Anna University, Chennai
PSN Engineering College - 9523

Consolidated_Report

13.faculty

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	STRUCTURAL ENGINEEERING
Name of the Degree & Course	M.E.-STRUCTURAL ENGINEERING
Name of the faculty member	DR. RAVIKUMAR MS
Regular Or Adjunct	Regular
Image	
Present Designation	PRINCIPAL
Residential Address Line 1	8/82, MSR ILLAM SOUTH THERIVILLAI PUTHALAM
Line 2	629602
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9442077274
Email	RAVIKUMAR_MS@YAHOO.COM
Gender	MALE
Community	BC
PAN Number	AGPPR4644C
Passport Number	
Aadhar Number	272575536708
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	07-06-1975
Age	49
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	CIVIL ENGINEERING	1997	OTHERS - THE INDIAN ENGINEERING COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	Y	SECOND CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	1999	OTHERS - ANNAMALAI UNIVERSITY	OTHERS - ANNAMALAI UNIVERSITY	Y	FIRST CLASS	
PH.D.	PH.D.	STRUCTURAL ENGINEERING	2011	OTHERS - SATHYABAMA UNIVERSITY	OTHERS - SATHYABAMA UNIVERSITY	Y		

* Upload Scanned copy of Original Degree Certificate.

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

II. Title of Ph.D. Thesis	EXPERIMENTAL INVESTIGATION ON SELF COMPACTING SELF CURING CONCRETE STRUCTURES ELEMENTS WITH POZZOLANIC ADMIXURES
III. Faculty in which Ph.D. was awarded	FACULTY OF CIVIL ENGINEERING
IV. Academic Experience : **(Start from the Current working Experience) ***	

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	PRINCIPAL	29-06-2015	03-02-2020	4	7	5
OTHERS - SUN POLYTECHNIC COLLEGE	PRINCIPAL	20-09-2006	30-04-2011	4	7	11
RAJAS ENGINEERING COLLEGE	OTHERS - LECTURER	20-07-2000	24-08-2004	4	1	5
PSN ENGINEERING COLLEGE	PRINCIPAL	15-02-2021	04-06-2024	3	3	18
OTHERS - NOORUL ISLAM UNIVERSITY	PROFESSOR	05-02-2020	12-02-2021	1	0	8
AMRITA COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	03-09-2004	18-09-2006	2	0	16
AMRITA COLLEGE OF ENGINEERING AND TECHNOLOGY	PROFESSOR	02-05-2011	28-06-2013	2	1	27
OTHERS - NOORUL ISLAM UNIVERSITY	PROFESSOR	01-07-2013	25-06-2015	1	11	25
			Total	23	9	0

V. Industrial Experience :

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

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

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

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECH.-INFORMATION TECHNOLOGY
Name of the faculty member	DR. VENKATARAMANA K
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	16-468,PANAGAL MAIN ROAD, PANAGAL, SRKALAHASTI
Line 2	517640
District	OTHERS - CHITTOOR
Telephone number	-
Mobile number	+91 - 9908765328
Email	KVRBOOKS@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AAIFV2507P
Passport Number	
Aadhar Number	297437137032
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	28-03-1985
Age	38
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.TECH.	OTHERS - COMPUTER SCIENCE AND ENGINEERING	2008	OTHERS - SRIKALAHATEESWARA INSTITUTE OF TECHNOLOGY	OTHERS - JNTU UNIVERSITY	66.08	FIRST CLASS	
P.G.	M.TECH.	COMPUTER SCIENCE AND ENGINEERING (5 YEAR INTEGRATED)	2012	OTHERS - SRI VENKATASA PERUMAL COLLEGE OF ENGINEERING TECHNOLOGY	OTHERS - JNTUA UNIVERSITY	77.02	DISTINCTION	
PH.D.	PH.D.	COMPUTER SCIENCE AND ENGINEERING	2017	ANNAMALAI UNIVERSITY	ANNAMALAI UNIVERSITY	7.7		

* Upload Scanned copy of Original Degree Certificate.

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

II. Title of Ph.D. Thesis	ENHANCE QOS IN MANETS USING ANALYSIS OF CA AOMDV ROUTING PROTOCOL TO SECURE AND RELIABLE FOR MULTIHOPE WIRELESS NETWORK
III. Faculty in which Ph.D. was awarded	OTHERS
IV. Academic Experience : **(Start from the Current working Experience) ***	

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	PROFESSOR	03-04-2023	15-05-2023	0	1	13
			Total	0	1	13

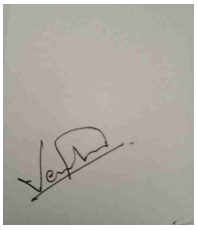
V. Industrial Experience :

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

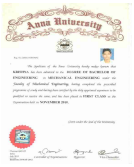
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	AUTOMOBILE ENGINEERING
Name of the Degree & Course	B.E.-AUTOMOBILE 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	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	2010	OTHERS - SRI PADMAVATHI COLLEGE OF ENGINEERING	ANNA UNIVERSITY	71	FIRST CLASS	
P.G.	M.E.	MANUFACTURING ENGINEERING	2014	KARPAGA VINAYAGA COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	75	FIRST CLASS	
PH.D.	PH.D.	MECHANICAL ENGINEERING	2018	ANNAMALAI UNIVERSITY	ANNAMALAI UNIVERSITY	Y		

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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) ***	

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
VEL TECH	ASSISTANT PROFESSOR	24-05-2014	31-07-2015	1	2	8
PSN ENGINEERING COLLEGE	PROFESSOR	18-09-2023	04-06-2024	0	8	17
OTHERS - VEDANTA ENGINEERING COLLEGE	ASSISTANT PROFESSOR	16-09-2017	06-12-2019	2	2	21
OTHERS - SRI PADMAVATHI COLLEGE OF ENGINEERING	OTHERS - LECTURER	03-01-2011	02-07-2012	1	5	31
OTHERS - VELS UNIVERSITY	ASSISTANT PROFESSOR	01-08-2015	11-08-2017	2	0	11
			Total	7	7	1

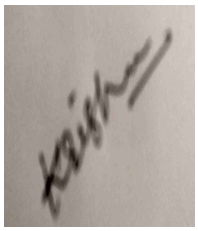
V. Industrial Experience :

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

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

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	DR. JENARIS DS
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	10F-7,SERVITE CONVENT STREET,PUNNAINAGER
Line 2	NAGERCOIL
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9442761028
Email	DSJENARIS27@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	ANFPJ1955K
Passport Number	
Aadhar Number	718167400994
Faculty code given by C.O.E.	9523119
Faculty code given by A.I.C.T.E.	12961416907
Date of Birth	15-07-1972
Age	52
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	2007	GOVERNMENT COLLEGE OF ENGINEERING TIRUNELVELI	ANNA UNIVERSITY	64	SECOND CLASS	
P.G.	M.E.	MANUFACTURING ENGINEERING	2009	C S I INSTITUTE OF TECHNOLOGY	ANNA UNIVERSITY	73	FIRST CLASS	
PH.D.	PH.D.	MECHANICAL ENGINEERING	2019	OTHERS - ST PETERS INSTITUTE OF HIGHER EDUCATION AND RESEARCH	OTHERS - ST PETERS INSTITUTE OF HIGHER EDUCATION AND RESEARCH	Y		

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

II. Title of Ph.D. Thesis	EXPERIMENTAL STUDY OF EFFECT OF GROUPING TECHNIQUES AND METHODS IN A DOMESTIC AUTOMATION FLOW
III. Faculty in which Ph.D. was awarded	FACULTY OF MECHANICAL ENGINEERING
IV. Academic Experience : **(Start from the Current working Experience) ***	

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PONJESLY COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	06-09-2010	31-10-2015	5	1	25
PSN ENGINEERING COLLEGE	PROFESSOR	02-11-2015	04-06-2024	8	7	3
VINS CHRISTIAN COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	01-06-2009	03-09-2010	1	3	3
			Total	15	0	1

V. Industrial Experience :

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

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

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
6		2	5	

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

Signature of the Faculty :

Name of the College	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 completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.SC.	OTHERS - CHEMISTRY	2009	OTHERS - BHARATHIDASAN UNIVERSITY	BHARATHIDASAN UNIVERSITY	63	FIRST CLASS	
P.G.	M.SC.	OTHERS - CHEMISTRY	2011	OTHERS - BHARATHIDASAN UNIVERSITY	BHARATHIDASAN UNIVERSITY	65	FIRST CLASS	
PH.D.	PH.D.	CHEMISTRY	2018	OTHERS - BHARATHIDASAN UNIVERSITY	BHARATHIDASAN UNIVERSITY	60		

* Upload Scanned copy of Original Degree Certificate.

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

II. Title of Ph.D. Thesis	SYNTHESIS OF INDOLOQUINOLINE AND ACRIDINE ALKALOIDS THROUGH ECOFRINENDLY METHODOLOGIES
III. Faculty in which Ph.D. was awarded	FACULTY OF SCIENCE AND HUMANITIES
IV. Academic Experience : **(Start from the Current working Experience) ***	

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	PROFESSOR	15-09-2023	13-02-2024	0	4	29
OTHERS - ANNAI COLLEGE OF ARTS AND SCIENECE	ASSISTANT PROFESSOR	01-06-2016	02-08-2023	7	2	2
			Total	7	7	4

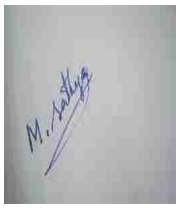
V. Industrial Experience :

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

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

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MASTER OF BUSINESS ADMINISTRATION
Name of the Degree & Course	M.B.A.-MASTER OF BUSINESS ADMINISTRATION
Name of the faculty member	DR. 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 completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.B.A.	BUSINESS ADMINISTRATION	2012	OTHERS - KARAMARAJAR GOVERNMENT ARTS COLLEGE SURANDAI	MANOMANIAM SUNDARNAR UNIVERSITY	65	FIRST CLASS	
P.G.	M.B.A.	MASTER OF BUSINESS ADMINISTRATION	2014	OTHERS - MS UNIVERSITY	MANOMANIAM SUNDARNAR UNIVERSITY	66	FIRST CLASS	
PH.D.	PH.D.	OTHERS - MS UNIVERSITY	2022	OTHERS - MS UNIVERSITY	MANOMANIAM SUNDARNAR UNIVERSITY	AWARDED		
OTHERS - MPHIL	OTHERS - MBA	MASTER OF BUSINESS ADMINISTRATION	2017	OTHERS - MS UNIVERSITY	MANOMANIAM SUNDARNAR UNIVERSITY	72	FIRST CLASS	

