name of the Department	CIVIL ENGINEERING				
Name of the Degree & Course	B.TECHAGRICULTURAL ENGINEERING				
Name of the faculty member	MRS. AKSHYA P				
Regular Or Adjunct	Regular				
Image					
Present Designation	ASSISTANT PROFESSOR				
Residential Address Line 1	11A, MAIN ROAD, POTHIGAIADI, PAPANASAM				
Line 2	VICKRAMASINGAPURAM POST - 62742				
District	TIRUNELVELI				
Telephone number	-				
Mobile number	+91 - 9360503847				
Email	PRICIPALPSNEC@GMAIL.COM				
Gender	FEMALE				
Community	OC				
PAN Number	BTBPA2744N				
Passport Number					
Aadhar Number	273983998457				
Faculty code given by C.O.E.					
Faculty code given by A.I.C.T.E.	AU1				
Date of Birth	05-10-1994				
Age	30				
I. Particulars of Educational Qualification : (only completed)					

Category	Name of the Degree	Speciali ation	z Year of Passing	Name of the College	tl Univ	ne of ne versit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		tificat e
U.G.	B.E.	CIVIL ENGINEE RING	2016	PSN ENGINEE RING COLLEGE	ANNA UNIV TY		78	FIRST CLASS		
P.G.	M.E.	STRUCTU RAL ENGINEE RING	2010	PSN ENGINEE RING COLLEGE	ANNA UNIV TY		85	FIRST CLASS		
Score : File :	Ph.D. Thesis	<u>s</u>								
	y in which P		warded							
III. Faculty IV. Acaden		h.D. was a		e)*						
III. Faculty IV. Acaden (Start from	y in which P nic Experien <mark>m the Curre</mark>	h.D. was a ce : nt working	g Experienc		Data	/ Cu	eving Date	E	xperience	e
III. Faculty IV. Acaden (Start from	y in which P nic Experien	h.D. was a ce : nt working		e)* Joining	Date	/ Cur for W			xperience Months	e Days
III. Faculty IV. Acaden (Start from	y in which Pl nic Experien m the Curren T the College	h.D. was a ce : nt working	g Experienc ignation ANT			/ Cur for W Ins	rrent Date Presently /orking		-	
III. Faculty IV. Acaden (Start from Name of PSN ENGI	y in which Pl nic Experien m the Curren T the College	h.D. was a ce : nt working Des ASSIST	g Experienc ignation ANT	Joining		/ Cur for W Ins	rrent Date Presently /orking titutions	Years	Months	Days
III. Faculty IV. Academ (Start from Name of PSN ENGI COLLEGE	y in which Pl nic Experien m the Curren T the College	h.D. was a ce : nt working Des ASSIST PROFE	g Experienc ignation ANT	Joining		/ Cur for W Ins	Frent Date Presently Vorking titutions	Years 0	2 Months	Days 12
III. Faculty IV. Academ (Start from Name of PSN ENGI COLLEGE V. Industri Name of	y in which Pl nic Experien m the Curren f the College NEERING ial Experience the Docign	h.D. was a ce : nt working Des ASSIST PROFE	g Experienc ignation ANT SSOR	Joining 25-03-202	24	/ Cun for W Ins 05-06	Frent Date Presently Vorking titutions 5-2024 Total	Years 0 0	2 Months	Days 12 13
III. Faculty IV. Academ (Start from Name of PSN ENGI COLLEGE V. Industri	y in which Pl nic Experien m the Curren f the College NEERING ial Experience the Docign	h.D. was a ce : nt working Des ASSIST PROFE	g Experienc ignation ANT SSOR	Joining	24	/ Cun for W Ins 05-06	Frent Date Presently Vorking titutions	Years 0 0	2 2	Days 12 13
III. Faculty V. Academ Start from Name of PSN ENGI COLLEGE V. Industri Name of Organisat	y in which Pl nic Experien m the Curren f the College NEERING ial Experience the Docign	h.D. was a ce : nt working Des ASSIST PROFE ce : ation	g Experience ignation ANT SSOR Nature of Work	Joining 25-03-202 Joining e conduct	24 Date	/ Cun for W Ins 05-06	rrent Date Presently /orking titutions 3-2024 Total eving Date n during th	Years 0 0 E Years	Months 2 2 2 xperience Months	Days 12 13 Pe Days

Huleyer Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.EMECHANICAL 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	34
I. Particulars of Educational Qualification : (only com	pleted)

Category	Name of the Degree	Speciali tion	iza Year of Passing	Name of the College	Nam th Unive		% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		tificat e
U.G.	B.E.	MECHAI CAL ENGINE RING	2011	OTHERS - NOORUL ISLAMCO LLEGE OF ENHINNE RING	ANNA UNIV TY		66	FIRST CLASS		
P.G.	M.E.	COMPU' R AIDED DESIGN	2015	ADHIYAM AAN COLLEGE OF ENGINEE RING (AUTONO MOUS)	ANNA UNIV TY		86	DISTIN ON		
* Upload Sc	anned copy o	of Original	Degree Certi	ficate.						
Score : File :	onal Qualific Ph.D. Thesi		NO ADDITION	AL QUALIFI		V				
III. Faculty	in which P	h.D. was	awarded							
	nic Experien n the Curre		ng Experience	e)*						
Name o	f the Colleg	e D	Designation	Joining	Date	/ Cu	eving Date rrent Date Presently	E	xperienc	e
			9	JJ	,	V	Vorking stitutions	Years	Months	Days
PSN ENGI COLLEGE	NEERING		ISTANT FESSOR	12-06-203	18	04-00	6-2024	5	11	23
NARAYAN COLLEGE ENGINEEI	OF		ISTANT FESSOR	07-06-203	15	08-00	6-2018	3	0	2
							Total	8	11	0
V. Industri	al Experien	ce :								
Name of	the p.		Nature of			.	·	E	xperienc	e
Organisat	1 10610	nation	Work	Joining	Date	Kell	eving Date	Years	Months	Days
VIKI INDURSTI PVT LTD	ES PRODU ENGIN	JCTION NER	PRODUCTION	08-08-203	11	02-04	4-2013	1	7	26
							Total	1	7	28

		(No. of days)	Evaluated) 6	(No. of scripts Evaluated)
s certified	that all the informa	ation provided are true to	the best of my knowledge.	
		-tiotin		

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.TECHAGRICULTURAL ENGINEERING
Name of the faculty member	MS. SUBIKSHA G
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	5-20-70, T.S.RAMALINGA NAGAR, PALAYAMPATTI, ARUPPUKOTTAI.
Line 2	626112
District	VIRUDHUNAGAR
Telephone number	-
Mobile number	+91 - 8072808030
Email	SUBIKSHAG26@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	FQCPS2428R
Passport Number	
Aadhar Number	903914588570
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	26-03-1998
Age	26
I. Particulars of Educational Qualification :	(only completed)

Category	Name of the Degree	Specializa tion	Year of Passing	Name o the College	th Univ	ne of ne ersit V	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		ificat e
U.G.	B.E.	CIVIL ENGINEE RING	2019	K L N COLLEGI OF INFORM TION TECHNO OGY	A ANNA UNIV TY		65.4	FIRST CLASS		
P.G.	M.E.	AERONAU TICAL ENGINEE RING	2022	ANNA UNIVESI Y REGIONA L CAMPUS IRUNELV ELI	A ANNA UNIV TY		91.4	DISTIN ON	CTI	
Score : File : II. Title of III. Faculty IV. Acaden	onal Qualific Ph.D. Thesis y in which Pl nic Experience n the Currer	n.D. was awa	arded		FICATIO	N				
Name of	the College	Desic	Ination	Ioinin	a Date	/ Cu	eving Date rrent Date Presently	E	xperience	9
	the conege		jiiution	W		Vorking Stitutions	Years	Months	Days	
PSN ENGI COLLEGE	NEERING	ASSISTA PROFESS		17-07-2	023	04-06	6-2024	0	10	19
							Total	0	10	24
V. Industri	al Experienc	e :								
Name of t	the	N	ature of					E	xperience	9
Organisat	I LIOCIAN:	ation	Work	Joinin	ig Date	Reli	eving Date	Years	Months	Days
	VI. C.O.E. Appointment Experience : Capacity at which service is extended for the conduct of Exmination during the last year AUR Squad External Examiner Central Evaluation Re-Evaluation									

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

G. Sulikka

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	39
I. Particulars of Educational Qualification : (only co	mpleted)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.SC.	OTHERS - MATHS	2006	OTHERS - SARATHA GANGADH ARAN	PONDICH ERRY UNIVERSI TY	76	FIRST CLASS	
P.G.	M.SC.	OTHERS - MATHAM ATICS	2015	OTHERS - SARADHA GANGADH ARAN COLLEGE	PONDICH ERRY UNIVERSI TY	79.30	FIRST CLASS	
P.G.	OTHERS - M.PHIL	OTHERS - MATHAM ATICS	2011	OTHERS - PRIST UNIVERSI TY	PONDICH ERRY UNIVERSI TY	86	DISTINCT ION	entropy of the second sec

* 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	nation Joining Date For Presently		Ε	xperience)
Name of the Conege	Designation	Johning Date	Working Institutions	Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	20-01-2020	05-06-2024	4	4	17
	Total	4	4	19		

V. Industrial Experience :

Name of the	Designation	Nature of	Joining Date	Relieving Date	E	xperience	e
Organisation	Designation	Work	Joining Date		Years	Months	Days

VI. C.O.E. Appointment Experience : Capacity at which service is extended for the conduct of Exmination during the last year									
AUR (No. of days)Squad (No. of days)External Examiner 									
It is certified	that all the inform	ation provided are true to	the best of my knowledge						
Signature of	the Faculty :	Trevidha							

Г						
Name of the College	9523 - PSN ENGINEERING COLLEGE					
Name of the Department	AUTOMOBILE ENGINEERING					
Name of the Degree & Course	B.EAUTOMOBILE 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	37					
I. Particulars of Educational Qualification : (only con	pleted)					

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	the	e	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtaine		ificat e
U.G.	B.E.	MECHANI CAL ENGINEER ING	2009	SARDAR RAJA COLLEGE OF ENGINEE ING		RSI	2009	FIRST CLASS		Margania narrasi Marana Margania Antonio Antonio
P.G.	M.E.	MANUFAC TURING ENGINEER ING	2014	SARDAR RAJA COLLEGE OF ENGINEE ING	JA LLEGE ANNA UNIVERSI 2014 TY 2014					
* Upload Sc	anned copy of	Original Deg	gree Certifie	cate.						
I.a. Additic Score : File :	onal Qualific	ation :- NO A	DITIONA	L QUALIF	CATION					
II. Title of	Ph.D. Thesis									
III. Faculty	y in which Ph	.D. was awa	rded							
	nic Experience n the Curren		xperience) *						
Name o	of the College	e Des	ignation	Ioini	ng Date	/ Cu	ieving Dat Irrent Dat Presently	e E	xperience	e
			-9	J		I	Working stitutions	Years	Months	Days
PSN INSTI TECHNOL SCIENCE		ASSIST. PROFES		19-12-	2019	17-0	2-2023	3	1	30
PSN ENGI COLLEGE	NEERING	ASSIST. PROFES		03-03-	2023	04-0	6-2024	1	3	2
							Tota	al 4	5	4
V Inductri	al Experienc	e :						•		
v. muusui					1				xperience	e
	tha			c 🕴 Ioini	ng Date	Reli	ieving Dat	e ———	-	
Name of Organisat		ition Natu	re of Worl	- Jonn	-			Years	Months	Days
Name of t Organisat VI. C.O.E. 2		Experience	:							Days

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.EELECTRONICS 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 - 8015333214				
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	31				
I. Particulars of Educational Qualification : (only completed))				

Category	Name of the Degree	Specializ ation	Year of Passing	Name or the College	tł Univ	ne of ne versit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		ificat e
U.G.	B.E.	ELECTRO NICS AND COMMUN ICATION ENGINEE RING	2014	NELLAI COLLEGE OF ENGINEE RING	UNIV		7.8	FIRST CLASS	Enterna State Stat	A second se
P.G.	M.E.	APPLIED ELECTRO NICS	2016	NELLAI COLLEGE OF ENGINEE RING	UNIV	IA VERSI 8.1		FIRST CLASS		
* Upload Sc	anned copy of	f Original De	egree Certi	ficate.						
Score : File :	onal Qualifica		ADDITION	AL QUALI	FICATIO	N				
	in which Ph		arded							
	nic Experience n the Curren		Experienc	e)*						
						/ Cu	eving Date r <mark>rent Date</mark>	E	xperience	e
Name of	the College	Desig	Ination	Joinin	g Date	for Presently Working Institutions		Years	Months	Days
PSN ENGI COLLEGE	NEERING	ASSISTA PROFESS		31-05-20	19	04-06-2024		5	0	5
							Total	5	0	5
V. Industri	al Experienc	e :								
Name of t	he	N	ature of					E	xperience	e
Organisat	I Hogima	TION I	Work	Joinin	g Date	Relie	eving Date	Years	Months	Days
	Appointment t which servi			a conduct	of Frm	inatio	n during +1	na laet v	oar	
AUR (No. of days)	Squad Member (No. of d	l Ex er	ternal Exa (Practica (No. of da	miner al)	Centra (No.		uation ripts	Re-E (No.	Evaluation of script aluated)	
				I						



Name of the Department COMPUT Name of the Degree & Course B.ECOM	EN ENGINEERING COLLEGE ER SCIENCE AND ENGINEEERING IPUTER SCIENCE AND ENGINEERING GARAJAN K
Name of the Degree & Course B.ECOM Name of the faculty member MR. PUN	IPUTER SCIENCE AND ENGINEERING
Name of the faculty member MR. PUN	
	GARAJAN K
Regular Or Adjunct Regular	
Image	
Present Designation ASSISTA	NT PROFESSOR
Residential Address2/51, SOLine 11	JTH STREET,LAKSHMIPURAM POOVANI
Line 2 THOOTH	UKKUDI - 628303
District THOOTH	UKUDI
Telephone number -	
Mobile number +91 - 934	15241169
Email PUNGAR	AJAN1996@GMAIL.COM
Gender MALE	
Community SC	
PAN Number HDBPP20)30J
Passport Number	
Aadhar Number65713284	46377
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.AU1	
Date of Birth 02-09-19	96
Age 28	
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	E Nam th Unive	e	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		ificat e
U.G.	B.E.	COMPUTE R SCIENCE AND ENGINEE RING	2019	THAMIRA BHARANI ENGINEE RING COLLEGE	ANNA UNIVE TY		15 X/I I	SECONI CLASS	 Marchael Control Annual An Annual Annual Annu	
P.G.	M.E.	COMPUTE R SCIENCE AND ENGINEE RING	2023	PSN ENGINEE RING COLLEGE			1 X L I	FIRST CLASS		An
Upload Sc	anned copy of	Original De	gree Certifi	cate.						
.a. Additic Score : File :	onal Qualifica	ation :- NO	ADDITIONA	L QUALIF	ICATION					
I. Title of	Ph.D. Thesis									
	y in which Ph		arded							
	nic Experience m the Curren		Experience) *						
Name of	f the College	Daci	gnation	Ioinin	g Date	/ Cu	eving Date rrent Date Presently	E	xperience	e
Name of	the conege	Desi	gnation	Joinn	ig Date	V	Vorking stitutions	Years	Months	Days
PSN ENGI COLLEGE	NEERING	ASSISTA PROFES		08-01-2	024	04-0	6-2024	0	4	28
						•	Total	0	4	0
	al Experienc	e :								
/. Industri						_				
	the							E	xperience	9
/. Industri Name of † Organisat	the Design	ation Natu	re of Work	Joinin	g Date	Reli	eving Date	E Years	xperience Months	e Days
Name of t Organisat /I. C.O.E. /	the Design	Experience	•:					Years	Months	

ok, Boly

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.ECOMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MS. SUBALAKSHMI K
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	17,EAST STREET ,KALUNGADI,KALAKAD PATHAI POST
Line 2	TIRUNELVELI 627501
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9940786774
Email	SUBA20031999@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	KQXPK7149P
Passport Number	
Aadhar Number	864848080395
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	20-03-1999
Age	25
I. Particulars of Educational Qualification : (only completed	d)

Category	Name of the Degree	Specializ ation	Year of Passing	Name o the College	t ti Univ	ne of he versit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Clas obtain		ificat e
U.G.	B.E.	COMPUTE R SCIENCE AND ENGINEE RING	2021	SCAD COLLEGI OF ENGINEI RING AN TECHNO OGY	E ANN E UNIV D TY	A /ERSI	7.8	FIRST CLASS	A LOS A LOS	
P.G.	M.E.	COMPUTE R SCIENCE AND ENGINEE RING	2023	SCAD COLLEGI OF ENGINEI RING AN TECHNO OGY	E ANN D TY	A /ERSI	7.5	FIRST CLASS		en en
* Upload Sc	anned copy o	f Original De	egree Certi	ficate.						
I.a. Addition Score : File :	onal Qualific	ation :- NO	ADDITION	IAL QUALI	IFICATIC	N				
II. Title of	Ph.D. Thesi	6								
III. Faculty	in which P	n.D. was aw	arded							
	nic Experien n the Curre		Experienc	e)*						
						Relieving Date / Current Date		E	Experience	e
Name of	the College	Desig	nation	Joinin	g Date	N	Presently /orking titutions	Years	Months	Days
PSN ENGI COLLEGE	NEERING	ASSISTA PROFESS		09-01-20)24	04-06	5-2024	0	4	27
							Total	0	4	29
V. Industri	al Experienc	ce :								
Name of t	Docian	ation	ature of	Ioinin	g Date	Poli	eving Date	E	xperience	9
Organisat	ion		Work	John	y Date	Nem	Joing Date	Years	Months	Days
	Appointmen t which serv			e conduc	t of Exm	inatio	n during tl	ne last v	ear	
AUR (No. of days)	Squa Memb (No. of d	d Ex er	ternal Exa (Practica (No. of da	miner al)	Centra (No.		uation ripts	Re-I (No.	Evaluation of script aluated)	