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

II. Title of Ph.D. Thesis	A STUDY ON THE FACTORS INFLUENCING THE FIRST GENERATION ENTREPRENEURS IN TIRUNELVELI DISTRICT
III. Faculty in which Ph.D. was awarded	FACULTY OF MANAGEMENT
IV. Academic Experience : **(Start from the Current working Experience) ***	

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
OTHERS - VPMM ARTS AND SCIENCE COLLEGE FOR WOMEN	ASSISTANT PROFESSOR	22-05-2017	04-12-2017	0	6	14
			Total	0	6	17

V. Industrial Experience :	

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

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

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	AUTOMOBILE ENGINEERING
Name of the Degree & Course	M.E.-AUTOMOBILE ENGINEERING
Name of the faculty member	DR. PRABHU N
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	12/972E/5, SAIBABA COLONY
Line 2	THIGARAJA NAGAR 627011
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9789449362
Email	PRABHUKITS@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	ASYPP4393B
Passport Number	
Aadhar Number	503877161723
Faculty code given by C.O.E.	9523249
Faculty code given by A.I.C.T.E.	13359145492
Date of Birth	29-03-1979
Age	45
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	2000	GOVERNMENT COLLEGE OF ENGINEERING TIRUNELVELI	MANOMANIAM SUNDARNAR UNIVERSITY	66	FIRST CLASS	
P.G.	M.E.	ENGINEERING DESIGN	2005	GOVERNMENT COLLEGE OF ENGINEERING TIRUNELVELI	ANNA UNIVERSITY	78	FIRST CLASS	
PH.D.	PH.D.	OTHERS - ROBOTICS	2014	OTHERS - NOORUL ISLAM UNIVERSITY	OTHERS - NOORUL ISLAM UNIVERSUTY	Y		

* Upload Scanned copy of Original Degree Certificate.

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

II. Title of Ph.D. Thesis	FRAMEWORK METHODS FOR DESIGN OPTIMIZATIONOF FIVE AXIS INDUSTRIAL ROBOTS
III. Faculty in which Ph.D. was awarded	FACULTY OF MECHANICAL ENGINEERING
IV. Academic Experience : **(Start from the Current working Experience) ***	

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PET ENGINEERING COLLEGE	OTHERS - LECTURER	29-07-2005	02-07-2007	1	11	5
GOVERNMENT COLLEGE OF ENGINEERING TIRUNELVELI	OTHERS - GRADUATE TRAINEE	29-07-2002	28-07-2005	2	11	31
MADHA ENGINEERING COLLEGE	OTHERS - LECTURER	15-08-2000	12-02-2002	1	5	29
OTHERS - KOTTAYAM INSTITUTE OF TECHNOLOGY AND SCIENCE	PRINCIPAL	10-12-2014	31-12-2018	4	0	22
HINDUSTHAN COLLEGE OF ENGINEERING AND TECHNOLOGY(AUTONOMOUS)	ASSISTANT PROFESSOR	04-07-2007	05-05-2009	1	10	2
PSN ENGINEERING COLLEGE	OTHERS - DIRECTOR	02-01-2019	04-06-2024	5	5	3
PSN COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ASSOCIATE PROFESSOR	01-06-2009	09-12-2014	5	6	9
			Total	23	3	15

V. Industrial Experience :

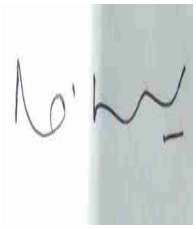
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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

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

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

Signature of the Faculty :



Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.E.-ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the faculty member	DR. MURALIBABU K
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	33,SITHIVINAYAGAR KOIL STREET,BHUVANESWARIPET
Line 2	GUDIYATTAM-632602
District	VELLORE
Telephone number	-
Mobile number	+91 - 9940976170
Email	MAIL2MURALI05@YAHOO.CO.IN
Gender	MALE
Community	BC
PAN Number	ANRPK4552H
Passport Number	
Aadhar Number	545092867372
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	05-06-1980
Age	43
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2001	OTHERS - VMKV ENGINEERIN COLLEGE	UNIVERSITY OF MADRAS	7.5	FIRST CLASS	
P.G.	M.E.	APPLIED ELECTRONICS	2005	ARULMIGU MEENAKSHI AMMAN COLLEGE OF ENGINEERING	ANNA UNIVERSITY	7.8	FIRST CLASS	
PH.D.	PH.D.	VLSI DESIGN	2016	OTHERS - SATHYABAMA UNIVERSITY	OTHERS - SATHYABAMA UNIVERSITY	8.1		

* Upload Scanned copy of Original Degree Certificate.

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

II. Title of Ph.D. Thesis	CONZVEX OPTIMIZATION APPROACH TO ULTRA POWER VLSI FLOORPLAN DESIGN
III. Faculty in which Ph.D. was awarded	OTHERS
IV. Academic Experience : **(Start from the Current working Experience) ***	

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PRIYADARSHINI ENGINEERING COLLEGE	OTHERS - LECTURER	11-05-2001	14-07-2003	2	2	4
SRI VENKATESWARA COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSOCIATE PROFESSOR	07-04-2008	24-06-2014	6	2	18
PSN ENGINEERING COLLEGE	PROFESSOR	03-05-2023	13-05-2023	0	0	11
ER PERUMAL MANIMEKALAI COLLEGE OF ENGINEERING (AUTONOMOUS)	OTHERS - SENIOR LECTURER	02-06-2005	02-04-2008	2	10	1
OTHERS - GANDHI INSTITUTE OF ENGINEERING AND TECHNOLOGY	PROFESSOR	02-02-2019	28-03-2022	3	1	26
PODHIGAI COLLEGE OF ENGINEERING AND TECHNOLOGY	PROFESSOR	01-08-2014	31-01-2018	3	5	31
			Total	17	11	6

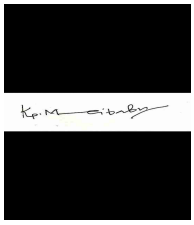
V. Industrial Experience :

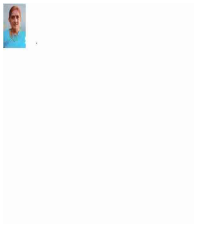
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
18		10		

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-ENGLISH
Name of the faculty member	DR. SAVITHRI SUBRAMANIAM S
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	FLAT NO. 1, VIDYA SANKARA APARTMENT, PERUMALPURAM
Line 2	TIRUNELVELI-627070
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9629863822
Email	SAVITHRI1950@GMAIL.COM
Gender	FEMALE
Community	OC
PAN Number	AFPPS5111J
Passport Number	
Aadhar Number	201336292528
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	12488690973
Date of Birth	06-03-1950
Age	70
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.A.	ENGLISH	1973	OTHERS - SARAH TUCKER COLLEGE	MADURAI KAMARAJ UNIVERSITY	58	SECOND CLASS	
P.G.	OTHERS - M.A.	OTHERS - ENGLISH	1993	OTHERS - MS UNIVERSITY	MANOMANIAM SUNDARNAR UNIVERSITY	61	FIRST CLASS	
PH.D.	PH.D.	ENGLISH	2011	OTHERS - MS UNIVERSITY	MANOMANIAM SUNDARNAR UNIVERSITY	Y		
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - ENGLISH	1994	OTHERS - MS UNIVERSITY	MANOMANIAM SUNDARNAR UNIVERSITY	65	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

II. Title of Ph.D. Thesis	MYTH PSYCHOLOGY REALITY INDEPTH STUDY OF EUGENE O NEILLS MAJOR PLACE
III. Faculty in which Ph.D. was awarded	OTHERS
IV. Academic Experience : **(Start from the Current working Experience) ***	

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
OTHERS - HOLY CROSS COLLEGE	ASSISTANT PROFESSOR	09-07-1973	30-06-1975	1	11	23
J P COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	01-11-2008	30-04-2009	0	5	30
PSN ENGINEERING COLLEGE	PROFESSOR	01-07-2014	17-03-2020	5	8	17
PSN ENGINEERING COLLEGE	PROFESSOR	01-06-2009	30-01-2012	2	7	29
OTHERS - ST MARYS COLLEGE	ASSISTANT PROFESSOR	01-07-1975	31-05-2008	32	10	31
			Total	43	9	15

V. Industrial Experience :

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

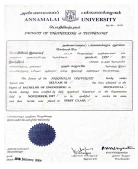
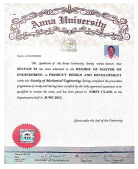
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL 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	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	1997	ANNAMALAI UNIVERSITY	ANNAMALAI UNIVERSITY	68	FIRST CLASS	
P.G.	M.E.	PRODUCT DESIGN AND DEVELOPMENT	2012	V R S COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	72	FIRST CLASS	
PH.D.	PH.D.	MECHANICAL ENGINEERING	2018	ANNAMALAI UNIVERSITY	ANNAMALAI UNIVERSITY	Y		

* Upload Scanned copy of Original Degree Certificate.

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

II. Title of Ph.D. Thesis	PERFORMANCE AND EMISSION ANALYSIS STUDY ON VARIOUS ANNIMAL FAT OIL AS BIO DIESEL
III. Faculty in which Ph.D. was awarded	FACULTY OF MECHANICAL ENGINEERING
IV. Academic Experience : **(Start from the Current working Experience) ***	

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	PROFESSOR	18-09-2023	03-06-2024	0	8	16
SIR ISSAC NEWTON COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSOCIATE PROFESSOR	07-05-2012	30-10-2018	6	5	24
C.K. COLLEGE OF ENGINEERING & TECHNOLOGY	ASSISTANT PROFESSOR	03-06-2002	30-04-2012	9	10	28
			Total	17	1	9

V. Industrial Experience :

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

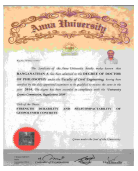
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.TECH.-AGRICULTURAL 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	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	CIVIL ENGINEERING	1986	GOVERNMENT COLLEGE OF ENGINEERING SALEM (AUTONOMOUS)	UNIVERSITY OF MADRAS	67	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2002	GOVERNMENT COLLEGE OF ENGINEERING SALEM (AUTONOMOUS)	PERIYAR UNIVERSITY	74	FIRST CLASS	
PH.D.	PH.D.	CIVIL ENGINEERING	2014	OTHERS - ANNA UNIVERSITY	ANNA UNIVERSITY	Y		

* Upload Scanned copy of Original Degree Certificate.