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

K. Subelakshni

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.EELECTRONICS AND COMMUNICATION ENGINEERING
Name of the faculty member	MR. MUTHU KUMARAN S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	101B, AITUC COLONY, 3RD STREET, PEYANVILAI, ARUMUGANERI, TIRUCHENDUR TALUKA
Line 2	TUTICORIN 628202
District	THOOTHUKUDI
Telephone number	-
Mobile number	+91 - 9123586917
Email	MKUMARAN3525@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BXNPM8863N
Passport Number	
Aadhar Number	274524183568
Faculty code given by C.O.E.	9523314
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	06-06-1991
Age	33
I. Particulars of Educational Qualification : (only con	pleted)

Category	Name of the Degree	Specia tion		ear of assing	Name of the College		Name the Unive	e	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		tificat e
U.G.	B.E.	ELECTI NICS A COMM CATION ENGIN RING)15	JAYARAJ ANNAPAG KIAM CSI COLLEGE OF ENGINEE RING	[3	ANNA UNIVE TY		65	FIRST CLASS	Autor	Hingran, Carlos and a second Carlos and a second
P.G.	M.E.	APPLIE ELECTI NICS)22	SCAD COLLEGE OF ENGINEE RING ANI TECHNOI OGY	E D	ANNA UNIVE TY		89	DISTINO ON	PROVIDE	NYLESHY Carlow Market Marke
-	File :											
III. Faculty IV. Academ	in which P	h.D. was	award	ed								
	n the Curre		ing Exp	erience	e)*							
Nama of	the Celler) !	 .	Tainin		Dete	/ Cu	eving Date rrent Date	E	xperienc	e
Name of	the College	; 1	Designa		Joinin	ig i	Date	V	Presently Vorking stitutions	Years	Months	Days
PSN ENGI COLLEGE	NEERING		ISTANT FESSOF	ł	06-07-2	023	3	04-06	6-2024	0	10	30
									Total	0	10	5
V. Industri	al Experien	c e :										
Name of		nation		ure of	Joinin	nu I	Date	Reli	eving Date	E	xperienc	e
Organisat	tion being		W	ork	J. 10	-91			July Dutt	Years	Months	Days
DCW CHEMICAI PVT LTD	L TECH	NICIAN	INSTRU	UMENT	01-06-2	016	5	26-05	5-2017	0	11	26
									Total	0	11	0

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 												
It is certified	that all the inform	ation provided are true to t	the best of my knowledge.									
Signature of	the Faculty :	Mary										

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MASTER OF BUSINESS ADMINISTRATION
Name of the Degree & Course	M.B.AMASTER OF BUSINESS ADMINISTRATION
Name of the faculty member	MRS. VICTORIA A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	7/271 KARTHIKEYAN NAGAR,B COLONY ,REDDIYARPETTI
Line 2	627007
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 8300051669
Email	BALAVICTORIA45@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BXKPV1087L
Passport Number	
Aadhar Number	775032353217
Faculty code given by C.O.E.	9523000
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	10-07-1990
Age	34
I. Particulars of Educational Qualification : (only con	npleted)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Nam th Unive	e	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		ificat e
U.G.	B.COM.	COMMER CE	2011	OTHERS - ROSEMAF Y COLLEGE		ARN	67	FIRST CLASS		
P.G.	M.B.A.	MASTER OF BUSINESS ADMINIST RATION	2013	OTHERS - MS UNIVERSI TY	SUND	ARN	69	FIRST CLASS		
Upload So	canned copy o	f Original De	gree Certif	ïcate.						
core : ile :	onal Qualific Ph.D. Thesis			AL QUALII		N				
	y in which Pl		arded							
	nic Experien <mark>m the Currer</mark>		Experience	;) *						
N		Deet		T	Dete			xperience	9	
Name of	f the College	Desig	gnation	Joining	j Date	V	Presently Vorking stitutions	Years	Months	Days
PSN ENGI COLLEGE	NEERING	ASSISTA PROFESS		03-11-20	23	04-06	5-2024	0	7	2
	NEERING			03-11-20	23	04-06	5-2024 Total	-	7 7	2 5
COLLEGE	NEERING ial Experienc	PROFESS		03-11-20	23	04-06		-		
COLLEGE	ial Experienc	PROFESS					Total	0		5
COLLEGE	ial Experienc	PROFESS	SOR	03-11-20				0	7	5
. Industri Name of Organisat	ial Experienc	PROFESS	SOR ature of Work e :	Joining	g Date	Reli	Total eving Date	0 E Years	7 xperience Months	5

	D. vue		
Signature of the Faculty :			

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECHINFORMATION TECHNOLOGY
Name of the faculty member	MRS. GANGA S V
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	8/67 POOLANCODE
Line 2	PENYANKUZHI
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9789126863
Email	GANGASV24@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BEQPG6875J
Passport Number	
Aadhar Number	989698209405
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	24-02-1990
Age	34
I. Particulars of Educational Qualification : (or	nly completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Nam th Univ	ie ersit	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		ificat e
U.G.	B.E.	COMPUTE R SCIENCE AND ENGINEE RING	2013	PONJESLY COLLEGE OF ENGINEE RING	ANNA UNIV TY		7.76	FIRST CLASS		
P.G.	M.E.	COMPUTE R SCIENCE AND ENGINEE RING	2016	M E T ENGINEE RING COLLEGE	ANNA UNIV TY		8.21	FIRST CLASS		
core : 'ile : I. Title of II. Faculty	onal Qualifica Ph.D. Thesis y in which Ph	.D. was aw		AL QUALIFI		N				
	nic Experience m the Curren	it working	Experience mation	e)*	Date	/ Cu	eving Date rrent Date Presently	E	xperience	9
Name of	-				Dute	W	orking	Years	Months	Days
Name of PSN ENGI COLLEGE		ASSISTA		04-05-2023		W Ins		Years 1	Months	Days 1
PSN ENGI						W Ins	orking titutions			
PSN ENGI COLLEGE		PROFESS				W Ins	orking titutions	1	1	1
PSN ENGI COLLEGE	ial Experienc	PROFESS e:		04-05-2023	3	W Ins 04-06	orking titutions -2024 Total	1	1	1
PSN ENGI COLLEGE . Industri	ial Experienc	e :	SOR		3	W Ins 04-06	orking titutions	1	1	1

	67-Je
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.EGENERAL ENGINEERING
Name of the faculty member	MRS. PRATHYUSHA CH
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	GANDHI NAGAR,BUCHI REDDY PALEM
Line 2	NELLORE - 534305
District	OTHERS - ANDHRA PRADESH
Telephone number	-
Mobile number	+91 - 8866428907
Email	PRATHYUSHA63@GMAIL.COM
Gender	FEMALE
Community	OC
PAN Number	AVCPC6835N
Passport Number	
Aadhar Number	627098176684
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	05-05-1988
Age	36
I. Particulars of Educational Qualification : (only co	mpleted)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.TECH.	OTHERS - COMPUTE R SCIENCE ENGINEE RING	2010	OTHERS - SRI VENKATE SHWARA UNIVERSI TY	OTHERS - SRI VENKATE SHWARA UNIVERSI TY	8.0	FIRST CLASS	
P.G.	M.TECH.	COMPUTE R SCIENCE AND ENGINEE RING (5 YEAR INTEGRAT ED)	2014	RAJIV GANDHI COLLEGE OF ENGINEE RING	OTHERS - JNTU ANANTAP UR UNIVERSI TY	8.5	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	Experience		
Name of the Conege	Designation	Johning Date	Working Institutions	Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	11-09-2023	05-06-2024	0	8	25
A V S ENGINEERING COLLEGE	ASSISTANT PROFESSOR	08-06-2010	10-10-2011	1	4	3
	Total					29
V. Industrial Experience	:					

Name of the	Designatio	Nature of	Toirt	na Dote	Dolioving Data	Experience				
Organisation	ganisation Designation Work Joining Date Relieving		Relieving Date	Years	Months	Days				
DK SAI PRAJNAH PVTLDT	COMMERCIAI TAX BILLING	L TAX BILLING	10-05-2	2016	17-08-2017	1	3	8		
FRUCTION INFO TECH	DATA ENTRY OPERATOR	DATA ENTRY	03-02-2015		03-02-2015		28-12-2015	0	10	25
					Total	2	2	3		
(No. of days)	Member No. of days)	(Practical) (No. of days			of scripts luated)	(No. of scripts Evaluated)				
					l					
	t all the informati				illy kilowieuge.					
	16									
	Port	ithyusha.								
	1332	0								
Signature of th	e Faculty :	A CARACTER STATE								

Name of the College	9523 - PSN ENGINEERING COLLEGE		
Name of the Department	MASTER OF BUSINESS ADMINISTRATION		
Name of the Degree & Course	M.B.AMASTER OF BUSINESS ADMINISTRATION		
Name of the faculty member	MR. GLADWIN C M		
Regular Or Adjunct	Regular		
Image			
Present Designation	ASSISTANT PROFESSOR		
Residential Address Line 1	1/281,PALLIVILAGAM HOUSE,OPPOSITE MSC CHURCH ,KIRATHUR		
Line 2	629160		
District	KANYAKUMARI		
Telephone number	-		
Mobile number	+91 - 9629383257		
Email	WINGLAD70@GMAIL.COM		
Gender	MALE		
Community	BC		
PAN Number	AMIPG9422C		
Passport Number			
Aadhar Number	710354418371		
Faculty code given by C.O.E.	952329		
Faculty code given by A.I.C.T.E.	AU1		
Date of Birth	05-06-1980		
Age	44		
I. Particulars of Educational Qualification : (only completed)		

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.B.A.	BUSINESS ADMINIST RATION	2004	OTHERS - CSI JAYARAJ ANNAPAC KIAM	MANOMA NIAM SUNDARN AR UNIVERSI TY	52	SECOND CLASS	
P.G.	M.B.A.	OTHERS - HR MARKETI NG	2006	OTHERS - VHNSN	MADURAI KAMARAJ UNIVERSI TY	67	FIRST CLASS	

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) *

Designation

Work

Organisation

Nome of the College	Designation	Loining Data	Relieving Date / Current Date	E	xperience	9
Name of the College	Designation	Joining Date	for Presently Working Institutions	Years	Months	Days
OTHERS - ST JOSEPH COLLEGE OF ENGINEERING AND TECHNOLOGY	OLLEGE OF ASSISTANT NGINEERING AND ECHNOLOGY ASSISTANT SN ENGINEERING ASSISTANT		27-07-2018	4	2	8
PSN ENGINEERING COLLEGE			04-06-2024	0	9	29
SCAD COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	05-06-2009	09-05-2014	4	11	5
EINSTEIN COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	01-09-2021	31-07-2023	1	10	30
		•	Total	11	10	18
V. Industrial Experience	:					
Name of the Designati	Relieving Date	E	xperience	,		

Joining Date

Years | Months | Days

Relieving Date

AUR (No. of days) 1 Squad Member (No. of days)		External Examiner (Practical) (No. of days) 4	Central Evaluation (No. of scripts Evaluated) 200	Re-Evaluation (No. of scripts Evaluated) 100	
certified	that all the inform	nation provided are true to	the best of my knowledge.		

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.ECIVIL ENGINEERING
Name of the faculty member	MR. SHANMUGA PRIYAN P
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	11/103 RAJIV GANDHI NAGAR,ALANGULAM
Line 2	ALANGULAM,627851
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9025826672
Email	PRIYANCONSTRUCTION@GMAIL.COM
Gender	MALE
Community	MBC
PAN Number	DTPPS1116D
Passport Number	
Aadhar Number	848019203974
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	26-07-1990
Age	34
I. Particulars of Educational Qualification : (only comple	eted)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	CIVIL ENGINEER ING	2011	RAJAS ENGINEER ING COLLEGE	ANNA UNIVERSIT Y	75	FIRST CLASS	
P.G.	M.E.	STRUCTUR AL ENGINEER ING	2015	RAJAS ENGINEER ING COLLEGE	ANNA UNIVERSIT Y	85	DISTINCTI ON	A second

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	Е	Experience	
Name of the conege	Designation	Johning Date	Working Institutions	Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	30-06-2023	06-02-2024	0	7	7
OTHERS - SRI VENKATESA PERUMAL COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	28-07-2021	26-06-2023	1	10	30
THAMIRABHARANI ENGINEERING COLLEGE	ASSISTANT PROFESSOR	20-01-2016	21-07-2021	5	6	2
		•	Total	8	0	10

V. Industrial Experience :

Name of the	Decignation	Nature of Work	Joining Data	Deligring Date	E	xperience	•
Organisation	Designation	Nature of work	Joining Date	Relieving Date	Years	Months	Days

VI. C.O.E. Appointment Experience :

Capacity at w	which service is e	xtended for the conduct o	f Exmination during the	e last year
ATTR		.		

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

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

)PS. PRIYAN

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	B.EGENERAL ENGINEERING
Name of the faculty member	MR. AUSWIN JOSEPH ARULRAJ G
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	NO 1 AUSWIN COTTAGE NEAR THIRU NAGAR REDDIYARPATTI ROAD N G O COLONY PALAYAMKOTTAI TIRUNELVELI
Line 2	TIRUNELVELI 627007
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9488146982
Email	PRICIPALPSNEC@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	CIZPA4648B
Passport Number	
Aadhar Number	942622100310
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	11-07-1995
Age	29
I. Particulars of Educational Qualification : (onl	y completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.TECH.	CHEMICA L ENGINEE RING	2018	ST JOSEPH'S COLLEGE OF ENGINEE RING (AUTONO MOUS)	ANNA UNIVERSI TY	62.1	SECOND CLASS	
P.G.	M.TECH.	CHEMICA L ENGINEE RING	2020	SRI VENKATE SWARA COLLEGE OF ENGINEE RING (AUTONO MOUS)	ANNA UNIVERSI TY	72.2	FIRST CLASS	

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) *

Nome of the College	Designation	Loining Data	Relieving Date / Current Date	E	xperience	e
Name of the College	Designation	Joining Date	for Presently Working Institutions	Years	rs Months 3 3	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	22-02-2023	05-06-2024	1	1 3 12	
		•	Total	1	3	13
V. Industrial Experience	:					
Name of the Designs	Nature of	Loining Data	Relieving Date	E	xperience	e
Organisation Designa	Work	l loining Date		Years	Months	Days

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)
s certified	that all the inform	ation provided and true to	the best of my inequiledge	
		ation provided are true to	the best of my knowledge.	
			the best of my knowledge.	
			the best of my knowledge.	
			the best of my knowledge.	

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	AUTOMOBILE ENGINEERING
Name of the Degree & Course	B.EAUTOMOBILE ENGINEERING
Name of the faculty member	MR. SANKAR 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	57
I. Particulars of Educational Qualification : (only com	pleted)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name the Univer)	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtaine		ificat e
U.G.	B.E.	MECHANI CAL ENGINEER ING	2017	GOVERNM ENT COLLEGE OF ENGINEER ING TIRUNELV ELI	ANNA UNIVE TY	RSI	6.34	SECONE CLASS	2 PROVIDENT	
P.G.	M.E.	AUTOMOB ILE ENGINEER ING	2020	PSN ENGINEER ING COLLEGE	ANNA UNIVE TY	RSI	8.17	FIRST CLASS		NVERSITA And and a second sec
Upload So	canned copy o	f Original De	gree Certifi	cate.						
III. Facult IV. Acader (Start fro	Ph.D. Thesis y in which Pl nic Experien m the Curre of the College	n.D. was awa ce : nt working F	Experience	·	Date	/ Cu	ieving Date rrent Date Presently			e
File : II. Title of III. Facult IV. Acader (Start fro	y in which P nic Experien	n.D. was awa ce : nt working F) *	J Date	/ Cu for			Experience Months	e Days
File : II. Title of III. Facult V. Acader (Start fro Name o	y in which P nic Experien m the Curren of the College	n.D. was awa ce : nt working F	Experience ignation	·		/ Cu for V In	rrent Date Presently Working		-	
File : II. Title of III. Facult V. Acader (Start fro Name of PSN ENG	y in which P nic Experien m the Curren of the College	n.D. was awa ce : nt working F e Des ASSISTA	Experience ignation	Joining		/ Cu for V In	rrent Date Presently Working stitutions	Years	Months	Days
File : I. Title of II. Facult V. Acader Start fro Name of PSN ENGI COLLEGE	y in which P nic Experien m the Curren of the College	n.D. was awa ce : nt working F e Des ASSISTA PROFES	Experience ignation	Joining		/ Cu for V In	Presently Working stitutions	Years	- Months 6	Days
File : II. Title of III. Facult V. Acader (Start fro Name of PSN ENGI COLLEGE	y in which Pl nic Experien m the Curren of the College NEERING ial Experience	n.D. was awa ce : nt working F Des ASSISTA PROFES	ignation NNT SOR	Joining 01-12-20	21	/ Cu for V In 04-0	Presently Working stitutions 6-2024 Tota	years 2 1 2 E	- Months 6	Days 4 7
File : I. Title of II. Facult V. Acader Start fro Name of PSN ENGI COLLEGE V. Industr	y in which Pl nic Experien m the Current of the College NEERING ial Experience the Design	n.D. was awa ce : nt working F Des ASSISTA PROFES	Experience ignation	Joining 01-12-20	21	/ Cu for V In 04-0	Presently Working stitutions	years 2 1 2 E	Months 6 6	Days 4 7
File : I. Title of II. Facult V. Acader Start fro Name of Organisa /I. C.O.E.	y in which Pl nic Experien m the Current of the College NEERING ial Experience the Design	n.D. was awa ce : ht working F Des ASSISTA PROFES	ignation ANT SOR ure of Worl	Joining 01-12-20	21 J Date	/ Cu for N 04-0	ieving Date	Years 2 2 1 2 F Years F Years	Months 6 6 Cxperience Months	Days 4 7