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

II. Title of Ph.D. Thesis	STRENGTH DURABILITY AND SELF COMPACTABILITY OF GEOPOLYMER CONCRETE
III. Faculty in which Ph.D. was awarded	FACULTY OF CIVIL ENGINEERING
IV. Academic Experience : **(Start from the Current working Experience) ***	

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
KING COLLEGE OF TECHNOLOGY	ASSOCIATE PROFESSOR	27-11-2014	29-12-2016	2	1	3
OTHERS - VELS UNIVERSITY SCHOOL OF ENGINEERING	ASSOCIATE PROFESSOR	21-04-2009	05-03-2012	2	10	15
VELAMMAL ENGINEERING COLLEGE (AUTONOMOUS)	OTHERS - LECTURER	18-05-1987	31-08-1992	5	3	14
OTHERS - VELS SRINIVASA COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	18-02-2004	12-03-2007	3	0	24
OTHERS - VELS SRINIVASA COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSOCIATE PROFESSOR	13-03-2007	08-04-2009	2	0	27
PSN ENGINEERING COLLEGE	PROFESSOR	11-09-2023	04-06-2024	0	8	24
OTHERS - ACE ENGINEERING COLLEGE	OTHERS - SENIOR LECTURER	07-08-1995	23-04-1999	3	8	17
			Total	19	10	9

V. Industrial Experience :

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

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

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

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.E.-CIVIL 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 : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.TECH.	OTHERS - CIVIL ENGINEERING	1989	OTHERS - UNIVERSITY COLLEGE OF ENGINEERING AND TECHNOLOGY	UNIVERSITY OF MADRAS	85	DISTINCTION	
P.G.	M.TECH.	OTHERS - STRUCTURAL ENGINEERING	1992	ANNAMALAI UNIVERSITY	ANNAMALAI UNIVERSITY	78	FIRST CLASS	
PH.D.	PH.D.	CIVIL ENGINEERING	2011	OTHERS - KARUNYA UNIVERSITY	OTHERS - KARUNYA UNIVERSITY	90		

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
OTHERS - SHREE INSTITUTE OF TECHNICAL EDUCATION	PROFESSOR	22-01-2012	30-09-2020	8	8	10
PSN ENGINEERING COLLEGE	PROFESSOR	18-09-2023	04-06-2024	0	8	17
OTHERS - SRI KALAHASTEESWARA INSTITUTE OF TECHNOLOGY	ASSOCIATE PROFESSOR	13-03-2005	22-12-2011	6	9	10
OTHERS - SRI KALAHASTEESWARA INSTITUTE OF TECHNOLOGY	ASSISTANT PROFESSOR	02-02-2000	12-03-2005	5	1	11
			Total	21	3	21

V. Industrial Experience :

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

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

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

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	M.E.-VLSI DESIGN
Name of the faculty member	DR. GAJENDRA KUMAR V
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	49-PEDU NEICKEN STREET
Line 2	SOWCARPET,CHENNAI-79
District	CHENNAI
Telephone number	-
Mobile number	+91 - 9840591303
Email	RAJIGAJENDRA1978@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	CCZPG6066P
Passport Number	
Aadhar Number	313524429654
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	11-01-1978
Age	45
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	1999	ARULMIGU MEENAKSHI AMMAN COLLEGE OF ENGINEERING	UNIVERSITY OF MADRAS	59	SECOND CLASS	
P.G.	M.E.	APPLIED ELECTRONICS	2001	OTHERS - DR MGR ENGINEERING COLLEGE	UNIVERSITY OF MADRAS	71	FIRST CLASS	
PH.D.	PH.D.	ELECTRONICS AND COMMUNICATION ENGINEERING	2013	OTHERS - MANOMANIAM SUNDARANAR UNIVERSITY	MANOMANIAM SUNDARNAR UNIVERSITY	7.8		

* Upload Scanned copy of Original Degree Certificate.

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

II. Title of Ph.D. Thesis	IIR FILTER DESIGN USING BILINEAR METHODS
III. Faculty in which Ph.D. was awarded	OTHERS
IV. Academic Experience : **(Start from the Current working Experience) ***	

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
OTHERS - VEL MULTTIMEDIA ENGINEERING COLLEGE	ASSISTANT PROFESSOR	20-08-2004	26-06-2006	1	10	7
PSN ENGINEERING COLLEGE	PROFESSOR	11-05-2023	13-05-2023	0	0	3
GOJAN SCHOOL OF BUSINESS AND TECHNOLOGY	ASSISTANT PROFESSOR	03-07-2006	13-12-2008	2	5	11
OTHERS - DR MGR ENGINEERING COLLEGE	OTHERS - LECTURER	02-07-1999	10-08-2004	5	1	9
MEENAKSHI COLLEGE OF ENGINEERING	ASSOCIATE PROFESSOR	02-01-2009	24-09-2014	5	8	23
			Total	15	1	25

V. Industrial Experience :

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

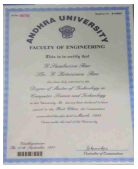
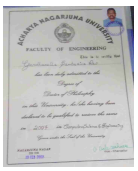
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
16		15		

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.E.-COMPUTER 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	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.TECH.	OTHERS - COMPUTER SCIENCE	1990	OTHERS - VR SIDDHARTHA ENGG COLLEGE	OTHERS - NAGARJUNA UNIVERSITY	7.3	FIRST CLASS	
P.G.	M.TECH.	OTHERS - CS AND T	1993	OTHERS - UNIVERSITY COLLEGE OF ENGG AND TECH	OTHERS - ANDHRA UNIVERSITY	7.5	FIRST CLASS	
PH.D.	PH.D.	COMPUTER SCIENCE AND ENGINEERING	2003	OTHERS - NAGARJUNA UNIVERSUTY	OTHERS - NAGARJUNA UNIVERSITY	8.3		

* Upload Scanned copy of Original Degree Certificate.

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

II. Title of Ph.D. Thesis	FACULTY FOR COMPUTER SCIENCE
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	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	PROFESSOR	11-09-2023	04-06-2024	0	8	24
OTHERS - VR SIDDARTHA ENGG COLLEGE	ASSISTANT PROFESSOR	04-10-1993	30-07-1999	5	9	27
OTHERS - ST ANNS COLLEGE OF ENGG AND TECH	PROFESSOR	03-05-2004	30-04-2007	2	11	29
OTHERS - ML ENGG COLLEGE	ASSOCIATE PROFESSOR	02-08-1999	31-03-2004	4	7	30
OTHERS - ST ANNS ENGG AND PG COLLEGE	PRINCIPAL	02-05-2007	28-06-2013	6	1	27
			Total	20	4	20

V. Industrial Experience :

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

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

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

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	AUTOMOBILE ENGINEERING
Name of the Degree & Course	B.E.-AUTOMOBILE ENGINEERING
Name of the faculty member	DR. KRISHNAMOORTHY K
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	17 PHASE-2,PIONEER KUMARASAMY NAGAR,PERUMALPURAM
Line 2	PALAYAMKOTTAI-627007
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9488826890
Email	SANGEETHAKRISHNAMOORTHY1972@GMAIL.COM
Gender	MALE
Community	MBC
PAN Number	APVPK2195L
Passport Number	APVPK2195L
Aadhar Number	557037947002
Faculty code given by C.O.E.	9522026
Faculty code given by A.I.C.T.E.	19497087338
Date of Birth	03-12-1972
Age	52
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	1994	GOVERNMENT COLLEGE OF ENGINEERING TIRUNELVELI	MANOMANIAM SUNDARNAR UNIVERSITY	60	FIRST CLASS	
P.G.	M.TECH.	OTHERS - PRODUCTION ENGINEERING	2001	NATIONAL ENGINEERING COLLEGE (AUTONOMOUS)	MANOMANIAM SUNDARNAR UNIVERSITY	64	FIRST CLASS	
PH.D.	PH.D.	MECHANICAL ENGINEERING	2018	LORD JEGANNATH COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	Y		

* Upload Scanned copy of Original Degree Certificate.

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

II. Title of Ph.D. Thesis	ARTIFICIAL NEURAL NETWORK BASED PREDICTION OF ULTIMATE STRENGTH OF COMPOSITE TENSILE SPECIMEN USING ACOUSTIC EMISSION RMS DATA
III. Faculty in which Ph.D. was awarded	FACULTY OF MECHANICAL ENGINEERING
IV. Academic Experience : **(Start from the Current working Experience) ***	

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	PROFESSOR	14-12-2022	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 :

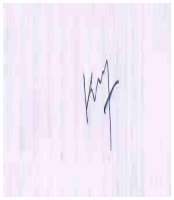
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
CAFAMA AUTO PARTS LTD	PRODUCTION ENGINEER	PRODUCTION	04-06-1994	30-06-2000	6	0	27
				Total	6	0	27

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

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
3			300	48

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

Signature of the Faculty :



Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	M.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	DR. V VENUGOPAL
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	SATHANI STREET
Line 2	KOSAPALAYAM-605103
District	PUDUCHERRY
Telephone number	-
Mobile number	+91 - 8876234541
Email	PRICIPALPSNEC@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BBPPV9225B
Passport Number	
Aadhar Number	797033394558
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	20-06-1974
Age	50
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	COMPUTER SCIENCE AND ENGINEERING	1997	OTHERS - BHARATHIYAR UNIVERSITY	BHARATHIYAR UNIVERSITY	64	FIRST CLASS	
P.G.	M.TECH.	COMPUTER SCIENCE AND ENGINEERING (5 YEAR INTEGRATED)	2006	OTHERS - BHARATH UNIVERSITY	OTHERS - BHARATH UNIVERSITY	89	FIRST CLASS	
PH.D.	PH.D.	COMPUTER SCIENCE ENGINEERING	2016	OTHERS - SRM UNIVERSITY	OTHERS - SRM UNIVERSITY	85		

* Upload Scanned copy of Original Degree Certificate.

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

II. Title of Ph.D. Thesis	AN HIGH EFFICIENCY BREAST CANCER DETECTION USING DEEP LEARNING ALGORITHM
III. Faculty in which Ph.D. was awarded	OTHERS
IV. Academic Experience : **(Start from the Current working Experience) ***	

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
LORD AYYAPPA INSTITUTE OF ENGINEERING AND TECHNOLOGY	PROFESSOR	16-06-2009	25-05-2017	7	11	10
ANNAI TERESA COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	16-06-2003	21-05-2008	4	11	6
OTHERS - BRILLIANT GRAMMER SCHOOL EDUCATIONAL SOCITIES GROUP OF INSTITUTIONS HYDERABAD	PROFESSOR	13-06-2017	10-03-2020	2	8	28
PSN ENGINEERING COLLEGE	PROFESSOR	05-05-2023	04-06-2024	1	0	31
			Total	16	8	20

V. Industrial Experience :

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

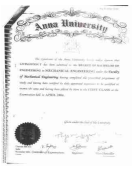
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	DR. LIVINGSTON T
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	75138 Z, ZION NAGER,
Line 2	TUICKERAMAL PURAM, 627007
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 8870633225
Email	LIVI7323@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AHOPL5459R
Passport Number	
Aadhar Number	433562694135
Faculty code given by C.O.E.	9523068
Faculty code given by A.I.C.T.E.	1728184982
Date of Birth	29-05-1985
Age	39
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	2006	DR SIVANTHI ADITANAR COLLEGE OF ENGINEERING	ANNA UNIVERSITY	71	FIRST CLASS	
P.G.	M.E.	MANUFACTURING ENGINEERING	2009	A C T COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	78	FIRST CLASS	
PH.D.	PH.D.	MECHANICAL ENGINEERING	2023	ALAGAPPA CHETTIAR GOVERNMENT COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	Y		

* Upload Scanned copy of Original Degree Certificate.

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

II. Title of Ph.D. Thesis	PROCESSING AND CHARACTERIZATION OF COCONUT SHELL PARTICLES REINFORCED VINYL ESTER COMPOSITES
III. Faculty in which Ph.D. was awarded	FACULTY OF MECHANICAL ENGINEERING
IV. Academic Experience : **(Start from the Current working Experience) ***	

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	11-10-2011	04-06-2024	12	7	25
PSN COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ASSISTANT PROFESSOR	11-05-2009	09-10-2011	2	4	30
			Total	15	0	25

V. Industrial Experience :

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

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

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
5		2		

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MR. MOHANRAJ S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	EAST STREET
Line 2	RETTANAI POST,THINDIVANAM
District	VILLUPURAM
Telephone number	-
Mobile number	+91 - 9842144405
Email	BHARATH_RAJ07@YAHOO.CO.IN
Gender	MALE
Community	BC
PAN Number	AMJPM4065G
Passport Number	
Aadhar Number	721861385986
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1435416091
Date of Birth	26-11-1983
Age	41
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	COMPUTER SCIENCE AND ENGINEERING	2005	PSN COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	70	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2007	OTHERS - VMRF UNIVERSITY	OTHERS - VMRF UNIVERSITY	80	FIRST CLASS	

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	22-05-2009	01-07-2020	11	1	11
PSN COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ASSISTANT PROFESSOR	13-08-2007	21-05-2009	1	9	9
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	02-07-2020	04-06-2024	3	11	3
			Total	16	9	28

V. Industrial Experience :

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

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

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECH.-INFORMATION 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 completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	COMPUTER SCIENCE AND ENGINEERING (SS)	2006	OTHERS - DR MGR EDUCATION AND RESEARCH INSTITUTE	OTHERS - DR MGR EDUCATION AND RESEARCH INSTITUTE	71.4	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2008	OTHERS - SRM INSTITUTE OF SCIENCE TECHNOLOGY	OTHERS - SRM INSTITUTE OF SCIENCE TECHNOLOGY	7.8	FIRST CLASS	
PH.D.	PH.D.	COMPUTER SCIENCE AND ENGINEERING	2015	OTHERS - KARUNYA UNIVERSITY	OTHERS - KARUNYA UNIVERSITY	70		

* Upload Scanned copy of Original Degree Certificate.

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

II. Title of Ph.D. Thesis	ARDUINO UNO BASED BABY HEALTH VITAL PARAMETERS MONITORING SYSTEM IN INCUBATOR USING BLYNK APP AND GSM900
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	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	11-09-2023	04-06-2024	0	8	24
			Total	0	8	28

V. Industrial Experience :	

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

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

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

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.E.-ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the faculty member	MR. BABU P
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	942,PARAMARTHALINGA PURAM,MAHADHANAPURAM POST
Line 2	629702
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9003942943
Email	BASANTHJUNE03@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AQBPB3270G
Passport Number	
Aadhar Number	586338943725
Faculty code given by C.O.E.	9523092
Faculty code given by A.I.C.T.E.	1429879751
Date of Birth	15-11-1980
Age	44
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2005	PSN COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	Y	FIRST CLASS	
P.G.	M.E.	APPLIED ELECTRONICS	2010	PSN COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	Y	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	07-07-2010	02-05-2023	12	9	27
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	03-05-2023	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 the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
4		1	1	1

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL AND AUTOMATION ENGINEERING
Name of the faculty member	DR. SATISH PANDIAN G
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	3/141, NORTH STREET
Line 2	KOLLANKINAR-PO
District	THOOTHUKUDI
Telephone number	-
Mobile number	+91 - 8667231148
Email	GSPMECH@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	EPIPS6690D
Passport Number	
Aadhar Number	868759564938
Faculty code given by C.O.E.	9225347
Faculty code given by A.I.C.T.E.	2515915997
Date of Birth	03-06-1985
Age	39
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.TECH.	OTHERS - LEATHER TECHNOLOGY	2007	OTHERS - BHARATH INSTITUTE OF TECHNOLOGY	ANNA UNIVERSITY	6.3	FIRST CLASS	
P.G.	M.E.	INDUSTRIAL ENGINEERING	2010	THIAGARAJAR COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	7.65	FIRST CLASS	
PH.D.	PH.D.	MECHANICAL ENGINEERING	2015	THIAGARAJAR COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	Y		

* Upload Scanned copy of Original Degree Certificate.

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

II. Title of Ph.D. Thesis	MODELS FOR ANALYSIS AND SELECTION SUSTAINABLE PROGRAM A STUDY OF INDIAN MANUFACTURING INDUSTRIES
III. Faculty in which Ph.D. was awarded	FACULTY OF MECHANICAL ENGINEERING
IV. Academic Experience : **(Start from the Current working Experience) ***	

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
THIAGARAJAR COLLEGE OF ENGINEERING (AUTONOMOUS)	OTHERS - RESEARCH	18-05-2010	31-01-2013	2	8	14
PSN ENGINEERING COLLEGE	PROFESSOR	15-09-2021	03-06-2024	2	8	19
P G P COLLEGE OF ENGINEERING AND TECHNOLOGY	PROFESSOR	01-07-2020	14-09-2021	1	2	14
V S B ENGINEERING COLLEGE (AUTONOMOUS)	ASSOCIATE PROFESSOR	01-02-2016	30-06-2020	4	4	29
THIAGARAJAR COLLEGE OF ENGINEERING (AUTONOMOUS)	OTHERS - TEACHING ASSOCIATE	01-02-2013	18-09-2015	2	7	18
			Total	13	8	8

V. Industrial Experience :

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

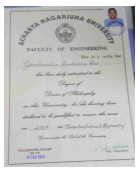
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
28	2	10	10	2

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	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	OC
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	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.TECH.	OTHERS - CSE	2011	OTHERS - ANNA UNIVERSITY COLLEGE	ANNA UNIVERSITY	72	FIRST CLASS	
P.G.	M.TECH.	COMPUTER SCIENCE AND ENGINEERING (5 YEAR INTEGRATED)	2013	VEL TECH	OTHERS - VEL TECH UNIVERSITY	8.55	FIRST CLASS	
PH.D.	PH.D.	COMPUTER SCIENCE AND ENGINEERING	2018	ANNAMALAI UNIVERSITY	ANNAMALAI UNIVERSITY	8.1		

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

II. Title of Ph.D. Thesis	FACULTY OF COMPUTER SCIENCE
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	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	11-09-2023	04-06-2024	0	8	24
ARCHANA INSTITUTE OF TECHNOLOGY	ASSOCIATE PROFESSOR	07-01-2013	24-03-2014	1	2	18
S R I COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSOCIATE PROFESSOR	05-05-2014	24-11-2014	0	6	20
			Total	2	6	5

V. Industrial Experience :

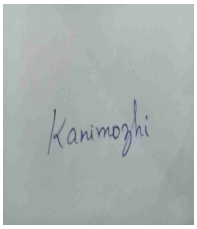
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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

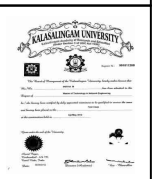
AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)

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

Signature of the Faculty :



Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	M.E.-COMPUTER SCIENCE AND ENGINEERING(WITH SPECIALIZATION IN NETWORKS)
Name of the faculty member	MS. ANITHA M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	7/436A SEETHAKATHI STREET,SAMMANTHAPURAM
Line 2	RAJAPALAYAM-627110
District	VIRUDHUNAGAR
Telephone number	-
Mobile number	+91 - 9944714122
Email	ANITHARANISESI@GMAIL.COM
Gender	FEMALE
Community	MBC
PAN Number	BEDPA5921C
Passport Number	
Aadhar Number	623037990724
Faculty code given by C.O.E.	9523022
Faculty code given by A.I.C.T.E.	11441533482
Date of Birth	14-06-1989
Age	35
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	COMPUTER SCIENCE AND ENGINEERING	2010	SOLAMALAI COLLEGE OF ENGINEERING	ANNA UNIVERSITY	76	FIRST CLASS	
P.G.	M.TECH.	OTHERS - NETWORKING	2012	OTHERS - KALASALINGAM UNIVERSITY	OTHERS - KALASALINGAM UNIVERSITY	8.1	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	04-06-2022	04-06-2024	2	0	1
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	01-06-2012	03-06-2022	10	0	3
			Total	12	0	4

V. Industrial Experience :

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

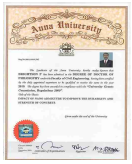
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.E.-CIVIL ENGINEERING
Name of the faculty member	DR. P BRIGHTSON
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	AALUVILAI, KNDANVILAI PO KK DIST
Line 2	629810
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9443132823
Email	BRIGHTSONBRIGHT@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BGVPB9724J
Passport Number	
Aadhar Number	309822449845
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	05-06-1984
Age	40
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	CIVIL ENGINEERING	2007	SUN COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	75	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2010	R V S COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	80	FIRST CLASS	
PH.D.	PH.D.	CIVIL ENGINEERING	2019	OTHERS - IRTT ERODE	ANNA UNIVERSITY	Y		

* Upload Scanned copy of Original Degree Certificate.