Samkank Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.TECHAGRICULTURAL 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	27
I. Particulars of Educational Qualification : (only co	ompleted)

Category	Name of the Degree	Specializa tion	Year of Passing	Name o the Colleg		Name the Univer	;	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	d Cla obta			ificat e
U.G.	B.E.	CIVIL ENGINEE RING	2019	UNIVER TY COLLEG OF ENGINE RING NAGERC IL	E A	ANNA UNIVE TY	RSI	67	FIRST CLAS			
P.G.	M.E.	AERONAU TICAL ENGINEE RING	2021	ANNA UNIVESI Y REGION CAMPUS IRUNEL LI	AL U S,T T	ANNA UNIVEI TY	RSI	83.5	FIRST CLAS			
* Upload Sc	anned copy o	f Original De	gree Certif	ìcate.								
I.a. Additio	onal Qualific	ation :- NO A	ADDITION	AL QUALI	IFICA	TION						
Score : File :												
II. Title of	Ph.D. Thesis	6										
III. Faculty	y in which Pl	n.D. was awa	rded									
	nic Experien n the Currer		Experience	e)*								
					Relieving Date / Current Date			rience	ience			
Name of	f the College	Desi	gnation	Joini	ing D	Date	V	Presentl Vorking stitutions	Voa	rs Mo	onths	Days
PSN ENGI	NEERING	ASSISTA PROFES		03-08-	2022		04-0	6-2024	1	10		2
		- 1		I				Tot	al 1	10		7
V. Industri	al Experienc	e:										
Name of	the									Expe	rience	,
Organisat	I Hocian	ation Natu	re of Wor	k Joini	ing D	Date	Reli	eving Da	te Year		onths	Days
	Appointment t which servi			Conduct		Tumina	tion	during +1	ha last	(0.3.r		
AUR	Squa		ternal Exa							ear e-Evalu	uation	L
(No. of days)	Memb (No. of d	-	(Practic						6			

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

M.S. Shahe

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.EMECHANICAL 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	29
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specializ ation	Year of Passing	Name o the College	tl Univ	ne of he versit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Clas: obtain		ificat e
U.G.	B.E.	MECHANI CAL ENGINEE RING	2016	GRACE COLLEGE OF ENGINEE RING	UNIV	A ′ERSI	6.98	FIRST CLASS		
P.G.	M.E.	ENGINEE RING DESIGN	2018	GOVERN MENT COLLEGE OF ENGINEE RING TIRUNEL VELI	E ANN UNIV TY	A ′ERSI	7.05	FIRST CLASS		
I.a. Additic Score : File : II. Title of	anned copy o onal Qualific Ph.D. Thesis	ation :- NO	ADDITION		FICATIO	'N				
IV. Acaden	y in which Pl nic Experient n the Currer	ce :		e)*						
Name of	the College	Dosia	nation	Joining	r Dato	/ Cu	eving Date rrent Date Presently	E	xperience	
	the conege	Desig	nation	Jonni	y Date	W	orking titutions	Years	Months	Days
PSN ENGI COLLEGE	NEERING	ASSISTAL PROFESS		13-06-20	18	03-06	5-2024	5	11	21
				-		-	Total	5	11	26
V. Industri	al Experienc	e :								
Name of	the Destant	Na	ature of	Toinin	- Data	Dali	nder er Data	E	xperience	,
Organisat	ion Designa		Work	Joinin	y Date		eving Date	Years	Months	Days
Capacity a	Appointment	ice is exten	ded for th				Ĭ			
AUR (No. of days)	Squad Membe (No. of d	er	External Examiner (Practical)Central Ev (No. of s Evalua)(No. of days)Evalua					(No.	Evaluatior of scripts aluated)	

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

S.A

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.TECHAGRICULTURAL 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	29
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specializ ation	Year of Passing	Name o the College	univ	ne of he versit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		tificat e	
U.G.	B.E.	MECHANI CAL ENGINEE RING	2016	S S M COLLEG OF ENGINE RING	UNIV	A ′ERSI	71	FIRST CLASS			
P.G.	M.E.	ENGINEE RING DESIGN	2018	GOVERN MENT COLLEG OF ENGINE RING TIRUNEI VELI	E ANN E UNIV TY	A ′ERSI	80	FIRST CLASS		Brian and a second seco	
* Upload Sc	anned copy o	f Original D	egree Certi	ficate.							
I.a. Additic Score : File :	onal Qualific	a tion :- NO	ADDITION	AL QUAL	IFICATIO	N					
II. Title of	Ph.D. Thesis	S									
III. Faculty	y in which P	h.D. was aw	varded								
	nic Experien n the Curre		Experienc	e)*							
Name of	the College	Desi	mation	Ioinin	a Data	/ Cu	eving Date rrent Date	E	xperienc	erience	
Name of	the College	Desi	gnation	Joinin	g Date	M	Presently /orking titutions	Years	Months	Days	
PSN ENGI COLLEGE	NEERING	ASSISTA PROFES		20-01-20)21	04-06	5-2024	3	4	16	
							Total	3	4	18	
V. Industri	al Experienc	c e :									
Name of	the	N	ature of					E	xperienc	e	
Organisat	I LIOCIAN	ation	Work	Joinin	g Date	Relie	eving Date	Years	Months	Days	
	Appointmen t which serv			e conduc	t of Fym	inatio	n during ti	ne laet v	ear		
AUR (No. of days)	Squa Squa Memb (No. of d	d Ex er	ternal Exa (Practica (No. of da	miner al)	Centra (No.		uation ripts	Re-H (No.	Evaluation of script aluated)	I	
It is certifie	d that all the	information	provided a	re true to	the best o	of my k	nowledge.				



Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	AUTOMOBILE ENGINEERING
Name of the Degree & Course	B.EAUTOMOBILE ENGINEERING
Name of the faculty member	MR. PRAVINKUMAR M I
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	43/8 MUPPDATHI AMMAN KOVIL 3RD STREET
Line 2	PULIYANGUDI-627855
District	TENKASI
Telephone number	-
Mobile number	+91 - 8870791678
Email	PRAVINVELVEL@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	CWTPP1282L
Passport Number	
Aadhar Number	963281457205
Faculty code given by C.O.E.	9523322
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	20-07-1998
Age	26
I. Particulars of Educational Qualification : (only	y completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Nam th Univ y	ersit	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Clas obtain		ificat e
U.G.	B.E.	AERONAU TICAL ENGINEE RING	2020	PSN COLLEGE OF ENGINEE RING AND TECHNOL OGY (AUTONO MOUS)	ANNA UNIV TY		74	FIRST CLASS		
P.G.	M.E.	AVIONICS	2022	PSN COLLEGE OF ENGINEE RING AND TECHNOL OGY (AUTONO MOUS)	ANN/ UNIV TY		80	FIRST CLASS		
	Ph.D. Thesi y in which P		arded							
	nic Experien n the Curre		Experienc	e)*						
Name of	the College	Desig	nation	Joining I	Date	/ Cu	eving Date rrent Date Presently	E	xperience	9
		2.00-3		J		N	orking titutions	Years	Months	Days
PSN ENGI COLLEGE	NEERING	ASSISTA PROFESS		13-09-2023	}	04-06	5-2024	0	8	22
							Total	0	8	26
V. Industri	al Experien	ce :								
Name of		ation	ature of Work	Joining I	Date	Relie	eving Date		xperience	
Organisat			WUIK				-	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 inform	ation provided are true to	the best of my knowledge								
		M.I.R.Y.									
Signature of	f 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.AMASTER OF BUSINESS ADMINISTRATION
Name of the faculty member	MRS. MAHARANI N
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	6/98,AASATH STREET, MKP NAGAR, PALAYAMKOTTAI,TIRUNELVELI
Line 2	627002
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9952446859
Email	PERUMALKUTTIMA041120@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	DHOPN6592Q
Passport Number	
Aadhar Number	349935456808
Faculty code given by C.O.E.	95230001
Faculty code given by A.I.C.T.E.	143847014033
Date of Birth	20-05-1992
Age	32
I. Particulars of Educational Qualification : (only comp	leted)

Category		ame of Degree		cializat ion	Year of Passing	Nam the Co		Name of the Universit		% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	0	Class btained	Cert	ificate
U.G.	B.S	C.	ELEC CS A	MUNI	2012	OTHEF SS DURAI Y NADA MARRI AL COLLE	SAM AR AMM	MANOMAN AM SUNDARN R UNIVERSI Y	A	75	DIS N	STINCTI		
P.G.	M.E	3.A.	BUSI	TER OF NESS INISTR N	2014	INFAN JESUS COLLE OF ENGIN NG	GE	ANNA UNIVERSI Y	Г	75	FIF CL	RST ASS		
Upload So	canne	ed copy of	Origin	al Degre	e Certifica	ate.								
ile :														
II. Facult V. Acader Start fro	y in v nic E m th	Experienc e Current	e : t work	ting Exp	perience)				/ (elieving Da Current Da	ate	E	xperienc	ce.
II. Facult V. Acader Start fro	y in v nic E m th	which Ph. Experienc	e : t work	ting Exp			Join	ing Date	/ (fo		ate tly	E Years	_	
II. Facult V. Acader Start fro	y in v nic H m th	which Ph. Experienc e Current he Colleg	e : t work	ting Exp	p <mark>erience)</mark> Designatio		Join 01-11		/ (fo I	Current Da or Present Working	ate tly		-	
II. Facult V. Acader Start fro Name PSN ENGI	y in v nic H m th	which Ph. Experienc e Current he Colleg	e : t work	ting Exp D ASSIST	p <mark>erience)</mark> Designatio				/ (fo I	Current Da or Present Working Institution	ate tly	Years	Months	Days
II. Facult V. Acader Start fro Name PSN ENGI	y in v nic F m th	which Ph. Experienc e Current he Colleg RING	e : t work	ting Exp D ASSIST	p <mark>erience)</mark> Designatio				/ (fo I	Current Da or Present Working Institution	ate tly 15	Years 0	Months	Days 4
II. Facult V. Acader Start fro Name PSN ENGI COLLEGE 7. Industr	y in v nic E m th o of t NEE	which Ph. Experienc e Current he Colleg RING xperience	e : t work	D ASSIST PROFE	perience) pesignatio CANT SSOR	n	01-11	-2023	/ C fc 04	Current Da or Present Working Institution -06-2024 To	ate tly 15 otal	Years 0 0	Months	Day : 4 7
II. Facult V. Acader Start fro Name PSN ENGI COLLEGE	y in v nic E m th o of t NEE	which Ph. Experienc e Current he Colleg RING	e : t work	D ASSIST PROFE	p <mark>erience)</mark> Designatio	n	01-11		/ C fc 04	Current Da or Present Working Institution	ate tly 15 otal	Years 0 0	Months 7 7	Day: 4 7
II. Facult V. Acader Start fro Name PSN ENGI COLLEGE 7. Industr Name of Organisat	y in v nic F m th e of t NEE	which Ph. Experience e Current he Colleg RING xperience Designa	e : t work	ASSIST PROFE Nat	perience) pesignatio CANT SSOR ure of Wo	n	01-11 Join	-2023	/ C fc 04	Current Da or Present Working Institution -06-2024 To elieving Da	ate Ely IS Dtal ate	Years 0 0 E Years	Months 7 7 xperienc	Day 4 7



Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.EMECHANICAL AND AUTOMATION ENGINEERING
Name of the faculty member	MR. SIVAKUMAR G
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	2/65,NARANAMANGALAM
Line 2	RAMANATHAPURAM-623537
District	RAMANATHAPURAM
Telephone number	-
Mobile number	+91 - 7200285719
Email	SIVAENGG047@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	FIYPS7217E
Passport Number	
Aadhar Number	217264774735
Faculty code given by C.O.E.	9523334
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	20-05-1992
Age	32
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	th Univ	ne of ne rersit	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Clas obtain		ificat e
U.G.	B.E.	MECHANI CAL ENGINEE RING (TAMIL MEDIUM)	2014	UNIVERSI TY COLLEGE OF ENGINEE RING RAMANAT HAPURAM	ANN/ UNIV TY		73.1	FIRST CLASS		
P.G.	M.E.	THERMAL ENGINEE RING	2019	ANNAI VAILANKA NNI COLLEGE OF ENGINEE RING	ANNA UNIV TY		73.6	FIRST CLASS		
III. Faculty	Ph.D. Thesi y in which P nic Experien	h.D. was aw	arded							
	n the Curre		Experienc	e)*		Doli	eving Date	1		
Name of	f the College	e Desig	Ination	Joining I	Date	/ Cur for W	rrent Date Presently /orking	E Years	xperience Months	Days
OTHERS - POLYTECH COLLEGE	MARUTHI INIC	OTHERS LECTUR		28-11-2019)		titutions 5-2023	3	6	29
PSN ENGI COLLEGE	NEERING	ASSISTA PROFES		12-02-2024	Ł	03-06	5-2024	0	3	21
							Total	3	10	24
V. Industri	al Experien	ce :								
Name of Organisat	1 100100	ation	ature of Work	Joining I	Date	Relie	eving Date		xperience	
Jumou								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 inform	ation provided are true to	the best of my knowledge							
Signature of	the Faculty :	Jul .								

	1
Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.EMECHANICAL 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	51
I. Particulars of Educational Qualification : (only com	pleted)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	MECHANI CAL ENGINEE RING	1994	OTHERS - REGIONA L ENGIEERI NG COLLEGE	BHARATH IYAR UNIVERSI TY	56	SECOND CLASS	Contract of the second
P.G.	M.E.	MANUFAC TURING ENGINEE RING	2013	OTHERS - VINAYAGA MISSIONS UNIVERSI TY	OTHERS - VINAYAGA MISSIONS UNIVERSI TY	71	FIRST CLASS	

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

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

IV. Academic Experience :

(Start from the Current working Experience) *

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently	Experience			
Name of the Conege	Designation	Johning Date	Working Institutions	Years	Months	Days	
S VEERASAMY CHETTIAR COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	11-07-2013	19-02-2021	7	7	9	
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	05-04-2021	04-06-2024	3	1	30	
			Total	10	9	13	
V. Industrial Experience :							

Name of the	Decimentia	Nature of	Later	ing Data	Relieving	E	Experience	e
Organisation	Designation	Work	Join	ing Date	Date	Years	Months	Days
SRISAITECH CONSULTANC Y	PROJECT MANAGER	CONTRACT WORK	22-10)-2009	15-06-2011	1	7	25
SWETHA CONSTRUCTI ON	SITE ENGINEER	CONTRACT WORK	13-09-2004		17-09-2009	5	0	5
MSRB ENGINEERIN G WORKS CHENNAI	SITE IN CHARGE	INSPECTION	05-05-2000		18-08-2004	4	3	14
SYSTEMS AND COMPONENT S PVT LTD BOMBAY	SERVICE ENGINEER	PRODUCTION	02-02-1996		15-03-2000	4	1	14
					Total	15	0	27
	intment Experie ch service is ex	ence : tended for the co	onduc	t of Exmin	ation during th	ne last v	ear	
AUR (No. of days)	Squad Member No. of days)	External Exami (Practical) (No. of days)	ner	Central (No. c	Evaluation of scripts luated) 5	Re-I (No.	Evaluation of script aluated)	
it is certified that	t all the informat	ion provided are t	rue to	the best of	my knowledge.			
		1 1						
	0	11						
	(· ,	M						
Signature of th	e Faculty :	A A A A A A A A A A A A A A A A A A A						

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	35
I. Particulars of Educational Qualification : (on	ly completed)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.A.	ENGLISH	2010	OTHERS - ST XAVIERS COLLEGE	MANOMA NIAM SUNDARN AR UNIVERSI TY	47	OTHERS - THIRD	
P.G.	OTHERS - M.A.	OTHERS - ENGLISH	2015	OTHERS - ST JOHNS COLLEGE	MANOMA NIAM SUNDARN AR UNIVERSI TY	56	SECOND CLASS	
OTHERS - M.PHI.	OTHERS - M.PHIL	OTHERS - ENGLISH	2016	OTHERS - ST JOHNS COLLEGE	MANOMA NIAM SUNDARN AR UNIVERSI TY	74	FIRST CLASS	

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

File :

II. '	Title	of	Ph.D.	Thesis	
--------------	-------	----	-------	--------	--

IV. Academic Experience :

(Start from the Current working Experience) *

Name of the College	Decignation	Loining Data	Relieving Date / Current Date for Presently	Е	xperience	9
Name of the Conege	Designation	Joining Date	Working Institutions	Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	22-04-2022	05-06-2024	2	1	14
			Total	2	1	14
V. Industrial Experience	•:					
Name of the Designation	Nature of	Joining Date	Relieving Date	E	xperience	9
Organisation	Work	Joining Date	Keneving Date	Years	Months	Days

AURSquadExternal ExaminerCentral EvaluationRe-Evaluation(No. ofMember(Practical)(No. of scripts)(No. of scripts)days)(No. of days)(No. of days)Evaluated)Evaluated				
s certified	that all the inform	ation provided are true to	the best of my knowledge.	
		Address of "		
		(Arther Arther A		

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.ECOMPUTER SCIENCE AND 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	31
I. Particulars of Educational Qualification : (only comp	leted)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Namo th Unive	e	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		ificat e
U.G.	B.E.	COMPUTE R SCIENCE AND ENGINEE RING	2015	SACS M A V M M ENGINEE RING COLLEGE	ANNA UNIVE TY		76	FIRST CLASS		
P.G.	M.E.	COMPUTE R SCIENCE AND ENGINEE RING	2017	PSN ENGINEE RING COLLEGE	ANNA UNIVE TY		8.4	FIRST CLASS		LUISERIUM Carlos Control Control br>Control Control Control br>Control Control
-	canned copy o				CATION					
Score : File :	-									
I. Title of	Ph.D. Thesis									
III. Faculty	y in which Pl	n.D. was awa	arded							
	nic Experien									
(Start from	m the Currer		Experience) *						
· 	m the Currer	it working l	-		Date	/ Cu	eving Date rrent Date Presently	E	xperience	9
· 		it working l	Experience) * Joining	Date	/ Cu for V	-	E Years	Experience Months	Days
	m the Currer	it working l	gnation NT			/ Cu for V Ins	rrent Date Presently Vorking		-	
Name of PSN ENGI	m the Currer	Desi ASSISTA	gnation NT	Joining		/ Cu for V Ins	rrent Date Presently Vorking stitutions	Years 0	Months	Days
Name of PSN ENGI COLLEGE	m the Currer	Desi Desi ASSISTA PROFES	gnation NT	Joining		/ Cu for V Ins	rrent Date Presently Vorking stitutions 6-2024	Years 0	Months	Days 11
Name of PSN ENGI COLLEGE	m the Currer	ASSISTA PROFESS	gnation NT SOR	Joining 25-07-202	23	/ Cu for V Ins 04-0	rrent Date Presently Vorking stitutions 6-2024 Total	Years 0 0	Months	Days 11 16
Name of PSN ENGI COLLEGE V. Industri	the Design:	ASSISTA PROFESS	gnation NT	Joining 25-07-202	23	/ Cu for V Ins 04-0	rrent Date Presently Vorking stitutions 6-2024	Years 0 0	Months 10 10	Days 11 16
Name of PSN ENGI COLLEGE V. Industri Name of Organisat	the Design:	ASSISTA PROFESS e : Ation Natu	gnation NT SOR re of Work	Joining 25-07-202	23 Date	/ Cu for V Ins 04-0	rrent Date Presently Vorking stitutions 6-2024 Total eving Date	Years 0 0 E Years Vears	Months 10 10 Cxperience Months	Days 11 16



Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.EMECHANICAL 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	30
I. Particulars of Educational Qualification : (on	ly completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	AUTOMOB ILE ENGINEE RING	2016	OTHERS - NOORUL ISLAM CENTRE FOR HIGHER EDUCATI ON	OTHERS - NOORUL ISLAM CENTRE FOR HIGHER EDUCATI ON	75	FIRST CLASS	
P.G.	M.E.	AUTOMOB ILE ENGINEE RING	2018	OTHERS - NOORUL ISLAM CENTRE FOR HIGHER EDUCATI ON	OTHERS - NOORUL ISLAM FOR CENTRE FOR HIGHER EDUCATI ON	79	FIRST CLASS	

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) *

Nome of the College			Relieving Date / Current Date for Presently	Experience			
Name of the College	Designation	Joining Date	Years	Months	Days		
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	06-12-2022	04-06-2024	1	5	30	
		•	Total	1	5	2	
V. Industrial Experience	:						
Name of the Designa	Nature of	Joining Data	Dolioving Doto	E	Experience		
Organisation Designa	Work	Joining Date	Relieving Date	Years	Months	Days	

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15 CEI LIIIEU I	that all the inform	ation provided are true to	the best of my knowledge.	
	1	Constant of the second		
		Johns		

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.EMECHANICAL 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	36
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	tł Univ	ne of ne rersit	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Clas: obtain		tificat e
U.G.	B.E.	MECHANI CAL ENGINEE RING	2013	SARDAR RAJA COLLEGE OF ENGINEE RING			64	SECON CLASS	D	
P.G.	M.E.	MANUFA CTURING ENGINEE RING	2015	SARDAR RAJA COLLEGE OF ENGINEE RING			71	FIRST CLASS	Annu Annu Annu Annu Annu Annu Annu Annu	
* Upload Sc	anned copy o	f Original D	egree Certi	ficate.						
I.a. Additic Score : File :	onal Qualific	ation :- NO	ADDITION	AL QUALI	FICATIO	N				
I. Title of	Ph.D. Thesis	5								
III. Faculty	y in which Pl	n.D. was aw	arded							
	nic Experien n the Currei		Experienc	e)*						
						/ Cu	eving Date rrent Date	E	xperience	e
Name of	the College	Desig	Ination	Joining	f Date	N	Presently Vorking titutions	Years	Months	Days
PSN ENGE COLLEGE	NEERING	ASSISTA PROFESS		04-01-20	23	03-06	5-2024	1	4	31
							Total	1	5	3
V. Industri	al Experienc	ce :								
Name of	the	N	ature of					E	xperience	e
Organisat		ation	Work	Joining	r Date	Relie	eving Date	Years	Months	Days
	Appointmen				. –					
Capacity at AUR (No. of days)	t which serv Squae Memb (No. of d	d Ex er	ded for th ternal Exa (Practica (No. of da	miner al)	Centra (No.		uation ripts	Re-E (No.	ear Evaluation of script aluated)	



Name of the College	9523 - PSN ENGINEERING COLLEGE				
Name of the Department	AUTOMOBILE ENGINEERING				
Name of the Degree & Course	B.EAUTOMOBILE 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	45				
I. Particulars of Educational Qualification : (only completed)					

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANI CAL ENGINEER ING	2010	GOVERNM ENT COLLEGE OF ENGINEER ING TIRUNELV ELI	ANNA UNIVERSIT Y	57	SECOND CLASS	
P.G.	M.E.	THERMAL ENGINEER ING	2016	UNIVERSA L COLLEGE OF ENGINEER ING AND TECHNOL OGY	ANNA UNIVERSIT Y	7.68	FIRST CLASS	

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		Experience			
Name of the Conege	Designation	Joining Date	for Presently Working Institutions	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	04-06-2024	1	4	26		
			Total	10	11	25		
V. Industrial Experience :								

Name of th	e Designation	Nature of Work	Joining Date	Relieving Date	Experience							
Organisatio	n	Nature of Work	Joining Date	Kellevilly Date	Years	Months	Days					
	pointment Expe which service is a	rience : extended for the con	duct of Exminati	on during the las	st year							
AUR (No. of days)	AUR No. of (No. of days) External Examiner (Practical) Central Evaluation (No. of scripts)					Re-Evaluation (No. of scripts Evaluated)						
It is certified t	that all the inform	ation provided are true	e to the best of my	knowledge.								
		domit										
Signature of	the Faculty :						Signature of the Faculty :					

Name of the College	9523 - PSN ENGINEERING COLLEGE		
Name of the Department	MECHANICAL ENGINEERING		
Name of the Degree & Course	B.EMECHANICAL 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	29		
I. Particulars of Educational Qualification : (only completed)			

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name the Unive y	,	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		ificat e
U.G.	B.E.	MECHANI CAL ENGINEE RING	2016	GRACE COLLEGE OF ENGINEE RING	ANNA UNIVE TY	RSI	6.98	FIRST CLASS		
P.G.	M.E.	THERMAL ENGINEE RING	2020	UNIVERS AL COLLEGE OF ENGINEE RING AND TECHNOL OGY	ANNA UNIVE TY	RSI	8.42	FIRST CLASS		
* Upload Se	canned copy o	of Original De	egree Certi	ficate.						
I.a. Additi Score : File :	onal Qualific	ation :- NO	ADDITION	IAL QUALIFI	CATION	[
I. Title of Ph.D. Thesis										
II. Title of	III. Faculty in which Ph.D. was awarded									
	y in which P	h.D. was aw	arded							
III. Facult IV. Acadei	y in which P nic Experien <mark>m the Curre</mark>	ice :		e)*						
III. Facult IV. Acadeı (Start fro	nic Experien m the Curre	nce : nt working]	Experienc			/ Cur	ving Date rent Date	E	xperience	÷
III. Facult IV. Acadeı (Start fro	nic Experien	nce : nt working]		e) * Joining I		/ Cur for I W		E Years	xperienco Months	e Days
III. Facult IV. Acader (Start fro Name of	nic Experien m the Curre f the College INEERING	nce : nt working]	Experienc nation		Date	/ Cur for I W Inst	rent Date Presently orking		-	

V. Industrial Experience :

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

VI. C.O.E. Appointment Experience : Capacity at which service is extended for the conduct of Exmination during the last year AUR Squad **External Examiner Central Evaluation Re-Evaluation** (No. of scripts (No. of scripts (No. of Member (Practical) days) (No. of days) (No. of days) **Evaluated**) **Evaluated**)

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

1 A. Balang. Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.ECIVIL 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	27
I. Particulars of Educational Qualification : (only comp	leted)

Category	Name of the Degree	Sp	ecializa tion	Year of Passing	Name of the College	Name the Univer	,	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtaine	1 Orti	ficate
U.G.	B.E.		VIL IGINEER G	2018	DMI ENGINEER ING COLLEGE	ANNA UNIVE TY	RSI	74	FIRST CLASS	A LEASE AND A LEAS	
P.G.	M.E.	CS FO ON	ECHANI AND UNDATI I IGINEER	2020	SOLAMAL AI COLLEGE OF ENGINEER ING	ANNA UNIVE TY	RSI	81.3	FIRST CLASS	Construction of the second sec	
[:] Upload Sc	canned copy	of Or	iginal Deg	ree Certific	ate.						
Score : File : I. Title of	Ph.D. Thes	sis			L QUALIFIC.	ATION					
V. Acaden	nic Experie m the Curr	nce :) *						
Nama a	f the Colle	<i>~</i>	Daci	gnation	Ioinin	r Data	/ C ı	ieving Date urrent Date		xperience	e
Name o	of the Colle	ge	Desi	gnation	Joininé	g Date for Presently Working Institutions		Years	Months	Days	
PSN ENGI COLLEGE	NEERING		ASSISTA PROFESS		06-04-20)22	04-0)6-2024	2	1	29
								Tota	l 2	1	29
V. Industri	ial Experie	nce :									
Name	of the	Daci	anation	Nature o	of Loining	r Data	Dol	ioring Date	E	xperience	e
Organi	sation	Desi	gnation	Work	Joining	y Date	Kei	ieving Date	Years	Months	Days
	ANOV	000	ГЕСН	TESTING	05-11-20)20	30-0)3-2022	1	4	25
ALPHA CONSULT FOR SOIL MATERIAI TESTING	AND		NEER	OF SOIL	001120						

	pointment Exper which service is e	ience : xtended for the conduct (of Exmination during the	e last year					
AURSquadExternal Examiner (Practical) (No. of days)Central Evaluation (No. of scripts Evaluated)Re-Evaluation (No. of scripts Evaluated)									
It is certified t	hat all the informa	tion provided are true to th	e best of my knowledge.						
	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	33			
I. Particulars of Educational Qualification : (only comp	oleted)			

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.SC.	OTHERS - MATHEMA TICS	2011	OTHERS - THE AMERICA N COLLEGE	MADURAI KAMARAJ UNIVERSI TY	57	SECOND CLASS	
P.G.	M.SC.	OTHERS - MATHEMA TICS	2014	OTHERS - AYYA NADAR JANAKAI AMMAL COLLEGE	MADURAI KAMARAJ UNIVERSI TY	63	FIRST CLASS	
OTHERS - MPHIL	OTHERS - MATHEMA TICS	OTHERS - MATHEMA TICS	2015	OTHERS - ANJAC COLLEGE	MADURAI KAMARAJ UNIVERSI TY	74	FIRST CLASS	

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) *

	Destanding	Designation Joining Date Joining Date Vorking Institutions		E	Experience	
Name of the College	Designation			Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	26-04-2022	05-06-2024	2	1	10
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	107-07-2016 13		2	3	25
	•	•	Total	4	5	7
V. Industrial Experience						
Name of the Designati	on Nature of Work	Joining Date	Relieving Date	E	xperience	9
Organisation			Kelleving Date	Years	Months	Days

VI. C.O.E. Appointment Experience : Capacity at which service is extended for the conduct of Exmination during the last year								
AUR (No. of days)Squad Member 								
It is certified t	hat all the informa	ation provided are true to th	ne best of my knowledge.					
	1	, D.L.						
Signature of	the Faculty :							

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.EMECHANICAL 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	37
I. Particulars of Educational Qualification :	(only completed)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	MECHANI CAL ENGINEE RING	2009	SRI RAMAKRI SHNA INSTITUT E OF TECHNOL OGY (AUTONO MOUS)	ANNA UNIVERSI TY	66	FIRST CLASS	And the second s
P.G.	M.E.	COMPUTE R AIDED DESIGN	2014	ANNA UNIVESIT Y REGIONAL CAMPUS,T IRUNELVE LI	ANNA UNIVERSI TY	7.21	FIRST CLASS	

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

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

IV. Academic Experience : (Start from the Current working Experience) *

Name of the College Designation		Joining Date	Relieving Date / Current Date for Presently	Experience		
Name of the conege	Designation	Jonning Date	Working Institutions	Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	10-01-2023	03-06-2024	1	4	25
			Total	1	4	27

V. Industrial Experience :

Name of the Organisation Designation Nature of Work Joining Date Relieving Date Experience Years Months Day	Γ								
Organisation Designation Nature of Work Johning Date Keneving Date Years Months Day		Name of the	Decignation	Noture of Work Loining Data		Polioving Data	Experience		
		Organisation	Designation	INALULE OF WOLK	Johning Date	Keneving Date	Years	Months	Days

VI. C.O.E. Appointment Experience :

Capacity at which service is extended for the conduct of Exmination during the last year							
AUR Squad External Examiner Central Evaluation Re-Evaluation							
(No. of	Member	(Practical)	(No. of scripts	(No. of scripts			
days)	(No. of days)	(No. of days)	Evaluated)	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.TECHAGRICULTURAL ENGINEERING			
Name of the faculty member	MR. MOHAMED THAMEEM ANSARI H			
Regular Or Adjunct	Regular			
Image				
Present Designation	ASSISTANT PROFESSOR			
Residential Address Line 1	16/73, METHAMARPALAYAM, 4TH STREET			
Line 2	MELAPALAYAM,627005			
District	TIRUNELVELI			
Telephone number	-			
Mobile number	+91 - 9894983725			
Email	TANSARI055@GMAIL.COM			
Gender	MALE			
Community	BC			
PAN Number	BTEPA4273T			
Passport Number				
Aadhar Number	379623608886			
Faculty code given by C.O.E.				
Faculty code given by A.I.C.T.E.	AU1			
Date of Birth	21-06-1992			
Age	32			
I. Particulars of Educational Qualification : (only completed	l)			

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Nam th Unive y	e ersit	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Clas: obtain		ificat e
U.G.	B.E.	CIVIL ENGINEE RING	2014	SATYAM COLLEGE OF ENGINEE RING AND TECHNOL OGY	ANNA UNIVI TY		84.8	FIRST CLASS		A construction of the second s
P.G.	M.E.	STRUCTU RAL ENGINEE RING	2020	ANNA UNIVESIT Y REGIONA L CAMPUS, TIRUNEL VELI	ANNA UNIVI TY		87.4	DISTIN ION	CONSISTENT and in A Sector of the American Sector of the American Sector of the American Sector of the American Constant and American Sector of the American Sec	
* Upload Sc	anned copy o	of Original De	egree Certi	ficate.						
I.a. Additic Score : File :	onal Qualific	c ation :- NO	ADDITION	IAL QUALIFI	CATIO	N				
II. Title of	Ph.D. Thesi	S								
III. Faculty	III. Faculty in which Ph.D. was awarded									
	IV. Academic Experience : (Start from the Current working Experience) *									
					Relieving D / Current D		irrent Date Experience		e	
Name (of the Colle	ge Des	ignation	Joining Date		for Presently Working Institutions		Years	Months	Days
DOM ENO	PSN ENGINEERING ASSISTANT COLLEGE PROFESSOR 30-10-2023					1				

29-08-2022

15-02-2021

THAMIRABHARANI

ANNA UNIVESITY

REGIONAL

ENGINEERING COLLEGE

CAMPUS, TIRUNELVELI

V. Industrial Experience :

ASSISTANT

PROFESSOR

TEMPORARY

TEACHING

STAFF

OTHERS -

20-09-2023

30-12-2021

1

0

Total 2

0

10

2

23

13

23

Name of t	he	Decimenti		Nature	Nature of World Joining Date		Delieurine Dete	Experience		
Organisation Designati		on	of Work		ig Date	Relieving Date	Years	Months	Days	
ANGELA CONSULTAN	ЛТ	SITE ENGINEER		FIELD WORK	02-06-2014		10-08-2018	4	2	9
	Total 4 2 9					9				
VI. C.O.E. Appointment Experience : Capacity at which service is extended for the conduct of Exmination during the last yearAURSquadExternal Examiner (Practical)Central Evaluation (No. of scriptsRe-Evaluation (No. of scripts(No. of days)Member (No. of days)(No. of days)Evaluated)Evaluated)							I			
t is certified that all the information provided are true to the best of my knowledge.										
Signature of	the F	Faculty :								

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.ECIVIL 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	37
I. Particulars of Educational Qualification : (only complete	d)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	tł Univ	ne of ne rersit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Clas: obtain		tificat e		
U.G.	B.E.	CIVIL ENGINEE RING	2011	PSN ENGINEE RING COLLEGE	ANNA UNIV TY		78	FIRST CLASS				
P.G.	M.E.	STRUCTU RAL ENGINEE RING	2015	PSN ENGINEE RING COLLEGE	ANNA UNIV TY		84	FIRST CLASS	ANN UNITED	NTT, CHENNAL - ME 855		
File : I I. Title of	Ph.D. Thesi	S										
III. Faculty	y in which P	h.D. was aw	arded									
	nic Experien m the Curre		Experienc	e)*								
Name of the College		Docid			Data	/ Cu	Relieving Date / Current Date		Experience			
INALLIE UL	the conege	Desig	nation	Joining Date		N	Presently Vorking stitutions	Years	Months	Days		
PSN ENGI COLLEGE		ASSISTAN PROFESS		07-06-2011		09-09	9-2012	1	3	3		
PSN ENGI COLLEGE		ASSISTAN PROFESS		05-10-202	0-2020		0 04-06-20		5-2024	3	7	31
PSN ENGI COLLEGE		ASSISTAL PROFESS		01-07-201	5	08-11-2015		0	4	8		

COLLEGE PROFESSOR Total 5 3 V. Industrial Experience :

Name of the	Designation	Nature of	Joining Date	Relieving Date	E	xperience	e
Organisation	Designation	Work	Joining Date	Kellevilig Date	Years	Months	Days