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

II. Title of Ph.D. Thesis	IMPACT OF NANO ADMIXTURES TO IMPROVE THE DURABILITY AND STRENGTH OF CONCRETE
III. Faculty in which Ph.D. was awarded	FACULTY OF CIVIL ENGINEERING
IV. Academic Experience : **(Start from the Current working Experience) ***	

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	28-10-2022	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
ARUNACHALA COLLEGE OF ENGINEERING FOR WOMEN	ASSISTANT PROFESSOR	01-07-2010	31-01-2020	9	6	31
			Total	15	3	10

V. Industrial Experience :

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

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

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
10		4	2	

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECH.-INFORMATION TECHNOLOGY
Name of the faculty member	DR. EDURU NAGARJUNA V
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	3-62,GANDAVARAM, DARGA HARIJANAWADA, GANDAVARAM
Line 2	524317
District	OTHERS - NELLORE
Telephone number	-
Mobile number	+91 - 9908765328
Email	E_NAGROCKS@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AAKFN3932C
Passport Number	
Aadhar Number	722958759571
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	29-12-1986
Age	37
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.TECH.	INFORMATION TECHNOLOGY	2009	OTHERS - JAWAHARLAL NEHRU TECHNOLOGICAL	OTHERS - JAWARHARLAL NEHRU TECHNOLOGICAL UNIVERSITY	72	FIRST CLASS	
P.G.	M.TECH.	COMPUTER SCIENCE AND ENGINEERING (5 YEAR INTEGRATED)	2011	OTHERS - JAWAHARLAL NEHRU TECHNOLOGICAL	OTHERS - JAWAHARLAL NEHRU TECHNOLOGICAL UNIVERSITY	66.10	FIRST CLASS	
PH.D.	PH.D.	COMPUTER SCIENCE ENGINEERING	2016	OTHERS - HINDUSTAN INSTITUTE OF TECHNOLOGY SCIENCE	OTHERS - HINDUSTAN UNIVERSITY	7.7		

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

II. Title of Ph.D. Thesis	DESIGN ANALYSIS OF NOVEL MODIFIED CROSS LAYER CONTROLLER FOR WMSN
III. Faculty in which Ph.D. was awarded	OTHERS
IV. Academic Experience : **(Start from the Current working Experience) ***	

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
OTHERS - SHREE INSTITUTE OF TECHNICAL EDUCATION	ASSISTANT PROFESSOR	10-05-2016	30-12-2022	6	7	21
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	05-05-2023	15-05-2023	0	0	11
			Total	6	8	5

V. Industrial Experience :

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

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

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

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL 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	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	2002	C S I INSTITUTE OF TECHNOLOGY	MANOMANIAM SUNDARNAR UNIVERSITY	61	SECOND CLASS	
P.G.	M.E.	MANUFACTURING ENGINEERING	2009	C S I INSTITUTE OF TECHNOLOGY	ANNA UNIVERSITY	78.5	FIRST CLASS	
PH.D.	PH.D.	MATERIAL SCIENCE AND ENGINEERING	2020	NATIONAL ENGINEERING COLLEGE (AUTONOMOUS)	ANNA UNIVERSITY	Y		

* Upload Scanned copy of Original Degree Certificate.

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

II. Title of Ph.D. Thesis	INVESTIGATION OF ACCELERATED AGING EFFECTS IN PHENOLIC ABLATIVE COMPOSITES
III. Faculty in which Ph.D. was awarded	FACULTY OF MECHANICAL ENGINEERING
IV. Academic Experience : **(Start from the Current working Experience) ***	

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	24-11-2021	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 :

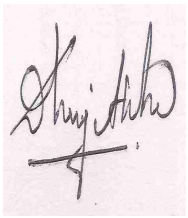
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
17		2	5	

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

Signature of the Faculty :



Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL AND AUTOMATION ENGINEERING
Name of the faculty member	MR. FRANKLIN MOSES M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	4/83A PURAVASERY THEREKALPUTHUR, NAGERCOIL
Line 2	629901
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9842079728
Email	FRANKLN@REDIFFMAIL.COM
Gender	MALE
Community	BC
PAN Number	AATPF0046Q
Passport Number	
Aadhar Number	423542125693
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU10000
Date of Birth	15-12-1980
Age	44
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	2004	C S I INSTITUTE OF TECHNOLOGY	MANOMANIAM SUNDARNAR UNIVERSITY	64.5	FIRST CLASS	
P.G.	M.E.	MANUFACTURING ENGINEERING	2006	C S I INSTITUTE OF TECHNOLOGY	ANNA UNIVERSITY	61	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
M I E T ENGINEERING COLLEGE (AUTONOMOUS)	ASSISTANT PROFESSOR	30-11-2011	29-11-2013	1	11	30
FRANCIS XAVIER ENGINEERING COLLEGE (AUTONOMOUS)	ASSISTANT PROFESSOR	27-06-2016	17-11-2016	0	4	21
VINS CHRISTIAN COLLEGE OF ENGINEERING	OTHERS - LECTURER	10-08-2006	23-06-2008	1	10	14
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	05-07-2019	03-06-2024	4	10	30
KALAIVANAR N.S.K COLLEGE OF ENGINEERING (FORMERLY K N S K COLLEGE OF ENGINEERING)	ASSISTANT PROFESSOR	04-12-2013	14-05-2016	2	5	11
UDAYA SCHOOL OF ENGINEERING	OTHERS - LECTURER	03-07-2008	12-11-2011	3	4	10
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	02-01-2017	02-07-2019	2	6	1
			Total	17	5	2

V. Industrial Experience :

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

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

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
12				

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	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
Age	50
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	OTHERS - B.LITT	OTHERS - TAMIL	2000	OTHERS - MADRAS UNIVERSTIY	OTHERS - MADRAS UNIVERITY	45	SECOND CLASS	
P.G.	OTHERS - M.A	OTHERS - TAMIL	2005	OTHERS - ALAGAPPA UNIVERSITY	OTHERS - ALAGAPPA UNIVERSITY	58	SECOND CLASS	
PH.D.	PH.D.	OTHERS - TAMIL	2017	OTHERS - MDT HINDU COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	60		
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - TAMIL	2012	OTHERS - MDT HINDU COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	67	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

II. Title of Ph.D. Thesis	PROFC ELAKKUVANARS CONTRIBUTION TO TAMIL LITERATURE AND CREATIVITY
III. Faculty in which Ph.D. was awarded	OTHERS
IV. Academic Experience : **(Start from the Current working Experience) ***	

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	29-09-2023	05-06-2024	0	8	7
OTHERS - ALADI ARUNA LIBERAL ARTS AND SCIENCE COLLEGE	ASSISTANT PROFESSOR	19-06-2023	28-09-2023	0	3	10
OTHERS - MDT HINDU COLLEGE	ASSISTANT PROFESSOR	03-12-2012	09-12-2014	2	0	7
OTHERS - RANI ANNA GOVERNMENT COLLEGE	ASSISTANT PROFESSOR	02-07-2018	04-05-2023	4	10	3
			Total	7	9	2

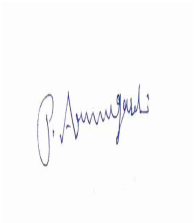
V. Industrial Experience :

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

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

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

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



Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.E.-CIVIL ENGINEERING
Name of the faculty member	MS. KRISHNA RAMA B
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	13 A, VILLATHI VILLAI, PAZHA VILLAI, P.O
Line 2	KANYAKUMARI-629501
District	KANYAKUMARI
Telephone number	0 - 0
Mobile number	+91 - 9842585937
Email	RAMARATHI2012@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	CCOPK4843H
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 : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	CIVIL ENGINEERING	2006	AMRITA COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	Y	FIRST CLASS	
P.G.	M.E.	SOIL MECHANICS AND FOUNDATION ENGINEERING	2008	COLLEGE OF ENGINEERING GUINDY	ANNA UNIVERSITY	Y	FIRST CLASS	

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	20-05-2009	11-07-2019	10	1	23
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	12-07-2019	04-06-2024	4	10	24
			Total	15	0	17

V. Industrial Experience :	

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

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

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

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	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 completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.SC.	OTHERS - PHYSICS	2002	OTHERS - UNIVERSITY OF MADRAS	UNIVERSITY OF MADRAS	65	FIRST CLASS	
P.G.	M.SC.	OTHERS - PHYSICS	2005	OTHERS - UNIVERSITY OF MADRAS	UNIVERSITY OF MADRAS	68	FIRST CLASS	
PH.D.	PH.D.	OTHERS - PHYSICS	2011	OTHERS - UNIVERSITY OF MADRAS	UNIVERSITY OF MADRAS	60		

* Upload Scanned copy of Original Degree Certificate.

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

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	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				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 Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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

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

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.E.-ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the faculty member	MR. 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 completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	1992	OTHERS - KARUNYA INSTITUTE OF TECHNOLOGY	BHARATHIYAR UNIVERSITY	Y	SECOND CLASS	
P.G.	M.E.	POWER ELECTRONICS AND DRIVES	2010	OTHERS - SATHYABAMA UNIVERSITY	OTHERS - SATHYABAMA UNIVERSITY	Y	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
HOLY CROSS ENGINEERING COLLEGE	OTHERS - HOD	27-06-2011	12-06-2013	1	11	16
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	12-07-2013	02-03-2023	9	7	22
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	03-05-2023	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 :	

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

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

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
6		2	2	2

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	AUTOMOBILE ENGINEERING
Name of the Degree & Course	M.E.-AUTOMOBILE ENGINEERING
Name of the faculty member	MR. IMMANUEL S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	8, RAMACHANDRA PURAM
Line 2	MAVADI, 627107
District	TIRUNELVELI
Telephone number	00000 - 00000000
Mobile number	+91 - 9789700531
Email	IMANMECH@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	ADBPI5635B
Passport Number	M4505808
Aadhar Number	351814917096
Faculty code given by C.O.E.	9523057
Faculty code given by A.I.C.T.E.	1434127111
Date of Birth	18-03-1982
Age	42
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	2003	DR SIVANTHI ADITANAR COLLEGE OF ENGINEERING	MANOMANIAM SUNDARNAR UNIVERSITY	63	FIRST CLASS	
P.G.	M.E.	COMPUTER AIDED DESIGN	2014	ANNA UNIVESITY REGIONAL CAMPUS, TIRUNELVELI	ANNA UNIVERSITY	7.1	FIRST CLASS	