14

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

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.ECIVIL 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	BWEPR3187G
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	27
I. Particulars of Educational Qualification : (or	nly completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Nam th Univ y	ne ersit	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		ificat e
U.G.	B.E.	CIVIL ENGINEE RING	2018	DMI ENGINEE RING COLLEGE	ANNA UNIV TY		77.2	FIRST CLASS		A
P.G.	M.E.	STRUCTU RAL ENGINEE RING	2020	A R COLLEGE OF ENGINEE RING AND TECHNOL OGY	ANN4 UNIV TY		80.3	FIRST CLASS		
* Upload Sc	anned copy o	f Original D	egree Certi	ficate.						
I.a. Additic Score : File :	onal Qualific	ation :- NO	ADDITION	AL QUALIFI	CATIO	N				
II. Title of	Ph.D. Thesis	5								
III. Faculty	y in which Pl	h.D. was aw	varded							
	nic Experien m the Currei		Experienc	e)*						
Name of			Lining Date		Relieving Date / Current Date for Presently		Experience		.	
Name of the College		Desig	Designation		Joining Date		Working Institutions		Months	Days
		ASSISTA PROFESS	DISTANT 13-12-2021 DFESSOR		1	04-06-2024		2	5	23
							Total	2	5	25
V. Industri	al Experienc	ce :								
Name of the Nature of							Experience		,	
	Organisation Designation		n Work		Joining Date		Relieving Date		Months	Days
	Appointmen t which serve			o conduct c	f Frm	inatio	n during th	a laet v	oar	
capacity d	Apacity at which service is extended for the AUR Squad External Exam (No. of Member (Practica days) (No. of days) (No. of day		miner	Central Evaluation (No. of scripts Evaluated)		uation	Re-Evaluation (No. of scripts Evaluated)			
AUR (No. of	Memb									5



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	36
I. Particulars of Educational Qualification : (only complete	d)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.SC.	OTHERS - MATHAM ATICS	2008	OTHERS - MANO COLLEGE	MANOMA NIAM SUNDARN AR UNIVERSI TY	56	SECOND CLASS	
P.G.	M.SC.	OTHERS - MATHAM ATICS WITH INFORMA TION TECHNOL OGY	2010	OTHERS - SREE PARAMA KALYANI COLLEGE	MANOMA NIAM SUNDARN AR UNIVERSI TY	72	FIRST CLASS	
P.G.	OTHERS - M.PHIL	OTHERS - MATHS	2012	OTHERS - STJOHNS COLLEGE	MANOMA NIAM SUNDARN AR UNIVERSI TY	62	FIRST CLASS	
* Upload Sc	anned copy o	of Original De	gree Certi	ficate.				
I.a. Additic Score : File :	onal Qualific	cation :- NO	ADDITION	AL QUALIF	ICATION			
II. Title of	Ph.D. Thesi	S						
III. Faculty	y in which P	h.D. was awa	arded					
IV. Academic Experience : (Start from the Current working Experience) *								

Name of the College		Desimution	Toinin		Relieving Date / Current Date	Experience		
		Designation Joining Date		for Presently Working Institutions	Years	Months	Days	
PSN INSTITUTE OF TECHNOLOGY AND SCIENCE		ASSISTANT PROFESSOR	11/1-05-2012		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		05-06-2024	4	11	29
EINSTEIN COLLEGE OF ENGINEERING		ASSISTANT PROFESSOR	02-01-20	017	03-06-2019	2	5	2
			•		Total	9	10	8
V. Industrial Experience Name of the Designat			of Joining Date			Experience		
	Designati	on Nature of	Ioinin	a Date	Relieving Date	E	xperience	9
Name of the Organisation	Designati	on Nature of Work	Joinin	g Date	Relieving Date	E Years	xperience Months	e Days
Organisation VI. C.O.E. Appo Capacity at wh AUR (No. of days)	ointment E	on Work xperience : is extended for th External Exa (Practica	e conduc miner al)	t of Exm Centra (No.		Years le last y Re-F (No.	Months	Days
Organisation VI. C.O.E. Appo Capacity at wh AUR (No. of days) 15	ointment E nich service Squad Member (No. of day	on Work xperience : is extended for th External Exa (Practica	e conduc uminer al) ays)	t of Exm Centra (No. Ev	ination during th Il Evaluation of scripts aluated)	Years le last y Re-F (No.	Months ear Evaluation of scripts	Days

Name of the DepartmentSTRUCTURAL ENGINEEERINGName of the Degree & CourseM.ESTRUCTURAL ENGINEERINGName of the faculty memberMS. MAKESHWARI NRegular Or AdjunctRegularImageImagePresent DesignationASSISTANT PROFESSORResidential Address Line 12/7, MARIAMMAN KOVIL NORTH STREET,		
Name of the Degree & CourseM.ESTRUCTURAL ENGINEERINGName of the faculty memberMS. MAKESHWARI NRegular Or AdjunctRegularImageImageImageImagePresent DesignationASSISTANT PROFESSORResidential Address Line 12/7, MARIAMMAN KOVIL NORTH STREET,DistrictTIRUNELVELITelephone number-Mobile number+91 - 8220653704EmailSRCEMAHESHWARI@GMAIL.COMGenderFEMALECommunityBCPAN Number924103249666Faculty code given by C.O.EFaculty code given by A.I.C.T.E.12-08-1987Date of Birth12-08-1987Age37	Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the faculty memberMS. MAKESHWARI NRegular Or AdjunctRegularImageImageImageImagePresent DesignationASSISTANT PROFESSORResidential Address2/7, MARIAMMAN KOVIL NORTH STREET,Line 1TK KULAM PETTAI -627010DistrictTIRUNELVELITelephone number-Mobile number91 - 8220653704EmailSRCEMAHESHWARI@GMAILCOMGenderFEMALECommunityBCPAN NumberGACPM8333JPasport Number924103249666Faculty code given by A.I.C.T.E.Image CommunityDate of Birth12-08-1987Age37	Name of the Department	STRUCTURAL ENGINEEERING
Regular Or AdjunctRegularImageRegularImageImagePresent DesignationASSISTANT PROFESSORResidential Address Line 12/7, MARIAMMAN KOVIL NORTH STREET,Line 2T K KULAM PETTAI -627010DistrictTIRUNELVELITelephone number-Mobile number+91 - 8220653704EmailSRCEMAHESHWARI@GMAIL.COMGenderFEMALECommunityBCPasport NumberGACPM8333JPasport Number924103249666Faculty code given by C.O.E.IFaculty code given by A.I.C.T.E.IDate of Birth12-08-1987Age37	Name of the Degree & Course	M.ESTRUCTURAL ENGINEERING
ImageImageImageImagePresent DesignationASSISTANT PROFESSORResidential Address2/7, MARIAMMAN KOVIL NORTH STREET,Line 12/7, MARIAMMAN KOVIL NORTH STREET,Line 2T K KULAM PETTAI -627010DistrictTIRUNELVELITelephone number-Mobile number+91 - 8220653704EmailSRCEMAHESHWARI@GMAIL.COMGenderFEMALECommunityBCPAN NumberGACPM8333JPassport Number924103249666Faculty code given by C.O.E.Image of the state of	Name of the faculty member	MS. MAKESHWARI N
Present DesignationASSISTANT PROFESSORResidential Address Line 12/7, MARIAMMAN KOVIL NORTH STREET,Line 2T K KULAM PETTAI -627010DistrictTIRUNELVELITelephone number-Mobile number+91 - 8220653704EmailSRCEMAHESHWARI@GMAIL.COMGenderFEMALECommunityBCPAN NumberGACPM8333JPasport Number924103249666Faculty code given by C.O.E.IFaculty code given by A.I.C.T.E.12-08-1987Age37	Regular Or Adjunct	Regular
Residential Address Line 12/7, MARIAMMAN KOVIL NORTH STREET,Line 2T K KULAM PETTAI -627010DistrictTIRUNELVELITelephone number-Mobile number+91 - 8220653704EmailSRCEMAHESHWARI@GMAIL.COMGenderFEMALECommunityBCPAN NumberGACPM8333JPassport Number924103249666Faculty code given by C.O.E.IFaculty code given by A.I.C.T.E.12-08-1987Aage37	Image	
Line 12//, MARIAMMAN KOVIL NORTH STREET,Line 2T K KULAM PETTAI -627010DistrictTIRUNELVELITelephone number-Mobile number+91 - 8220653704EmailSRCEMAHESHWARI@GMAIL.COMGenderFEMALECommunityBCPAN NumberGACPM8333JPassport Number924103249666Faculty code given by C.O.E.IFaculty code given by A.I.C.T.E.12-08-1987Age37	Present Designation	ASSISTANT PROFESSOR
DistrictTRUNELVELITelephone number-Mobile number+91-8220653704EmailSRCEMAHESHWARI@GMAIL.COMGenderFEMALECommunityBCPAN NumberGACPM8333JPassport Number924103249666Faculty code given by C.O.E.IFaculty code given by A.I.C.T.E.12-08-1987Date of Birth37		2/7, MARIAMMAN KOVIL NORTH STREET,
Telephone number-Mobile number+91 - 8220653704EmailSRCEMAHESHWARI@GMAIL.COMGenderFEMALECommunityBCPAN NumberGACPM8333JPassport Number924103249666Faculty code given by C.O.E.FemaleFaculty code given by A.I.C.T.E.12-08-1987Date of Birth37	Line 2	T K KULAM PETTAI -627010
Mobile number+91 - 8220653704EmailSRCEMAHESHWARI@GMAIL.COMGenderFEMALECommunityBCPAN NumberGACPM8333JPassport Number924103249666Faculty code given by C.O.E.IFaculty code given by A.I.C.T.E.12-08-1987Date of Birth12-08-1987Age37	District	TIRUNELVELI
EmailSRCEMAHESHWARI@GMAIL.COMGenderFEMALECommunityBCPAN NumberGACPM8333JPassport Number924103249666Faculty code given by C.O.E.IFaculty code given by A.I.C.T.E.12-08-1987Date of Birth12-08-1987Age37	Telephone number	-
GenderFEMALECommunityBCPAN NumberGACPM8333JPassport Number924103249666Faculty code given by C.O.E.IFaculty code given by A.I.C.T.E.IDate of Birth12-08-1987Age37	Mobile number	+91 - 8220653704
CommunityBCPAN NumberGACPM8333JPassport Number924103249666Aadhar Number924103249666Faculty code given by C.O.E.Image: Community of the second	Email	SRCEMAHESHWARI@GMAIL.COM
PAN NumberGACPM8333JPassport Number924103249666Aadhar Number924103249666Faculty code given by C.O.E.Image: Comparison of the second se	Gender	FEMALE
Passport Number924103249666Aadhar Number924103249666Faculty code given by C.O.E.Image: Comparison of the state of BirthDate of Birth12-08-1987Age37	Community	BC
Aadhar Number924103249666Faculty code given by C.O.E	PAN Number	GACPM8333J
Faculty code given by C.O.E.Image: Code given by A.I.C.T.E.Faculty code given by A.I.C.T.E.Image: Code given by A.I.C.T.E.Date of Birth12-08-1987Age37	Passport Number	
Faculty code given by A.I.C.T.E.Date of BirthAge37	Aadhar Number	924103249666
Date of Birth 12-08-1987 Age 37	Faculty code given by C.O.E.	
Age 37	Faculty code given by A.I.C.T.E.	
	Date of Birth	12-08-1987
I. Particulars of Educational Qualification : (only completed)	Age	37
	I. Particulars of Educational Qualification : (only comp	leted)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	CIVIL ENGINEE RING	2012	SARDAR RAJA COLLEGE OF ENGINEE RING	ANNAMAL AI UNIVERSI TY	79	FIRST CLASS	A CONTRACTOR OF
P.G.	M.E.	STRUCTU RAL ENGINEE RING	2017	SARDAR RAJA COLLEGE OF ENGINEE RING	ANNA UNIVERSI TY	81	FIRST CLASS	

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) *

Nome of the College	Designation Joining Da		Relieving Date / Current Date for Presently	Е	xperience	
Name of the College	Designation	Joining Date	Working Institutions	Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	14-06-2019	04-06-2024	4	11	21
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	06-09-2012	12-03-2014	1	6	7
			Total	6	5	1

V. Industrial Experience :

Name of the	Decignation	Nature of Work	Joining Data	Relieving Date	xperience	e
Organisation	Designation	Nature of work	Joining Date		Months	Days

VI. C.O.E. Appointment Experience :

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

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

N. Mundament

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE						
Name of the Department	CIVIL ENGINEERING						
Name of the Degree & Course	B.ECIVIL 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	АКСРЈ3570С						
Passport Number							
Aadhar Number	492858430047						
Faculty code given by C.O.E.							
Faculty code given by A.I.C.T.E.	AU1						
Date of Birth	06-11-1986						
Age	38						
I. Particulars of Educational Qualification : (only completed)							

Category	Name of the Degree	Specializat ion	Year of Passing	Nam the Co		Name o the Universit	obtained	I o	Class btained	l Certi	ficate	
U.G.	B.E.	CIVIL ENGINEERI NG	2007	OTHEI KARUI INISTI OF TECHI GY	NYA TUTE	ANNA UNIVERSI Y	т 80		RST ASS			
P.G.	M.TECH.	ENVIRONM ENTAL SCIENCE AND TECHNOLO GY	2009	ANNA UNIVE REGIC CAMP RUNE	ESITY NAL US,TI	ANNA UNIVERSI Y	T 75		RST ASS			
I.a. Addition Score : File : II. Title of												
	nic Experienc n the Curren		perience)	*			Relieving I / Current I		E	xperienc		
Name	of the Colleg	e I	Designatio	n	Join	ing Date	for Preser Working Institutio	J	Years	Months	Days	
PSN ENGI COLLEGE	NEERING	ASSIS PROFI	TANT ESSOR		06-06-	2011	04-06-2024		12	11	29	
							Т	otal	12	11	4	
7. Industri	al Experience):										
Name of t Organisat	LINCIGN	tion Na	ture of Wo	ork	Join	ing Date	Relieving I	Date	E Years	xperienc Months	1	
	Appointment t which servio			conduct	of Ex	mination d	uring the la	st ve	ar			
AUR (No. of days)	Squad M (No. of	ember E	xternal Ex (Practic (No. of d	aminer cal)		Central E	valuation scripts		Re-E	valuation ipts Evalu	-	
	d that all the is	nformation pr	arridad area			f l	urla dara					



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	31
I. Particulars of Educational Qualification : (only com	pleted)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.SC.	OTHERS - CHEMIST RY	2013	OTHERS - STXAVIER S COLLEGE	MANOMA NIAM SUNDARN AR UNIVERSI TY	63	FIRST CLASS	
P.G.	OTHERS - M.PHIL	OTHERS - CHEMIST RY	2017	OTHERS - MSUNIVE RSITY	MANOMA NIAM SUNDARN AR UNIVERSI TY	71	FIRST CLASS	
P.G.	M.SC.	OTHERS - CHEMIST RY	2016	OTHERS - ANJAC COLLEGE	MADURAI KAMARAJ UNIVERSI TY	70	FIRST CLASS	

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	Collogo	Designation		Relieving Dat/ Current Datg Datefor Presently		Hyporionco				
Name of the	Name of the College Designation Joining Date		Working Institutions	Years	Months	Days				
PSN ENGINEER COLLEGE		SSISTANT ROFESSOR	06-04-2022		06-04-2022		05-06-2024	2	1	30
	·				Total	2	1	0		
V. Industrial Ex	perience :									
Name of the		Nature of Work	Ioinin	a Data	Relieving Date	Experience				
Organisation	Designation	Nature of Work	Joining Date		Keneving Date	Years	Months	Days		

VI. C.O.E. Appointment Experience : Capacity at which service is extended for the conduct of Exmination during the last year												
AUR (No. of days)Squad Member 												
It is certified t	that all the inform	ation provided are true to t	he best of my knowledge.									
	It is certified that all the information provided are true to the best of my knowledge.											
Signature of	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	31
I. Particulars of Educational Qualification : (only comp	leted)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.SC.	OTHERS - CHEMISTR Y	2013	OTHERS - HOLY CROSS COLLEGE NAGERCOI L	MANOMA NIAM SUNDARN AR UNIVERSI TY	70	FIRST CLASS	
P.G.	OTHERS - M.PHIL	OTHERS - CHEMISTR Y	2017	JAYARAJ ANNAPAC KIAM CSI COLLEGE OF ENGINEER ING	MANOMA NIAM SUNDARN AR UNIVERSI TY	77	FIRST CLASS	
P.G.	M.SC.	OTHERS - CHEMISTR Y	2016	OTHERS - HOLY CROSS COLLEGE NAGERCOI L	MANOMA NIAM SUNDARN AR UNIVERSI TY	71	FIRST CLASS	

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	Decimation	Laining Data	Relieving Date / Current Date	Experience			
Name of the College	Designation	Joining Date	for Presently Working Institutions	Years	Months	Days	
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	10-06-2019	05-06-2024	4	11	26	
OTHERS - BABUJI MEMORIAL HIGHER SECONDARY SCHOOL	OTHERS - TEACHER	04-06-2018	20-05-2019	0	11	17	
	-		Total	5	11	19	

Ļ								
	Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	E	xperience	,
	Organisation	Designation		Joining Date	Relieving Date	Years	Months	Days

VI. C.O.E. Appointment Experience : Capacity at which service is extended for the conduct of Exmination during the last year								
AUR (No. of days)Squad Member 								
It is certified t	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.EAUTOMOBILE 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	30
I. Particulars of Educational Qualification : (onl	y completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	AUTOMOB ILE ENGINEE RING	2016	OTHERS - NOORUL ISLAM CENTER FOR HIGHER EDUCATI ON	OTHERS - NOORUL ISLAM CENTER FOR HIGHER EDUCATO IN	75	FIRST CLASS	
P.G.	M.E.	AUTOMOB ILE ENGINEE RING	2018	OTHERS - NOORUL ISLAM CENTER FOR HIGHER EDUCATI ON	OTHERS - NOORUL ISLAM CENTER FOR HIGHER EDUCATI ON	80	FIRST CLASS	

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 Conege De	signation		for Presently Working	T 7		ļ
Name of the College Designation Joining Date			Institutions	Years	Months	Days
	STANT ESSOR	27-01-2020	04-06-2024	4	4	9
		•	Total	4	4	11

Name of the OrganisationDesignationNature of WorkJoining DateRelieving DateExperienceYearsMonthsDays	Name of the	Designation	Nature of	Joining Data	Relieving Date	xperience	e
	Organisation	Designation	Work	Joining Date	Kelleving Date	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)	(No. of Member (Practical) (No. of scripts (No. of scripts							
It is certified	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.EMECHANICAL 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	38
I. Particulars of Educational Qualification : (only comp	pleted)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name the Univer	e	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtaine	001	ificat e
U.G.	B.TECH.	POLYMER TECHNOL OGY	2008	KAMARAJ COLLEGE OF ENGINEEI ING AND TECHNOL OGY (AUTONO MOUS)	UNIVE	RSI	84	DISTINC ON		
P.G.	M.E.	INDUSTRI AL ENGINEER ING	2014	BHARATH NIKETAN ENGINEEI ING COLLEGE	ANNA	RSI	8.5	DISTINC ON		Tr. CHENNAL - MARKET AL CHENNAL - MARKET AL CHENNAL AL
* Upload Sc	anned copy c	f Original De	gree Certifi	cate.						
III. Faculty IV. Acaden	Ph.D. Thesis y in which Pl nic Experien n the Curres	h.D. was awa ce :)*			ieving Dat		xperienc	
Name o	f the Colleg	e Des	ignation	Joinii	ng Date	for	urrent Date r Presently Working Istitutions	•	Months	
PSN ENGI COLLEGE	NEERING	ASSISTA PROFES		27-01-2	2020	04-0	06-2024	4	4	9
		l					Tota	d 4	4	11
V. Industri	al Experienc	ce :								
Name of	the				_			E	xperienc	e
Name of	I HOGIAN	ation Nati	ire of Worl	K Joinii	ng Date	Rel	ieving Dat	e Years	Months	Days
Name of t Organisat										
Organisat VI. C.O.E. 4	Appointmen t which serv			conduct o	f Exminat	tion (during the	last vear		
Organisat VI. C.O.E. 4	Appointmen t which serv Squa Meml (No. of (ice is extend nd Ex per		miner 1)	Central (No. d	Eval	uation ripts	Re-E (No.	valuatior of scripts aluated)	

N. Gibba Chee

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.EMECHANICAL 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	25
I. Particulars of Educational Qualification : (or	ly completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Nam th Univ y	ie ersit	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		ificat e
U.G.	B.E.	MECHANI CAL ENGINEE RING	2020	PSN COLLEGE OF ENGINEE RING AND TECHNOL OGY (AUTONO MOUS)	ANNA UNIV TY		68	FIRST CLASS		
P.G.	M.E.	CRYOGEN IC ENGINEE RING	2022	PSN COLLEGE OF ENGINEE RING AND TECHNOL OGY (AUTONO MOUS)	ANNA UNIV TY		73	FIRST CLASS		
	Ph.D. Thesis y in which Pl		varded							
IV. Acaden	nic Experien <mark>m the Curre</mark> i	ce :		e) *						
Name of the College Designation Joining Date							eving Date rrent Date Presently			9
	the concyc	20019	,	Jonnig	Julio	W	orking titutions	Years	Months	Days
PSN ENGI COLLEGE	NEERING	ASSISTA PROFESS		22-08-2022	2	04-06	5-2024	1	9	14
							Total	1	9	18
V. Industri	al Experienc	ce :								
Name of	I HOCIGI	ation	ature of	Joining I	Date	Relie	eving Date		xperience	
Organisat	ion		Work	J =J =				Years	Months	Days

	pointment Expe which service is a	rience : extended for the conduc	t of Exmination during	the last year			
AUR (No. of days)Squad Member (No. of days)External Examiner (Practical) (No. of days)Central Evaluation 							
It is certified	that all the inform	ation provided are true to	the best of my knowledge				
Signature of	the Faculty :	AL					

Name of the College	9523 - PSN ENGINEERING COLLEGE		
Name of the Department	MECHANICAL ENGINEERING		
Name of the Degree & Course	B.EMECHANICAL AND AUTOMATION 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.	9523312		
Faculty code given by A.I.C.T.E.	AU1		
Date of Birth	21-09-1995		
Age	29		
I. Particulars of Educational Qualification : (only completed	1)		

Category	Name the Degr	, ¹	Speciali ation	z Year of Passing	Name of the College	th Univ		% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		ificat e
U.G.	U.G. B.E. MECHANI CAL ENGINEE RING 2018 EXCEL COLLEGE OF ENGINEE RING AND TY TY							6.3	SECON CLASS		
P.G. M.E. CAD/CAM 2022 $\begin{pmatrix} M P \\ NACHIMU \\ THU M \\ JAGANAT \\ HAN \\ ENGINEE \\ RING \\ COLLEGE \end{pmatrix}$ 8.3 FIRST CLASS									A CONTRACTOR		
I.a. Additic Score : File :											
III. Faculty IV. Acaden (Start from	nic Exp	erience	:	awarded g Experience	e)*						
							Relieving Date / Current Date				e
Name of	the Co	llege	Des	signation	Joining 1	Date	W	Presently /orking titutions	Years	Months	Days
PSN ENGI COLLEGE	NEERIN	IG	ASSIST PROFE		10-05-2023	}	03-06	5-2024	1	0	25
								Total	1	0	25
V. Industri	al Expe	erience	:								
Name of		Design	ation	Nature of Work	Joining 1	Date	Relie	eving Date		xperience	
Organisa SAKTHI AU COMPONE LTD	UTO SNTS	SHIFT NCHAF		QUALITY NSPECTION	06-06-2018	}	08-11	-2022	Years 4	Months	Days
	I		I_		I		1	Total	4	5	5

	pointment Expe which service is (rience : extended for the conduc	t of Exmination during	the last year				
AUR (No. of days)Squad Member (No. of days)External Examiner (Practical) (No. of days)Central Evaluation 								
It is certified	that all the inform	ation provided are true to	the best of my knowledge	Э.				
		Bhhr.c						
Signature of	the Faculty :	and the second						

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECHINFORMATION 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	39
I. Particulars of Educational Qualification : (on	ly completed)

Category	tegory the ation P Degree ation P		Year of Passing	College Universit		% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	E. COMPUTE R SCIENCE AND ENGINEE RING		PET ENGINEE RING COLLEGE	ANNA UNIVERSI TY	72.6 FIRST CLASS		
P.G.	M.TECH.	OTHERS - COMPUTE R AND		OTHERS - MS UNINVER SITY	MANOMA NIAM SUNDARN AR UNIVERSI TY	80	DISTINCT ION	

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) \ast

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently	Е	Experience		
Name of the conege	Designation	Johning Date	Working Institutions	Years	Months	Days	
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	03-06-2014	04-06-2024	10	0	2	
			Total	10	0	2	

V. Industrial Experience :

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

VI. C.O.E. Appointment Experience :

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

AUR	Squad	External Examiner	Central Evaluation	Re-Evaluation
(No. of	Member	(Practical)	(No. of scripts	(No. of scripts
days)	(No. of days)	(No. of days)	Evaluated)	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.EELECTRONICS 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	37
I. Particulars of Educational Qualification : (o	only completed)

Category	Name of the Degree	Specializa tion	Year of Passing	Name o the Colleg	-	Name the Univers		% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtaine	l ('orti	ficate
U.G.	B.E.	ELECTRIC AL AND ELECTRON ICS ENGINEER ING	2012	MAHAKA BHARAT YAR COLLEG OF ENGINE ING ANI TECHNC OGY	HI E ER	ANNA UNIVEF TY	₹SI	66	FIRST CLASS	Autor H Autor H Marca Autor Marca Ma	
P.G.	M.E.	APPLIED ELECTRON ICS (PART TIME)	2017	GOVERN ENT COLLEG OF ENGINE ING TIRUNE ELI	E ER	ANNA UNIVEF TY	RSI	67	FIRST CLASS		
* Upload So	canned copy o	f Original Deg	ree Certifi	cate.							
I.a. Additi Score : File :	onal Qualific	ation :- NO A	DDITIONA	AL QUALII	FICA	ATION					
II. Title of	Ph.D. Thesis	6									
III. Facult	y in which Pl	n.D. was awai	rded								
IV. Acader (<mark>Start fro</mark>	nic Experien m the Currer	ce : it working Ex	xperience) *							
Nerra		Des	•	Tel	• • • •	Dete	/ C ı	ieving Date urrent Date) E	xperience	e
Name (of the College	e Des	ignation	J01	ուղ	g Date	1	r Presently Working Istitutions	Years	Months	Days
PSN ENGI COLLEGE		ASSISTA PROFES		09-1	2-20	019	04-0	06-2024	4	5	27
						I	Tota	14	5	29	

V. Industrial Experience :

Name of the	Designation	Nature of Work	Loining Data	Baliaring Data	E	xperience	•
Organisation	Designation	Nature of work	Joining Date	Relieving Date	Years	Months	Days

VI. C.O.E. Appointment Experience :

l	Capacity at w	which service is e	xtended for the conduct o	of Exmination during the	e last year
I	ALID	Sanad	Eutornal Evaminar	Control Evolution	Do Evolu

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

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

Mbely

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.EELECTRONICS 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	39
I. Particulars of Educational Qualification : (only complete	d)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	ELECTRO NICS AND COMMUN ICATION ENGINEE RING	2006	SCAD COLLEGE OF ENGINEE RING AND TECHNOL OGY	ANNA UNIVERSI TY	70	SECOND CLASS	
P.G.	M.E.	COMMUN ICATION SYSTEMS	2011	ANAND INSTITUT E OF HIGHER TECHNOL OGY	ANNA UNIVERSI TY	72	FIRST CLASS	

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

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

IV. Academic Experience :

(Start from the Current working Experience) *

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently	Experience		
Name of the Conege	Designation	Johning Date	Working Institutions	Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	18-06-2019	04-06-2024	4	11	17
A R COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	03-06-2013	24-05-2019	5	11	22
			Total	10	11	15

V. Industrial Experience :

Name of the			Relieving Date	Experience			
Organisation			Joining Date	Kellevilig Date	Years	Months	Days
PROPHOENIX	PROGRAMMER	DATABASE	05-07-2012	31-05-2013	0	10	27
Tota					0	10	1

	ppointment Expe which service is a		t of Exmination during t	the last year
AUR (No. of days) 6	Squad Member (No. of days)	External Examiner (Practical) (No. of days) 2	Central Evaluation (No. of scripts Evaluated) 1	Re-Evaluation (No. of scripts Evaluated) 1
It is certified	that all the inform	ation provided are true to	the best of my knowledge.	
		Red		
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.ECOMPUTER 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	32
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	tł Univ	ne of ne rersit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		ificat e
U.G.	B.E.	COMPUTE R SCIENCE AND ENGINEE RING	2013	P.S.R.R COLLEGE OF ENGINEE RING	ANNA UNIV TY		73.5	FIRST CLASS		
P.G.	M.E.	COMPUTE R SCIENCE AND ENGINEE RING	2015	P.S.R.R COLLEGE OF ENGINEE RING	ANNA UNIV TY		86	FIRST CLASS		NY YEAR YANG YANG YANG YANG YANG YANG YANG YANG
II. Faculty V. Acaden	Ph.D. Thesis y in which Ph nic Experienc m the Curren	n.D. was aw		e)*						
Name of	the College	Desig	nation	Joining	Date	/ Cur for	eving Date rrent Date Presently /orking	E	xperience	.
							titutions	Years	Months	Days
PSN ENGI COLLEGE	NEERING	ASSISTAI PROFESS		12-06-201	19	04-06	5-2024	4	11	23
							Total	4	11	28
. Industri	ial Experienc	e :								
. Industri Name of t	the	Na	ature of	Iniri	Data	Dall	ning Data	E	xperience)
	the Designa	ntion Na	ature of Work	Joining	Date	Relie	eving Date	E Years	xperience Months	e Days



Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.EMECHANICAL 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	33
I. Particulars of Educational Qualification : (only completed	1)

Category	Name of the Degree	Specializ ation	Year of Passing	Name o the College	tl Univ	ne of he versit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Clas: obtain		ificat e
U.G.	B.E.	MECHANI CAL ENGINEE RING	2012	THIAGAF AJAR COLLEGI OF ENGINEI RING (AUTONO MOUS)	E ANN E UNIV TY	A ⁄ERSI	83.6	DISTIN ION		
P.G.	M.E.	ENGINEE RING DESIGN	2015	OTHERS SVS SCHOOL OF ENGINN ERING	ANN UNIV TV	A ′ERSI	76.6	FIRST CLASS		and a second
-	anned copy o					-NI				
Score : File :	niai Quanno	ation :- NO	ADDITION	IAL QUALI	IFICATIO	/1N				
II. Title of	Ph.D. Thesis	6								
III. Faculty	in which P	h.D. was aw	arded							
	nic Experien <mark>n the Curre</mark>		Experienc	e)*						
						Relieving Date / Current Date		E	xperience	9
Name of	the College	Desig	nation	Joinin	g Date	M	for Presently Working Institutions		Months	Days
PSN ENGI COLLEGE	NEERING	ASSISTA PROFESS		30-01-20)20	04-06-2024		4	4	6
							Total	4	4	8
V. Industri	al Experienc	ce :								
Name of	I LIOCIAN	ation	ature of	Ioinin	g Date	Poli	eving Date	E	xperience	
Organisat	ion		Work	Joinn	y Daie	1/610	Joing Date	Years	Months	Days
	Appointmen t which serv			e conduc	t of Exm	inatio	n durina tl	ne last v	ear	
AUR (No. of days)	Squa Memb (No. of d	d Ex er	ternal Exa (Practica (No. of da	nminer al)	Centra (No.	al Evaluation Re-Eva of scripts (No. of			Evaluation of script aluated)	

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.ESTRUCTURAL 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	35
I. Particulars of Educational Qualification : (only com	oleted)

Category	Name of the Degree	Specializat ion	Year of Passing	Name o the College	the	obtaine	s ed	Class obtaine	d Certi	ficate
U.G.	B.E.	CIVIL ENGINEER ING	2010	SRI VENKATE WARAA COLLEGE OF TECHNOI OGY	ANNA UNIVER Y	SIT 73		IRST LASS		
P.G.	M.E.	STRUCTUR AL ENGINEER ING	2015	RATHINA TECHNIC L CAMPU (AUTONO OUS)	A ANNA S UNIVER	JNIVERSIT 7.4		IRST LASS		
* Upload Sc	anned copy of	Original Deg	ree Certific	cate.						
I.a. Additic Score : File :	onal Qualifica	ation :- NO A	DDITIONA	L QUALIFI	CATION					
II. Title of	Ph.D. Thesis									
III. Faculty	in which Ph	.D. was awaı	ded							
	nic Experience n the Curren		perience)) *						
Name	of the Colleg	je D	esignatior	n Joi	ning Date	Relieving J / Current J for Prese Workin Institutio	Date ntly g	E Years	xperienco Months	e Days
	RASWATHI OF ENGINEE		STANT ESSOR	26-03-2015		20-03-2021				
AND TECH	INOLOGY	FROM	LUUUI		3-2015	20-03-2021		5	11	26
AND TECH PSN ENGI COLLEGE		ASSIS	STANT ESSOR		3-2015	04-06-2024		5	11 2	26 11
PSN ENGI		ASSIS	STANT			04-06-2024	otal	3		
PSN ENGI COLLEGE		ASSIS	STANT			04-06-2024	[otal	3	2	11
PSN ENGI COLLEGE V. Industri	NEERING al Experienc	e :	TANT ESSOR	25-0	3-2021	04-06-2024		3	2	11 8
PSN ENGI COLLEGE	NEERING al Experienc the Designa	e :	STANT	25-0		04-06-2024		3	2	11 8
PSN ENGI COLLEGE V. Industri Name of f Organisat VI. C.O.E. 2	NEERING al Experienc the ion Designa Appointment	e : ASSIS PROF Nation Nation Experience	TANT ESSOR ure of Wo	25-0	3-2021 ning Date	04-06-2024 7 Relieving	Date	3 9 E Years	2 2 xperience	11 8
PSN ENGI COLLEGE V. Industri Name of f Organisat VI. C.O.E. 2	al Experienc the ion Designa	e : tion Nat Experience ce is extende ember Ex	TANT ESSOR ure of Wo	rk Joi conduct of aminer al)	3-2021 ning Date f Exminatio Central I (No. o	04-06-2024 7 Relieving	Date	3 9 E Years year Re-E	2 2 xperience	11 8 Days



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	46
I. Particulars of Educational Qualification : (only	v completed)

Category	Name of the Degree	Specializ ation	z Year of Passing	Name of the College	th Univ	ne of ne versit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Clas: obtain		tificat e
U.G.	B.A.	OTHERS TAMIL	2011	OTHERS - MSUNIVE RSITY	MANO NIAM SUNI AR UNIV TY	Í DARN	52.7	SECON CLASS	D	
U.G.	B.A.	OTHERS TAMIL	2014	OTHERS - TAMILNA DU TEACHEA R EDUCATI ON UNIVERSI	OTHE TAMI DU TEAC S UNIV TY	LNA CHER	69.7	FIRST CLASS		
P.G.	OTHERS - MA	OTHERS TAMIL	2016	OTHERS - M S UNIVERS TITY	MANO NIAM SUNI AR UNIV TY	Í DARN	65.8	FIRST CLASS	A construction of the second s	
Score : File : II. Title of	onal Qualific Ph.D. Thesi y in which P	S								
	nic Experien m the Curre		g Experienc	e)*		Poli	eving Date	1		
Name of	the College	Des	ignation	Joining 1	Date	/ Cu for W	rrent Date Presently Vorking	E Years	xperienco Months	e Days
PSN ENGI COLLEGE	NEERING	ASSIST PROFE		26-12-2022	2		titutions 5-2024	1	5	11
				·		•	Total	1	5	13
/. Industri	ial Experien	ce :								
Name of		mation Nature of		Joining	Joining Date		eving Date	E	xperience	
Organisation		Work J				3 =0		Years	Months	Days

	pointment Expe which service is a		t 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 inform	ation provided are true to	the best of my knowledge	
Signature of	the Faculty :	J. Elizabeth		