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

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

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
5		2		

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	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 : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.SC.	OTHERS - CHEMISTRY	2000	OTHERS - MDT HINDU COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	73	FIRST CLASS	
P.G.	M.SC.	OTHERS - CHEMISTRY	2002	OTHERS - SRI PARAMAKALYANI COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	63	FIRST CLASS	
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - CHEMISTRY	2009	OTHERS - VINAYAKA MISSION UNIVERSITY	OTHERS - VINAYAGA MISSION UNIVERSITY	63	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
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. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
STERLITE GROUP OF COMPANIES	CHEMIST	ANALAYSIS	22-01-2024	05-06-2024	0	4	15
				Total	0	4	16

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

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

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	M.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MR. SUDERSINGH K
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	KALLARAPILAI VEEDU
Line 2	THICKURICHY
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9344886617
Email	SUDERSINGH@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	DMWPS9119D
Passport Number	PS9119D0
Aadhar Number	866135619869
Faculty code given by C.O.E.	9523035
Faculty code given by A.I.C.T.E.	1422711133
Date of Birth	04-06-1984
Age	40
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	OTHERS - MSC	OTHERS - IT AND ECOMMERCE	2007	OTHERS - VIVEKANANDHA COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	72	FIRST CLASS	
P.G.	M.TECH.	OTHERS - CSE AND IT	2009	OTHERS - MS UNIVERSITY	MANOMANIAM SUNDARNAR UNIVERSITY	75	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	12-07-2019	04-06-2024	4	10	24
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	10-06-2009	11-07-2019	10	1	2
			Total	14	11	1

V. Industrial Experience :	

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

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

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

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

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	AUTOMOBILE ENGINEERING
Name of the Degree & Course	B.E.-AUTOMOBILE ENGINEERING
Name of the faculty member	DR. 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 : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	2008	SCAD COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	63	FIRST CLASS	
P.G.	M.E.	CAD/CAM	2011	KONGU ENGINEERING COLLEGE (AUTONOMOUS)	ANNA UNIVERSITY	7.44	FIRST CLASS	
PH.D.	PH.D.	MECHANICAL ENGINEERING	2019	OTHERS - HINDUSTAN INSTITUTE OF TECHNOLOGY AND SCIENCE	OTHERS - HINDUSTAN UNIVERSITY	Y		

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

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 in which Ph.D. was awarded	FACULTY OF MECHANICAL ENGINEERING
IV. Academic Experience : **(Start from the Current working Experience) ***	

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
DHANALAKSHMI SRINIVASAN COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSOCIATE PROFESSOR	22-01-2020	20-01-2021	0	11	30
DHANALAKSHMI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	15-05-2012	30-06-2018	6	1	17
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	11-09-2023	04-06-2024	0	8	24
JOE SURESH ENGINEERING COLLEGE	ASSISTANT PROFESSOR	10-07-2008	08-07-2009	0	11	30
EINSTEIN COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	02-07-2018	07-01-2020	1	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	2	4	28
			Total	13	10	20

V. Industrial Experience :

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

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

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

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MASTER OF BUSINESS ADMINISTRATION
Name of the Degree & Course	M.B.A.-MASTER OF BUSINESS ADMINISTRATION
Name of the faculty member	MRS. THANGAPOO A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	51/D,AMMAN KOVIL STREET
Line 2	KURAVERKULAM,627152
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9095581216
Email	THANGAMLOTUS.30@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BCIPT0162M
Passport Number	
Aadhar Number	861937005525
Faculty code given by C.O.E.	9523260
Faculty code given by A.I.C.T.E.	9311059451
Date of Birth	18-03-1991
Age	33
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.B.A.	BUSINESS ADMINISTRATION	2011	OTHERS - GOVINDAMMAL ADITANAR COLLEGE FOR WOMEN	MANOMANIAM SUNDARNAR UNIVERSITY	Y	FIRST CLASS	
P.G.	M.B.A.	OTHERS - HR AND FINANCE	2013	SCAD COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	Y	FIRST CLASS	

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	22-06-2021	04-06-2024	2	11	13
OTHERS - PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	03-06-2013	21-06-2021	8	0	19
			Total	11	0	2

V. Industrial Experience :	

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

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

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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.TECH.-AGRICULTURAL ENGINEERING
Name of the faculty member	DR. JEYAKUMAR A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	1/4, MELA THERU , KURUNJAKULAM, TIRUVENGADAM
Line 2	TENKASI, 627719
District	TENKASI
Telephone number	-
Mobile number	+91 - 9443340955
Email	AY.JEYAKUMAR@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AIAPJ4661N
Passport Number	
Aadhar Number	793642823348
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	04-06-1969
Age	55
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	CIVIL ENGINEERING	2003	GOVERNMENT COLLEGE OF ENGINEERING TIRUNELVELI	MANOMANIAM SUNDARNAR UNIVERSITY	64.54	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2007	OTHERS - VINAYAKA MISSIONS UNIVERSITY	OTHERS - VINAYAKA MISSION UNIVERSITY	75	FIRST CLASS	
PH.D.	PH.D.	CIVIL ENGINEERING	2022	OTHERS - NOORUL ISLAM CENTER FOR HIGHER EDUCATION	OTHERS - NOORUL ISLAM CENTER FOR HIGHER EDUCATION	NA		

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

II. Title of Ph.D. Thesis	STRENGTHENING OF HIGH PERFORMANCE REINFORCED CEMENT CONCRETE HOLLOW BEAMS USING FIBRE REINFORCED POLYMER LAMINATES
III. Faculty in which Ph.D. was awarded	FACULTY OF CIVIL ENGINEERING
IV. Academic Experience : **(Start from the Current working Experience) ***	

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	07-03-2023	04-06-2024	1	2	29
HOLY CROSS ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	03-01-2013	07-06-2019	6	5	5
			Total	7	8	7

V. Industrial Experience :

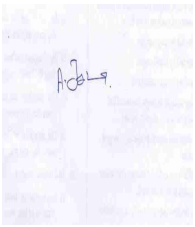
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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

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

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

Signature of the Faculty :



Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.TECH.-AGRICULTURAL ENGINEERING
Name of the faculty member	MR. ASHOK KUMARAVEL V K
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	3B, K C NAYANAR STREET, MILITARY LINE, SAMATHANAPURAM
Line 2	TIRUNELVELI-627002
District	TIRUNELVELI
Telephone number	0 -
Mobile number	+91 - 9789943298
Email	ASHOKKUMARAVEL@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	ANGPA2947R
Passport Number	
Aadhar Number	938703554980
Faculty code given by C.O.E.	0
Faculty code given by A.I.C.T.E.	112939845766
Date of Birth	02-10-1985
Age	39
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	CIVIL ENGINEERING	2008	GOVERNMENT COLLEGE OF ENGINEERING TIRUNELVELI	ANNA UNIVERSITY	Y	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2013	ANNA UNIVESITY REGIONAL CAMPUS, MADURAI	ANNA UNIVERSITY	Y	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
V V COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	06-12-2013	09-05-2014	1	2	24
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	02-06-2014	28-04-2023	8	10	27
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	02-05-2023	04-06-2024	1	1	3
			Total	11	2	25

V. Industrial Experience :	

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
ITB SEMINTATION INDIA PRILIMITED	ENGINEER	EXECUTION	02-02-2008	31-10-2010	2	8	28
				Total	2	8	1

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

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

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	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 : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.SC.	OTHERS - CHEMISTRY	2013	OTHERS - HOLYCROSS COLLEGE TIRUNELVELI	MANOMANIAM SUNDARNAR UNIVERSITY	68	FIRST CLASS	
P.G.	M.SC.	OTHERS - CHEMISTRY	2016	OTHERS - HOLYCROSS COLLEGE TIRUNELVELI	MANOMANIAM SUNDARNAR UNIVERSITY	65	FIRST CLASS	
OTHERS - M.PHILL	OTHERS - M.PHILL	OTHERS - CHEMISTRY	2019	OTHERS - WOMENS CHRISTIAN COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	62.3	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	26-11-2022	05-06-2024	1	6	10
			Total	1	6	13

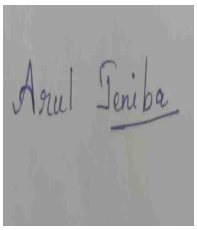
V. Industrial Experience :

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

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

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-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 completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.SC.	OTHERS - CHEMISTRY	2005	OTHERS - GOVINDAMMAL ADITANAR COLLEGE TIRUCHENDUR	MANOMANIAM SUNDARNAR UNIVERSITY	66.9	FIRST CLASS	
P.G.	M.SC.	OTHERS - CHEMISTRY	2008	OTHERS - NMSSVN COLLEGE MADURAI	MADURAI KAMARAJ UNIVERSITY	64.9	FIRST CLASS	
OTHERS - M.PHILL	OTHERS - M.PHILL	OTHERS - CHEMISTRY	2017	OTHERS - MS UNIVERSITY	MANOMANIAM SUNDARNAR UNIVERSITY	69.2	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	28-11-2022	05-06-2024	1	6	8
			Total	1	6	11

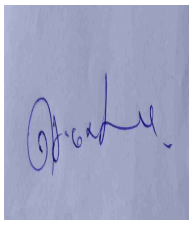
V. Industrial Experience :	

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

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

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-MATHEMATICS
Name of the faculty member	MRS. ALICE DIANA D
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	53/B GANDHI NAGAR WEST STREET
Line 2	VICKRAMASINGAPURAM 627425
District	TIRUNELVELI
Telephone number	- 0
Mobile number	+91 - 7708277841
Email	ALICEDIANA066@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	CPHPA6847K
Passport Number	
Aadhar Number	702973872375
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	30-04-1991
Age	33
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.SC.	OTHERS - MATHS	2011	OTHERS - CSI JAYARAJ ANNAPACKIAM COLLEGE NALLUR	MANOMANIAM SUNDARNAR UNIVERSITY	82	DISTINCTION	
P.G.	M.SC.	OTHERS - MATHS	2014	OTHERS - SRI PARAMAKALYANI COLLEGE ALWARKURICHI	MANOMANIAM SUNDARNAR UNIVERSITY	75	DISTINCTION	
OTHERS - M.PHILL	OTHERS - MATHS	OTHERS - MATHS	2018	OTHERS - MOTHER THERASA WOMENS UNIVERSITY KODAIKANAL	MOTHER TERESA WOMEN'S UNIVERSITY	69	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	29-12-2022	05-06-2024	1	5	8
			Total	1	5	10

V. Industrial Experience :

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

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

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

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-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 : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.A.	ENGLISH	2008	OTHERS - ST XAVIERS COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	66.5	FIRST CLASS	
P.G.	OTHERS - M.A	OTHERS - ENGLISH	2012	OTHERS - MS UNIVERSITY	MANOMANIAM SUNDARNAR UNIVERSITY	55.5	SECOND CLASS	
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - ENGLISH	2015	OTHERS - GOVT ARTS COLLEGE	BHARATHIDASAN UNIVERSITY	70.3	FIRST CLASS	

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	02-02-2017	05-06-2024	7	4	4
			Total	7	4	6

V. Industrial Experience :

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

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

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

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	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 : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.SC.	OTHERS - PHYSICS	2008	OTHERS - HOLY CROSS COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	74	FIRST CLASS	
P.G.	M.SC.	OTHERS - PHYSICS	2010	OTHERS - HOLY CROSS COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	66	FIRST CLASS	
P.G.	OTHERS - M.PHIL	OTHERS - PHYSICS	2011	OTHERS - HOLY CROSS COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	82	DISTINCTION	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
OTHERS - SIVANTHI ADITANAR COLLEGE	ASSISTANT PROFESSOR	27-06-2011	23-12-2016	5	5	27
FRANCIS XAVIER ENGINEERING COLLEGE (AUTONOMOUS)	ASSISTANT PROFESSOR	04-01-2017	24-06-2017	0	5	21
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	03-07-2017	05-06-2024	6	11	3
			Total	12	10	26

V. Industrial Experience :	

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

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

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

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-PHYSICS
Name of the faculty member	MRS. DHIVYA B
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	18 A SANTHAI MADAM, SENAIYAR STREET, AMBASAMUDRAM.
Line 2	AMBASAMUDRAM 627401
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9087531755
Email	DIVYABOOMIBALAN@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	CSXPD6698C
Passport Number	
Aadhar Number	263426709270
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	13-04-1994
Age	30
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.SC.	OTHERS - PHYSICS	2016	OTHERS - NKR GOVT ARTS COLLEGE FOR WOMEN	PERIYAR UNIVERSITY	59	SECOND CLASS	
P.G.	M.SC.	OTHERS - PHYSICS	2018	OTHERS - ARIGNAR ANNA GOVT ARTS COLLEGE NAMAKKAL	PERIYAR UNIVERSITY	72	FIRST CLASS	
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - PHYSICS	2021	OTHERS - ARIGNAR ANNA GOVT ARTS COLLEGE NAMAKKAL	PERIYAR UNIVERSITY	64	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	18-04-2022	05-06-2024	2	1	18
			Total	2	1	18

V. Industrial Experience :	

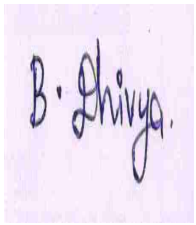
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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

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

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

Signature of the Faculty :



Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-PHYSICS
Name of the faculty member	MRS. VIJAYALAKSHMI S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1244Z ARUNACHALAPURAM, B COLONY , K.T.C.NAGAR,PALAYAMKOTTAI
Line 2	TIRUNELVELI 627011
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 8248506149
Email	PRICIPALPSNEC@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	BHSPV1728E
Passport Number	
Aadhar Number	596088543585
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	23-08-1993
Age	31
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	OTHERS - B.SC	OTHERS - PHYSICS	2015	OTHERS - ST XAVIERS COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	60	FIRST CLASS	
P.G.	M.SC.	OTHERS - PHYSICS	2017	OTHERS - ST XAVIERS COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	64	FIRST CLASS	
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - PHYSICS	2018	OTHERS - MANONMANIUM SUNDARANAR UNIVERSITY	MANOMANIAM SUNDARNAR UNIVERSITY	76	DISTINCTION	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	23-03-2023	05-06-2024	1	2	14
			Total	1	2	15

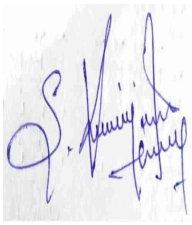
V. Industrial Experience :

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

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

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	B.E.-GENERAL ENGINEERING
Name of the faculty member	MR. 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 completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2013	ST XAVIER'S CATHOLIC COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	6.25	SECOND CLASS	
P.G.	M.E.	COMMUNICATION AND NETWORKING	2016	C S I INSTITUTE OF TECHNOLOGY	ANNA UNIVERSITY	7.56	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

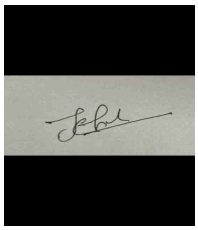
Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	05-01-2023	05-06-2024	1	5	1
			Total	1	5	3

V. Industrial Experience :

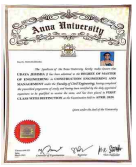
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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

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

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

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.E.-CIVIL ENGINEERING
Name of the faculty member	MS. 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 : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	CIVIL ENGINEERING	2018	ARUNACHALA COLLEGE OF ENGINEERING FOR WOMEN	ANNA UNIVERSITY	7.76	FIRST CLASS	
P.G.	M.E.	CONSTRUCTION ENGINEERING AND MANAGEMENT	2020	ARUNACHALA COLLEGE OF ENGINEERING FOR WOMEN	ANNA UNIVERSITY	8.87	DISTINCTION	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
M E T ENGINEERING COLLEGE	ASSISTANT PROFESSOR	13-02-2023	05-04-2024	1	1	21
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	08-04-2024	04-06-2024	0	1	27
			Total	1	3	19

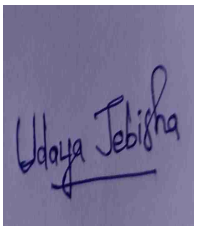
V. Industrial Experience :	

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

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

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

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

Signature of the Faculty : 

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

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	COMPUTER SCIENCE AND ENGINEERING	2011	KINGS ENGINEERING COLLEGE	ANNA UNIVERSITY	68	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2017	PSN ENGINEERING COLLEGE	ANNA UNIVERSITY	72	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	09-01-2020	04-06-2024	4	4	27
			Total	4	4	29

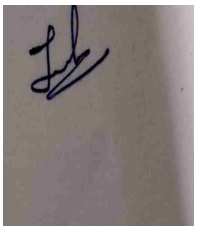
V. Industrial Experience :

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

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

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.TECH.-AGRICULTURAL 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 - 627425
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	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	CIVIL ENGINEERING	2016	PSN ENGINEERING COLLEGE	ANNA UNIVERSITY	78	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2019	PSN ENGINEERING COLLEGE	ANNA UNIVERSITY	85	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	25-03-2024	05-06-2024	0	2	12
			Total	0	2	13

V. Industrial Experience :

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

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

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

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL 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 completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	2011	OTHERS - NOORUL ISLAMCOLLEGE OF ENHINNERING	ANNA UNIVERSITY	66	FIRST CLASS	
P.G.	M.E.	COMPUTER AIDED DESIGN	2015	ADHIYAMAAN COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	86	DISTINCTION	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	12-06-2018	04-06-2024	5	11	23
NARAYANAGURU COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	07-06-2015	08-06-2018	3	0	2
			Total	8	11	0

V. Industrial Experience :

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

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

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
2			6	

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.TECH.-AGRICULTURAL ENGINEERING
Name of the faculty member	MS. 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	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	CIVIL ENGINEERING	2019	K L N COLLEGE OF INFORMATION TECHNOLOGY	ANNA UNIVERSITY	65.4	FIRST CLASS	
P.G.	M.E.	AERONAUTICAL ENGINEERING	2022	ANNA UNIVESITY REGIONAL CAMPUS,TIRUNELVELI	ANNA UNIVERSITY	91.4	DISTINCTION	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	17-07-2023	04-06-2024	0	10	19
			Total	0	10	24

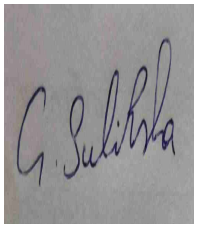
V. Industrial Experience :

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

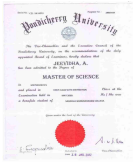
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	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 completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.SC.	OTHERS - MATHS	2006	OTHERS - SARATHA GANGADHARAN	PONDICHERRY UNIVERSITY	76	FIRST CLASS	
P.G.	M.SC.	OTHERS - MATHAMATICS	2015	OTHERS - SARADHA GANGADHARAN COLLEGE	PONDICHERRY UNIVERSITY	79.30	FIRST CLASS	
P.G.	OTHERS - M.PHIL	OTHERS - MATHAMATICS	2011	OTHERS - PRIST UNIVERSITY	PONDICHERRY UNIVERSITY	86	DISTINCTION	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	20-01-2020	05-06-2024	4	4	17
			Total	4	4	19

V. Industrial Experience :	

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

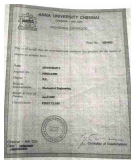
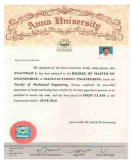
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	AUTOMOBILE ENGINEERING
Name of the Degree & Course	B.E.-AUTOMOBILE ENGINEERING
Name of the faculty member	MR. ANANTHAN L
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1/16 C THANGAMMAN KOIL STREET,
Line 2	ANDIPATTI, ALANGULAM TALUK, PINCODE - 627851
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9786121664
Email	ANANTHANMECH02@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AMZPA8676P
Passport Number	
Aadhar Number	327599273657
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	9321784181
Date of Birth	09-05-1987
Age	37
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	2009	SARDAR RAJA COLLEGE OF ENGINEERING	ANNA UNIVERSITY	2009	FIRST CLASS	
P.G.	M.E.	MANUFACTURING ENGINEERING	2014	SARDAR RAJA COLLEGE OF ENGINEERING	ANNA UNIVERSITY	2014	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN INSTITUTE OF TECHNOLOGY AND SCIENCE	ASSISTANT PROFESSOR	19-12-2019	17-02-2023	3	1	30
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	03-03-2023	04-06-2024	1	3	2
			Total	4	5	4

V. Industrial Experience :	

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

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

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.E.-ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the faculty member	MS. UMA DEVI P
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	6/1164 MIDDLE STREET, VELLUR
Line 2	VIRUDHUNAGAR - 626005
District	VIRUDHUNAGAR
Telephone number	-
Mobile number	+91 - 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	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2014	NELLAI COLLEGE OF ENGINEERING	ANNA UNIVERSITY	7.8	FIRST CLASS	
P.G.	M.E.	APPLIED ELECTRONICS	2016	NELLAI COLLEGE OF ENGINEERING	ANNA UNIVERSITY	8.1	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	31-05-2019	04-06-2024	5	0	5
			Total	5	0	5