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.EMECHANICAL 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	FEMALE
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	30
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	tł Univ	ne of ne versit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		ificat e
U.G.	B.E.	MECHANI CAL ENGINEE RING	2016	SRI VIDYA COLLEGE OF ENGINEE RING AND TECHNOL OGY	ANNA UNIV TY		8.2	FIRST CLASS		
P.G.	M.E.	ENGINEE RING DESIGN	2018	GOVERN MENT COLLEGE OF ENGINEE RING TIRUNEL VELI	ANNA UNIV TY		8.06	FIRST CLASS		
Score : File : II. Title of III. Faculty IV. Academ	onal Qualific Ph.D. Thesis y in which Pl nic Experien m the Curren	s h.D. was aw ce :	arded							
Name of	the College	Desig	nation	Joining	Date	/ Cur for	for Presently		xperience	e
							/orking titutions	Years	Months	Days
PSN ENGI COLLEGE	NEERING	ASSISTAI PROFESS		05-12-202	22	03-06	6-2024	1	5	30
							Total	1	5	2
V. Industri	ial Experienc	ce :								
Name of	the Decian	ntion Na	ature of	Loining	Data	Dali	ning Data	E	xperience	•
Organisat	tion Design		Work	Joining	Date	Relle	eving Date	Years	Months	Days
VI. C.O.E. Appointment Experience : Capacity at which service is extended for the conduct of Exmination during the last year AUR Squad External Examiner Central Evaluation (No. of Member (No. of Member (No. of days) (No. of days)										

It is certified that all the information pro	wided are true to the best of my knowledge.
R.B.Ragau' 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	42
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	tł Univ	ne of ne rersit	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Clas: obtain		tificat e
U.G.	B.A.	ENGLISH	2007	OTHERS - GOVERN MENT ARTS COLLEGE SALEM			42	OTHER THIRD	S -	
P.G.	OTHERS - M.A.	OTHERS - ENGLISH	2010	OTHERS - GOVERN MENT ARTS COLLEGE SALEM	PERIYAR UNIVERSI TY		65	FIRST CLASS		
OTHERS - M.PHIL.	OTHERS - M.PHIL.	OTHERS - ENGLISH	2014	OTHERS - PRIST UNIVERSI TY	OTHERS - PRIST UNIVERSI TY		Г ₇₈			
	anned copy of			ficate.						
Score : 89 File : \checkmark	onal Qualific	ation :- NE	I							
II. Title of	Ph.D. Thesis									
III. Faculty	y in which Pł	n.D. was aw	arded							
	nic Experiend <mark>m the Currer</mark>		Experienc	e)*						
Name of	the College	Decid	Ination	Joining	Date	/ Cu	eving Date rrent Date Presently	E	xperience	e
	. me conege	Desig	jiiauvii		Jale	N	Fresentry Jorking titutions	Years	Months	Days
PSN ENGI COLLEGE	NEERING	ASSISTA PROFES		09-09-2014	1	05-06	6-2024	9	8	27
OTHERS - COLLEGE SCIENCE	AVS OF ARTS ANI	ASSISTA PROFES		01-09-2013	3	16-04	-2014	0	7	16

Total 10

4

15

V. Industrial Experience :

	Name of the Organisation Desig	Decignation	gnation Nature of Work Joining	Joining Data	Relieving Date	Experience		
		Designation		Joining Date		Years	Months	Days

s certified t		ation provided are true to	the best of my knowledge.	
	Ş	miliman)		
	the Faculty :			

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.EMECHANICAL 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	29
I. Particulars of Educational Qualification : (or	nly completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Nam th Univ y	ie ersit	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Clas: obtain		ificat e
U.G. B.E. CAI ENG		MECHANI CAL ENGINEE RING	2016	S VEERASA MY CHETTIAR COLLEGE OF ENGINEE RING AND TECHNOL OGY	ANNA UNIV TY		7.5	FIRST CLASS		
P.G.	M.E.	THERMAL ENGINEE RING	2021	R. V. S COLLEGE OF ENGINEE RING	ANNA UNIV TY		8.9	FIRST CLASS		
III. Facult IV. Acadei	² Ph.D. Thesis y in which Pl nic Experien m the Currer	n.D. was aw ce :		e)*						
	f the College		nation	Joining I	Date	/ Cu for	eving Date rrent Date Presently /orking	Experience		
							titutions	Years	Months	Days
PSN ENGINEERING ASSISTANT PROFESSOR 04-01-2023					04-06	5-2024	1	5	1	
						Total	1	5	3	
V. Industr	ial Experienc	ce :								
Name of the Nature of							1	Experience		
	Name of the OrganisationDesignationNature of WorkJoining Date)ato	Roli	eving Date	E	xperience	9

	pointment Expe which service is (rience : extended for the conduc	t of Exmination during	the last year						
AUR (No. of days)Squad Member (No. of days)External Examiner (Practical) (No. of days)Central Evaluation 										
It is certified	It is certified that all the information provided are true to the best of my knowledge.									
Signature of	the Faculty :	Ame								

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	38
I. Particulars of Educational Qualification : (or	ly completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.SC.	OTHERS - MATHS	2007	OTHERS - SADAKAT HULLAH APPA COLLEGE	MANOMA NIAM SUNDARN AR UNIVERSI TY	90	DISTINCT ION	
P.G.	M.SC.	OTHERS - MATHS	2009	OTHERS - STJOHNS COLLEGE	MANOMA NIAM SUNDARN AR UNIVERSI TY	80	DISTINCT ION	
OTHERS - M.PHILL	OTHERS - M.PHILL	OTHERS - MATHS	2010	OTHERS - STXAVIER S COLLEGE	MANOMA NIAM SUNDARN AR UNIVERSI TY	80	DISTINCT ION	

* Upload Scanned copy of Original Degree Certificate.

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

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

IV. Academic Experience :

(Start from the Current working Experience) \ast

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently	Experience		
Name of the Conege	Designation	Johning Date	Working Institutions	Years	Months	Days
THAMIRABHARANI ENGINEERING COLLEGE	ASSISTANT PROFESSOR	15-03-2013	15-12-2015	2	9	1
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	08-11-2022	05-06-2024	1	6	28
FRANCIS XAVIER ENGINEERING COLLEGE (AUTONOMOUS)	ASSISTANT PROFESSOR	07-07-2010	18-12-2012	2	5	12
	•		Total	6	9	16
V. Industrial Experience :						

Name of th	e Designation	Nature of	Loining Date	ng Date Relieving Date		Experience		
Organisatio	on Designation	Work	Joining Date			Years Months I		
	opointment Expe which service is a		conduct of Ex	mination during t	ne last y	ear		
AUR (No. of days)	Squad Member (No. of days)	External Exa (Practica (No. of day	l) (N	ral Evaluation o. of scripts Evaluated)	(No.	Evaluation of script aluated)	-	
It is certified	that all the inform	ation provided ar	e true to the be	t of my knowledge.				
		G. 7:103						
Signature of	the Faculty :							

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECHINFORMATION 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	38
I. Particulars of Educational Qualification : (on	ly completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.TECH.	INFORMA TION TECHNOL OGY (SS)	2009	PSN COLLEGE OF ENGINEE RING AND TECHNOL OGY (AUTONO MOUS)	ANNA UNIVERSI TY	68	FIRST CLASS	
P.G.	M.E.	COMPUTE R SCIENCE AND ENGINEE RING	2014	VINS CHRISTIA N COLLEGE OF ENGINEE RING	ANNA UNIVERSI TY	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	Experience		
Name of the Conege	Designation	Joining Date	Working Institutions	Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	03-02-2023	04-06-2024	1	4	2
			Total	1	4	4
V. Industrial Experience	:					

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

	ppointment Expe which service is (erience : extended for the conduc	t 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 inform	nation provided are true to	the best of my knowledge	
		9. By		
Signature of	the Faculty :			

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECHINFORMATION 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	28
I. Particulars of Educational Qualification : (only	v completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name o the College	t tl Univ	ne of he versit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Clas obtain		ificat e		
U.G.	B.E.	COMPUTE R SCIENCE AND ENGINEE RING	2018	PSN ENGINEI RING COLLEGI		A ′ERSI	6.27	SECON CLASS	D	Hauceraly Construction of the second And the second of t		
P.G.	M.E.	COMPUTE R SCIENCE AND ENGINEE RING	2020	THIAGAF AJAR COLLEGI OF ENGINEI RING (AUTONO MOUS)	E ANN UNIV TY	A ′ERSI	7.96	FIRST CLASS				
I.a. Additic Score : File :												
IV. Acaden	7 in which Pl nic Experien n the Curre	ce :		e)*								
Name of	the College	Decig	mation	Ioinin	a Data	Relieving Date / Current Date			xperience	9		
	the conege	Desig	jnation Joinin		V		for Presently Working Institutions		Months	Days		
PSN ENGI COLLEGE	NEERING	ASSISTAL PROFESS		10-05-20)22	2 04-06-20		2	0	26		
							Total	2	0	26		
V. Industri	al Experienc	ce :										
Name of t	I LIOCIAN	ation	ature of	Ioinin	g Date	Relie	eving Date	E	xperience	e		
Organisat	ion 2001gh		Work					Years	Months	Days		
	Appointmen t which serv			e conduc	t of Exm	inatio	n durina ti	he last v	ear			
AUR (No. of days)	Squad Memb (No. of d	d Ex er	ternal Exa (Practica (No. of da	iminer al)	ct of Exmination Central Evalu (No. of scri Evaluated		l Evaluation of scripts		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.AMASTER OF BUSINESS ADMINISTRATION
Name of the faculty member	MR. SAGAR A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	5/87,
Line 2	622851
District	TENKASI
Telephone number	-
Mobile number	+91 - 8838494407
Email	SAGARAGENS@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	DRVPA9550A
Passport Number	
Aadhar Number	662443957970
Faculty code given by C.O.E.	9523000
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	22-01-1996
Age	28
I. Particulars of Educational Qualification : (only completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name o the College	tl Univ	ne of he versit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Clas obtain		tificat e
U.G.	B.A.	ENGLISH	2020	OTHERS EINSTEN ARTS AN SCIENCE COLLEGI	D SUNI		55	SECON CLASS	D	
P.G. M.B.A.		MASTER OF BUSINESS ADMINIST RATION	2022	EINSTEI COLLEGI OF ENGINEI RING	E ANN UNIV	A ′ERSI	70	FIRST CLASS		UNIVERSITY The area DATE OF A CONTROL OF A
Upload Sc	anned copy o	of Original De	egree Certi	ficate.						
.a. AUUIUI	onal Qualific	ation :- NO	ADDITION	AL QUAL	ITICATIO	'IN				
core : 7ile :										
core : Tile : I. Title of	Ph.D. Thesi									
core : Tile : I. Title of II. Faculty	in which P	h.D. was aw	arded							
core : 'ile : I. Title of II. Faculty V. Acaden		h.D. was aw		e)*						
core : ile : I. Title of II. Faculty V. Acaden Start from	y in which P nic Experien n the Curre	h.D. was aw ice : nt working	Experienc			/ Cu	eving Date rrent Date	E	xperience	e
core : "ile : I. Title of II. Faculty V. Acaden Start from	/ in which P nic Experien	h.D. was aw ice : nt working			g Date	/ Cur for W		E Years	xperience Months	
core : ile : I. Title of II. Faculty V. Acaden Start from	y in which P nic Experien n the Curre the College	h.D. was aw ice : nt working	Experienc mation			/ Cur for W Ins	rrent Date Presently /orking		-	
Core : File : I. Title of II. Faculty V. Academ Start from Name of PSN ENGI	y in which P nic Experien n the Curre the College	h.D. was aw nce : nt working Desig	Experienc mation	Joinin		/ Cur for W Ins	rrent Date Presently /orking titutions	Years 0	Months	Days
core : "ile : I. Title of II. Faculty V. Academ Start from Name of PSN ENGI COLLEGE	y in which P nic Experien n the Curre the College	h.D. was aw nce : nt working Desig	Experienc mation	Joinin		/ Cur for W Ins	Frent Date Presently /orking titutions	Years 0	- Months	Day 22
Core : Tile : I. Title of II. Faculty V. Academ Start from Name of PSN ENGI COLLEGE V. Industri	y in which P nic Experien n the Curre the College NEERING al Experien	h.D. was aw nce : nt working Desig	Experienc mation	Joinin 14-12-20)23	/ Cun for W Ins 04-06	Frent Date Presently /orking titutions 5-2024 Total	Years 0 0	- Months	Day 22 24
core : "ile : I. Title of II. Faculty V. Academ Start from Name of PSN ENGI COLLEGE	v in which P nic Experien n the Curre the College NEERING al Experien	h.D. was aw nce : nt working Desig ASSISTA PROFESS	Experienc mation	Joinin 14-12-20		/ Cun for W Ins 04-06	Frent Date Presently /orking titutions	Years 0 0	- Months 5 5	Day 22 24
Core : Tile : I. Title of II. Faculty V. Academ Start from Name of PSN ENGI COLLEGE V. Industri Name of Organisat T. C.O.E.	v in which P nic Experien n the Curre the College NEERING al Experien	h.D. was aw nce : nt working Desig ASSISTA PROFESS ce : nation Na	Experienc mation NT SOR ature of Work e :	Joinin 14-12-20)23 g Date	/ Cun for W Ins 04-06	rrent Date Presently /orking titutions 5-2024 Total eving Date	Years 0 0 E Years	5 5 5 5 5 5 5 5 5 5 7 7 7 7 7 7 7 7 7 7	Day 22 24

d. 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.EELECTRONICS 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	35
I. Particulars of Educational Qualification : (only com	pleted)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Nam th Unive	e	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		ificat e	
U.G.	B.E.	ELECTRO NICS AND COMMUNI CATION ENGINEE RING	2012	JAYARAJ ANNAPAC KIAM CSI COLLEGE OF ENGINEE RING	ANNA UNIVE TY		7.98	FIRST CLASS	a manufacture of the second seco	THE THE ALL AND ALL AN	
P.G.	M.E.	APPLIED ELECTRO NICS	2016	SCAD COLLEGE OF ENGINEE RING AND TECHNOL OGY	ANNA UNIVE TY		7.8	FIRST CLASS		C. CHINNAI - 449 22	
* Upload Sc	anned copy o	f Original De	gree Certif	icate.							
III. Faculty	Ph.D. Thesis y in which Pl nic Experien n the Currer	n.D. was awa		;)*			eving Date	E	xperience	,	
Name of	f the College	Desi	gnation	Joinin	g Date for Pre Wor		Presently Vorking stitutions	Years	Months	Days	
PSN ENGI COLLEGE	NEERING	ASSISTA PROFES		29-06-20	016	04-0	6-2024	7	11	6	
							Total	7	11	11	
/. Industri	al Experienc	ce :									
Name of	the Design	Notes	re of Worl	Toinin	a Data	Dali	oring Data	E	xperienc	rience	
Organisat	ion Design				g Date	Kell	eving Date	Years	Months	Days	
	Appointment			e conduct (of Exmin	ation	during the	last vea	nr		
	pacity at which service is extended for the conductAURSquadExternal Examiner(No. ofMember(Practical)days)(No. of days)(No. of days)				Central Evaluation (No. of scripts Evaluated)			Re-Evaluation (No. of scripts Evaluated)			
Capacity a AUR	Squa Memb	er	(Practica	al)	(No.	of sci		(No.	of scripts		



Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.ECOMPUTER 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	32
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specializ ation	Year of Passing	Name o the College	t t	ne of he versit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		ificat e	
U.G.	OTHERS - BTECH	OTHERS - INFORMA TION AND COMMUN ICATION TECHNOL OGIES	2013	OTHERS MS UNIVERS TY	- NIAN SUN SI AR	TOMA 1/ DARN /ERSI	8.75	DISTIN ION	CT		
P.G.	M.E.	COMPUTE R SCIENCE AND ENGINEE RING	2016	SCAD COLLEGI OF ENGINEI RING AN TECHNO OGY	ANN E UNIV D TY	A /ERSI	8.45	FIRST CLASS	- A set of the set of		
-	anned copy o										
I.a. Additic Score : File :	onal Qualific	ation :- NO	ADDITION	IAL QUALI	FICATIO)N					
II. Title of	Ph.D. Thesis	6									
III. Faculty	y in which Pl	n.D. was aw	arded								
	nic Experien n the Currei		Experienc	e)*							
						Relieving Date / Current Date		E	xperience	e	
Name of	the College	Desig	gnation Joi		Joining Date		for Presently Working Institutions		Months	Days	
PSN ENGI COLLEGE	NEERING	ASSISTAL PROFESS				04-06-2024		4	11	21	
		·		•			Total		11	26	
V. Industri	al Experienc	се:									
Name of t	the Destaur	Na	ature of	T - * *	D-+-			E	xperience	rience	
Organisat	ion Design		Work	Loining Data		Relieving Date		Years	Months	Days	
	Appointmen t which serv			e conduc	t of Exm	inatio	n during tl	ne last v	ear		
AUR (No. of days)	Squa Memb (No. of d	d Ex er	ternal Exa (Practics (No. of da	al) (No		xmination during tral Evaluation No. of scripts Evaluated)		Re-E (No.	Evaluation of script aluated)		

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.ECOMPUTER 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	34
I. Particulars of Educational Qualification : (only	completed)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	th Univ	ie ersit	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		ificat e	
U.G.	B.E.	COMPUTE R SCIENCE AND ENGINEE RING	2011	SCAD COLLEGE OF ENGINEE RING ANI TECHNOI OGY	ANNA UNIV D TY		76	FIRST CLASS	The same of the sa		
P.G.	G. M.TECH. OTHERS - MTECH IN NETWORK ENGINEE RING 2013 KALASA NGAM INSTITU E OF TECHNO OGY				KALA NGAN	SALI 1	78	FIRST CLASS			
* Upload Sc	* Upload Scanned copy of Original Degree Certificate.										
I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION Score : File :											
II. Title of	Ph.D. Thesis	5									
III. Faculty	y in which Pl	h.D. was aw	arded								
	nic Experien <mark>m the Curre</mark> i		Experience	e)*							
					Relieving Date / Current Date					e	
Name of	the College	Desig	jnation	Joinin	g Date	W	for Presently Working Institutions		Months	Days	
PSN ENGE	NEERING	ASSISTA PROFESS		19-10-20)22	04-06	5-2024	1	7	17	
		1				•	Total	1	7	20	
V. Industri	al Experienc	ce :									
Name of t	the	N	ature of					E	xperience	,	
Organisat	I Docian	ation	Work	Joinin	g Date	Relie	eving Date	Years	Months	Days	
	Appointmen t which serv			a conduct	of Fymi	natior	n during th	a last w	ar		
AUR (No. of days)	(No. of Member (Practical)				Central EvaluationRe-Evaluation(No. of scripts Evaluated)(No. of scripts Evaluated)						

K. dulse

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	AUTOMOBILE ENGINEERING
Name of the Degree & Course	B.EAUTOMOBILE 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	ННВРК9440М
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	30
I. Particulars of Educational Qualification : (on	ly completed)

		ializati on	Year of Passing			Name of the Universit	obtained	0	Class obtained Ce		ficate	
U.G.	B.E.	AL	HANIC NEERI	2017	SALEM COLLEGE OF ENGINEERI NG AND TECHNOLO GY		ANNA UNIVERSI Y	Г 7.14	FIF CL	ST ASS		
P.G.	G. M.E. AUTOMOBI LE ENGINEERI NG COLLEGE				ANNA UNIVERSI Y	Г 7.32	FIF CL	LST ASS				
* 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												
V. Academ	nic Experienc n the Curren	e :			*							
Namo	of the Colleg	10		Designatio	n	Ioir	ning Date	Relieving I / Current I for Presen)ate	ite Experien		e
Name	of the coney			esignatio	ion Joi		ing Date	Working	y Voars		Months	Days
PSN ENGI COLLEGE	NEERING		ASSIST PROFE			13-03	3-2021	04-06-2024		3	2	23
								Т	otal	3	2	24
V. Industri	al Experience	:										
Name of t	he									E	xperienc	e
Organisation Designation Nature of Work			ork	Joir	ning Date	Relieving I	Date	Years	Months	Days		
	Appointment			fortha	ondt	of E	ninatio- d	wing the les	+ + + + = = =			
AUR	t which servic		Fv	ternal Ex			Central E		i yea			
ACK (No. of days)Squad Member (No. of days)External Examiner (Practical) (No. of days)						(No of corints Re-Evaluation						
(No. 01 (No. of days) (Practical) (No. 01 scripts (No. of scripts Evaluated)												

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECHINFORMATION 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	28
I. Particulars of Educational Qualification : (or	nly completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Nam th Univ y	ersit	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Clas: obtain		ificat e
U.G.	B.E. COMPUTE R SCIENCE AND ENGINEE RING RING COLLEGE			6.65	FIRST CLASS		Antiorenty Sector			
P.G. M.E.		COMPUTE R SCIENCE AND ENGINEE RING(WIT H SPECIALI ZATION IN NETWORK S)	2020	PSN ENGINEE RING COLLEGE	ANNA UNIV TY		8.7	DISTIN ION		
Score : File : II. Title of	onal Qualifica Ph.D. Thesis y in which Ph			IAL QUALIFI	CATIO	N				
	nic Experienc m the Curren		Experienc	e) *						
Name of	the College	Desia	nation	Joining Date		/ Cu	eving Date rrent Date Presently	Experience		
	une contege	20019		Jonnig	Jute	W	Vorking titutions	Years	Months	Days
		ASSISTAI PROFESS		17-08-2022	2	04-06	5-2024	1	9	19
		1101100								
							Total	1	9	23
COLLEGE	ial Experienc						Total	1	9	23

	ppointment Expe which service is o	rience : extended for the conduc	t of Exmination during	the last year	
AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Re-Evaluation (No. of scripts Evaluated)		
It is certified	that all the inform	ation provided are true to	the best of my knowledge		
Signature of	the Faculty :	M. PA			

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.ECOMPUTER 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	29
I. Particulars of Educational Qualification : (only comp	leted)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name the Univer	e	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtaine		ificat e	
U.G.	B.E.	COMPUTE R SCIENCE AND ENGINEER ING	ENCE 2016 ENGINEER ING COLLEGE		ANNA UNIVE TY	RSI	80	FIRST CLASS	Partia Ri Partia		
P.G.	G. M.E. SCIENCE 2018 COLLEGE		ANNA UNIVE TY	RSI	87	FIRST CLASS					
Score : File : II. Title of III. Faculty IV. Academ											
Name o	f the College	e Desi	gnation	Ioinin	/		ieving Date irrent Date r Presently			9	
	g		- g	J • • • • •	9 - 400	1	Working stitutions	Years	Months	Days	
PSN ENGI COLLEGE	NEERING	ASSISTA PROFES		03-06-20)19	04-0	06-2024	5	0	2	
						-	Tota	1 5	0	2	
V. Industri	al Experienc	ce :									
Name of	the Destant	Notes	me of Mor	l. Ioinin	a Data	Del	ioring Dot	E	xperience	e	
Organisat	ion Designa		re of Wor	k Joining	y Date	Kel	ieving Date	Years	Months	Days	
	Appointment t which servi			conduct of	Exmina	tion	during the	last year	-		
AUR (No. of days)	Squa Memb (No. of c	er	ternal Exa (Practic (No. of d	al)	Central (No. o Eva		ripts	(No.	valuation of scripts aluated)		

It is certified that all the information provided are true to the best of my knowledge	It is	certified	that a	ll the	information	provided	are	true to	the	best	of my	knowledd	ſe.
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Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	AUTOMOBILE ENGINEERING
Name of the Degree & Course	B.EAUTOMOBILE 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	54
I. Particulars of Educational Qualification : (on	ly completed)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	MECHANI CAL ENGINEE RING	1995	OTHERS - SATYABA MA ENGINEE RING COLLEGE	UNIVERSI TY OF MADRAS	60	SECOND CLASS	
P.G.	M.E.	MANUFAC TURING ENGINEE RING	2014	SARDAR RAJA COLLEGE OF ENGINEE RING	ANNA UNIVERSI TY	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	E	xperience	9	
Name of the Coneye	Designation	Joining Date	Working Institutions	Years	Months	Days	
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	22-12-2022	04-06-2024	1	5	14	
OTHERS - THANGAPAZHAM POLYTECHNIC COLLEGE	OTHERS - LECTURER	08-04-2014	29-07-2016		3	22	
OTHERS - S VEERASAMY CHETTIAR POLYTECHNIC COLLEGE	OTHERS - LECTURER	03-01-2011	31-12-2012	1	11	29	
Total 5 9							
V. Industrial Experience :							

Name of the		Destant	Nature of	T	- D-L-		Experience		
Organisat	ion	Designation	Work	Joining	j Date	Relieving Date	Years Months I 9 0 2 2 7 9 11 8 5	Days	
QUALITY MOTOR SERVICE CHENNAI		MANAGER	MANEGER	24-10-2002		16-11-2011	9	0	24
KUMARASA AUTOMOBII MARUTHI PVTLTD CHENNAI		SERVICE ENGINEER	SERVICE ENGINEER	14-03-2000		22-10-2002	2	7	9
		1	1	1		Total	11	8	5
/I. C.O.E. A	ppoint	tment Experie	nce :				•		
	which	service is ext		niner)	Centra (No.	nation during the l Evaluation of scripts aluated)	Re-H (No.	ear Evaluation of scripts aluated)	
Capacity at v AUR (No. of days)	which N (No	service is ext Squad Iember o. of days)	ended for the External Exar (Practical (No. of day	niner) /s)	Centra (No. Eva	l Evaluation of scripts	Re-H (No.	Evaluation of scripts	

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	B.EGENERAL ENGINEERING
Name of the faculty member	MRS. C PRABHA
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	4/692,MAHALAKSHMI NAGAR 3RD STREET.KANNANENTHAL
Line 2	MADURAI,625007
District	MADURAI
Telephone number	-
Mobile number	+91 - 8438563808
Email	.PARBHAC707@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BWAPC0420R
Passport Number	
Aadhar Number	453276148193
Faculty code given by C.O.E.	9523333
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	07-11-1990
Age	34
I. Particulars of Educational Qualification : (or	ly completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	th Univ	ne of ne Tersit	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		ificat e
U.G.	B.E.	ELECTRO NICS AND COMMUN ICATION ENGINEE RING	2012	SUN COLLEGE OF ENGINEE RING AND TECHNOL OGY	ANNA UNIV TY		8.09	FIRST CLASS		
P.G.	M.E.	COMMUN ICATION SYSTEMS	2018	INFANT JESUS COLLEGE OF ENGINEE RING AND TECHNOL OGY	ANNA UNIV TY		7.88	SECON CLASS		
III. Faculty IV. Acaden	Ph.D. Thesis y in which Pl nic Experien <mark>m the Curre</mark>	n.D. was aw ce :		e)*						
Name of	the College	Desig	nation	Joining	Date	/ Cur for	eving Date crent Date Presently /orking	E Years	xperience Months	
PSN ENGI COLLEGE	NEERING	ASSISTAI		08-04-202	4	Ins	titutions 5-2024	0	1 Months	Days
COLLEGE		PROFESS	OCK				Total	0	1	28
V. Industri	ial Experienc	ce :								
Name of	tho	Na	ature of					E	xperience	,
	Drganisation Designation Work Joining Date			Date	Relie	eving Date	Years	Months		
VI. C.O.E. Appointment Experience : Capacity at which service is extended for the conduct of Exmination during the last yearAUR (No. of days)Squad (Practical) (No. of days)External Examiner (No. of scripts Evaluated)Central Evaluation (No. of scripts Evaluated)										

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



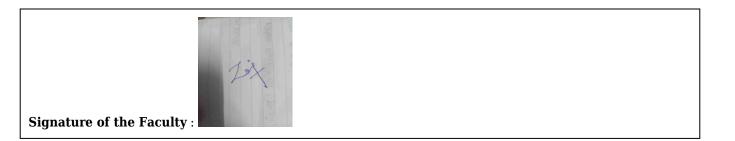
Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	M.EVLSI DESIGN
Name of the faculty member	MRS. AMUTHA R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	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	32
I. Particulars of Educational Qualification : (only completed)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Nam th Unive	e	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtaine		ificat e
U.G.	B.E.	ELECTRIC AL AND ELECTRO NICS ENGINEE RING	2013	UNIVERSI TY VOC COLLEGE OF ENGINEE RING TUTICORI N	ANNA UNIVE TY		8.85	DISTINC ON		
P.G.	M.E.	VLSI DESIGN	2021	PSN ENGINEE RING COLLEGE	ANNA UNIVI TY		8.34	FIRST CLASS		
* Upload Sc	anned copy o	f Original De	gree Certif	icate.						
Score : File :	File : II. Title of Ph.D. Thesis									
	nic Experien n the Currer		Experience	•) *						
Name of	f the College	Daci	gnation	Ioinin	r Data	/ Cu	eving Date	E	xperience	e
Ivanie u	the coneye	Desi	gilation	Joinin	y Date	J Date for Presently Working Institutions		Years	Months	Days
PSN ENGI COLLEGE	NEERING	ASSISTA PROFESS		29-11-20)22	04-0	6-2024	1	6	6
							Total	. 1	6	9
V. Industri	al Experienc	ce :								
Name of	the				•			E	xperienc	e
	Designation Nature of Work Join		G Joining	g Date	Reli	eving Date	Years	Months	Days	
	Appointment			conduct	of Fymin	ation	during the	last voa	r	
AUR (No. of days)	o. of Member (Practical)			miner al)	Of Exmination during the last yearCentral Evaluation (No. of scripts Evaluated)Re-Evaluation (No. of scripts Evaluated)					
t is certified that all the information provided are true to the best of my knowledge.										

Dimit

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	M.EVLSI DESIGN
Name of the faculty member	MRS. MARIA JENIFA P
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	5,KASTHURIBAI STREET,PIRANCHERI
Line 2	GOBALASAMDRAM,627451
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9952759112
Email	PMARIAJENI1995@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	CTDPM5829B
Passport Number	
Aadhar Number	903129068692
Faculty code given by C.O.E.	9523332
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	14-04-1995
Age	29
I. Particulars of Educational Qualification : (only co	npleted)

Category	Name of the Degree	Specializa tion	Year of Passing	Name o the College	tł Univ	ne of ne rersit	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		ificat e
U.G.	B.E.	ELECTRO NICS AND COMMUN ICATION ENGINEE RING	2016	PSN INSTITUT E OF TECHNO OGY AND SCIENCE	L UNIV		7.37	FIRST CLASS		HURCHERS AND AND AND AND AND AND AND AND AND AND
P.G.	M.E.	VLSI DESIGN	2018	PSN ENGINEE RING COLLEGE			7.83	FIRST CLASS		
* Upload Sc	anned copy o	f Original De	gree Certif	ìcate.						
Score : File :	onal Qualific Ph.D. Thesis		ADDITION	AL QUALI	FICATIO	N				
III. Faculty	y in which Pł	.D. was awa	arded							
	nic Experien n the Currer		Experience	e)*						
						Relieving Date / Current Date		Experience		e
Name of	the College	Desig	nation (Joinin	g Date	V	Presently Vorking stitutions	Years	Months	Days
PSN ENGI COLLEGE	NEERING	ASSISTA PROFESS		16-04-20)24	04-00	5-2024	0	1	19
						•	Total	0	1	19
V. Industri	al Experienc	e :								
Name of	the Desta	Na	ature of	Tala	a D-+-	Dell	ordn D - +	E	xperience	e
Organisat	ion Designation		Work	Joinin	g Date	Ken	eving Date	Years	Months	Days
	Appointment t which servi			e conduct	of Exmi	natio	n durina th	e last ve	ar	
AUR (No. of days)	Squad Memb (No. of d	l Ex er	ternal Exa (Practica	ed for the conduct of Exminatiernal Examiner (Practical)Central Ex (No. of s EvaluationNo. of days)Evaluation			uation ripts	Re-E (No.	Evaluation of script: aluated)	
It is certifie	d that all the	nformation	provided ar	e true to t	he best o	f my k	nowledge.			



Name of the College	9523 - PSN ENGINEERING COLLEGE				
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING				
Name of the Degree & Course	B.EELECTRONICS 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	34				
I. Particulars of Educational Qualification : (only completed)					

Category	Name of the Degree	Specializ ation	Year of Passing	Name o the College	I ti Univ	ne of he ⁄ersit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Clas: obtain		ificat e
U.G.	B.E.	ELECTRO NICS AND COMMUN ICATION ENGINEE RING	2012	NATIONA L ENGINEI RING COLLEGI (AUTONO MOUS)	E ANN UNIV E TY	A ⁄ERSI	7.2	FIRST CLASS	a survey of the second se	
P.G.	M.E.	COMMUN ICATION SYSTEMS	2014	ANNA UNIVESI Y REGIONA L CAMPUS MADURA	ANN UNIV TY	A /ERSI	7.7	FIRST CLASS		
I.a. Additic Score : File : II. Title of III. Faculty IV. Acaden	anned copy o onal Qualific Ph.D. Thesis 7 in which Pl nic Experien	ation :- NO 5 n.D. was aw ce :	ADDITION	IAL QUALI	FICATIC	N				
	n the Curren		nation	e)*	g Data	/ Cu	eving Date rrent Date Presently	Experience		9
Name or	the Conege	Desig	nation	Johnny	y Date	for Presently Working Institutions		Years	Months	Days
PSN ENGI COLLEGE	NEERING	ASSISTAI PROFESS		20-01-20)20	04-06	5-2024	4	4	16
				•			Total	4	4	18
V. Industri	al Experienc	се:								
	Name of the Designation Nature of Laining Data					Roli	eving Date	E	xperienco	•
Organisat	ganisation Designation Work Joining Date							Years	Months	Days
	Appointmen t which serv			e conduc	t of Exm	inatio	n during th	ne last y	ear	
AUR (No. of days)	(No. of Member (Practical) (No.				al Eval of sci aluate		(No.	Evaluation of script aluated)		

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

V.Amaraselur

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.TECHAGRICULTURAL 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	37
I. Particulars of Educational Qualification : (only co	mpleted)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	CIVIL ENGINEE RING	2011	PSN ENGINEE RING COLLEGE	ANNA UNIVERSI TY	78	FIRST CLASS	a rational and a second and as second and a
P.G.	M.E.	STRUCTU RAL ENGINEE RING	2014	ANNA UNIVESIT Y REGIONAL CAMPUS,T IRUNELVE LI	ANNA UNIVERSI TY	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	04-06-2024	1	8	5				
A R COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	18-12-2017	16-06-2022	4	5	30				
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	16-06-2014	26-10-2015	1	4	11				
	7	6	19							
V. Industrial Experience :										
Name of the Designation	on Nature of Work	Joining Date	Relieving Date	Experience						
Organisation Designatio				Years	Months	Days				

VI. C.O.E. Appointment Experience : Capacity at which service is extended for the conduct of Exmination during the last year									
AURSquadEx(No. of days)Member (No. of days)Ex		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.									
1/210									
Signature of	the Faculty :								