V. Industrial Experience :

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

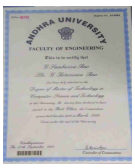
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MR. PUNGARAJAN K
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	2/51, SOUTH STREET,LAKSHMIPURAM POOVANI
Line 2	THOOTHUKKUDI - 628303
District	THOOTHUKUDI
Telephone number	-
Mobile number	+91 - 9345241169
Email	PUNGARAJAN1996@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	HDBPP2030J
Passport Number	
Aadhar Number	657132846377
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	02-09-1996
Age	28
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	COMPUTER SCIENCE AND ENGINEERING	2019	THAMIRABHARANI ENGINEERING COLLEGE	ANNA UNIVERSITY	5.84	SECOND CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2023	PSN ENGINEERING COLLEGE	ANNA UNIVERSITY	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 Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	08-01-2024	04-06-2024	0	4	28
			Total	0	4	0

V. Industrial Experience :

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

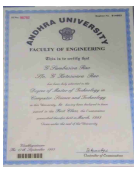
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MS. 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)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	COMPUTER SCIENCE AND ENGINEERING	2021	SCAD COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.8	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2023	SCAD COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.5	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

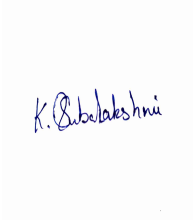
Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	09-01-2024	04-06-2024	0	4	27
			Total	0	4	29

V. Industrial Experience :

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

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

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

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

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.E.-ELECTRONICS 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 completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2015	JAYARAJ ANNAPACKIAM CSI COLLEGE OF ENGINEERING	ANNA UNIVERSITY	65	FIRST CLASS	
P.G.	M.E.	APPLIED ELECTRONICS	2022	SCAD COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	89	DISTINCTION	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	06-07-2023	04-06-2024	0	10	30
			Total	0	10	5

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
DCW CHEMICAL PVT LTD	TECHNICIAN	INSTRUMENT	01-06-2016	26-05-2017	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 (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MASTER OF BUSINESS ADMINISTRATION
Name of the Degree & Course	M.B.A.-MASTER OF BUSINESS ADMINISTRATION
Name of the faculty member	MRS. 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 completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.COM.	COMMERCE	2011	OTHERS - ROSEMARY COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	67	FIRST CLASS	
P.G.	M.B.A.	MASTER OF BUSINESS ADMINISTRATION	2013	OTHERS - MS UNIVERSITY	MANOMANIAM SUNDARNAR UNIVERSITY	69	FIRST CLASS	

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	03-11-2023	04-06-2024	0	7	2
			Total	0	7	5

V. Industrial Experience :	

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

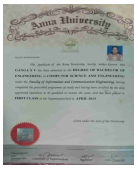
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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

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

Signature of the Faculty : 

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

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	COMPUTER SCIENCE AND ENGINEERING	2013	PONJESLY COLLEGE OF ENGINEERING	ANNA UNIVERSITY	7.76	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2016	M E T ENGINEERING COLLEGE	ANNA UNIVERSITY	8.21	FIRST CLASS	

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	04-05-2023	04-06-2024	1	1	1
			Total	1	1	1

V. Industrial Experience :

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

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

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

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	B.E.-GENERAL ENGINEERING
Name of the faculty member	MRS. 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 completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.TECH.	OTHERS - COMPUTER SCIENCE ENGINEERING	2010	OTHERS - SRI VENKATESHWARA UNIVERSITY	OTHERS - SRI VENKATESHWARA UNIVERSITY	8.0	FIRST CLASS	
P.G.	M.TECH.	COMPUTER SCIENCE AND ENGINEERING (5 YEAR INTEGRATED)	2014	RAJIV GANDHI COLLEGE OF ENGINEERING	OTHERS - JNTU ANANTAPUR UNIVERSITY	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 Working Institutions	Experience		
				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	2	0	29

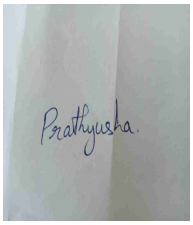
V. Industrial Experience :	

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
DK SAI PRAJNAH PVTLDT	COMMERCIAL TAX BILLING	TAX BILLING	10-05-2016	17-08-2017	1	3	8
FRUCTION INFO TECH	DATA ENTRY OPERATOR	DATA ENTRY	03-02-2015	28-12-2015	0	10	25
				Total	2	2	3

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

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MASTER OF BUSINESS ADMINISTRATION
Name of the Degree & Course	M.B.A.-MASTER OF BUSINESS ADMINISTRATION
Name of the faculty member	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	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.B.A.	BUSINESS ADMINISTRATION	2004	OTHERS - CSI JAYARAJ ANNAPACKIAM	MANOMANIAM SUNDARNAR UNIVERSITY	52	SECOND CLASS	
P.G.	M.B.A.	OTHERS - HR MARKETING	2006	OTHERS - VHNSN	MADURAI KAMARAJ UNIVERSITY	67	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
OTHERS - ST JOSEPH COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	20-05-2014	27-07-2018	4	2	8
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	07-08-2023	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 Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
1		4	200	100

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.E.-CIVIL ENGINEERING
Name of the faculty member	MR. 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 completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	CIVIL ENGINEERING	2011	RAJAS ENGINEERING COLLEGE	ANNA UNIVERSITY	75	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2015	RAJAS ENGINEERING COLLEGE	ANNA UNIVERSITY	85	DISTINCTION	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	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 Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	B.E.-GENERAL ENGINEERING
Name of the faculty member	MR. 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 : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.TECH.	CHEMICAL ENGINEERING	2018	ST JOSEPH'S COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	62.1	SECOND CLASS	
P.G.	M.TECH.	CHEMICAL ENGINEERING	2020	SRI VENKATESWARA COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	72.2	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	22-02-2023	05-06-2024	1	3	12
			Total	1	3	13

V. Industrial Experience :

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

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

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

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	AUTOMOBILE ENGINEERING
Name of the Degree & Course	B.E.-AUTOMOBILE 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 completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	2017	GOVERNMENT COLLEGE OF ENGINEERING TIRUNELVELI	ANNA UNIVERSITY	6.34	SECOND CLASS	
P.G.	M.E.	AUTOMOBILE ENGINEERING	2020	PSN ENGINEERING COLLEGE	ANNA UNIVERSITY	8.17	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	01-12-2021	04-06-2024	2	6	4
			Total	2	6	7

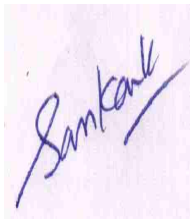
V. Industrial Experience :

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

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

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.TECH.-AGRICULTURAL ENGINEERING
Name of the faculty member	MS. ABISHA M S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3/148,CHETTIVILAI
Line 2	KEEZHAKALKURICHY
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 7530070195
Email	PRICIPALPSNEC@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	EDEPA3543A
Passport Number	
Aadhar Number	261029509086
Faculty code given by C.O.E.	9523295
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	03-06-1997
Age	27
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	CIVIL ENGINEERING	2019	UNIVERSITY COLLEGE OF ENGINEERING NAGERCOIL	ANNA UNIVERSITY	67	FIRST CLASS	
P.G.	M.E.	AERONAUTICAL ENGINEERING	2021	ANNA UNIVESITY REGIONAL CAMPUS,TIRUNELVELI	ANNA UNIVERSITY	83.5	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	03-08-2022	04-06-2024	1	10	2
			Total	1	10	7

V. Industrial Experience :	

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

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

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

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

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL AND AUTOMATION ENGINEERING
Name of the faculty member	MS. PARVATHI S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	5/70 EAST STREET ,ERACHI ETTAYAPURAM
Line 2	628720
District	THOOTHUKUDI
Telephone number	0 - 0
Mobile number	+91 - 9514916818
Email	JOYPARU95@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	CDWPP1274J
Passport Number	
Aadhar Number	551718872080
Faculty code given by C.O.E.	9523194
Faculty code given by A.I.C.T.E.	0
Date of Birth	14-05-1995
Age	29
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	2016	GRACE COLLEGE OF ENGINEERING	ANNA UNIVERSITY	6.98	FIRST CLASS	
P.G.	M.E.	ENGINEERING DESIGN	2018	GOVERNMENT COLLEGE OF ENGINEERING TIRUNELVELI	ANNA UNIVERSITY	7.05	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	13-06-2018	03-06-2024	5	11	21
			Total	5	11	26

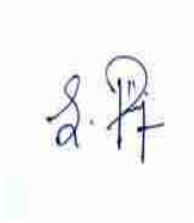
V. Industrial Experience :

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

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

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

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



Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.TECH.-AGRICULTURAL ENGINEERING
Name of the faculty member	MR. MURUGAPERUMAL A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1H/549,TN HOUSING BOARD,
Line 2	MILERPURAM-628008
District	THOOTHUKUDI
Telephone number	-
Mobile number	+91 - 8838840931
Email	AMPERUMALME@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	CCSPM3917L
Passport Number	
Aadhar Number	532821435819
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	23-01-1995
Age	29
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	2016	S S M COLLEGE OF ENGINEERING	ANNA UNIVERSITY	71	FIRST CLASS	
P.G.	M.E.	ENGINEERING DESIGN	2018	GOVERNMENT COLLEGE OF ENGINEERING TIRUNELVELI	ANNA UNIVERSITY	80	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	20-01-2021	04-06-2024	3	4	16
			Total	3	4	18

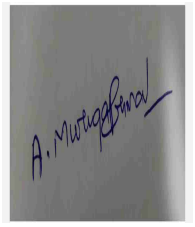
V. Industrial Experience :

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

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

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	AUTOMOBILE ENGINEERING
Name of the Degree & Course	B.E.-AUTOMOBILE 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 completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	AERONAUTICAL ENGINEERING	2020	PSN COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	74	FIRST CLASS	
P.G.	M.E.	AVIONICS	2022	PSN COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	80	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	13-09-2023	04-06-2024	0	8	22
			Total	0	8	26

V. Industrial Experience :	

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

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

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

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MASTER OF BUSINESS ADMINISTRATION
Name of the Degree & Course	M.B.A.-MASTER OF BUSINESS ADMINISTRATION
Name of the faculty member	MRS. 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 completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.SC.	OTHERS - ELECTRONICS AND COMMUNICATION	2012	OTHERS - SS DURAISAMY NADAR MARRIAMMAL COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	75	DISTINCTION	
P.G.	M.B.A.	MASTER OF BUSINESS ADMINISTRATION	2014	INFANT JESUS COLLEGE OF ENGINEERING	ANNA UNIVERSITY	75	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	01-11-2023	04-06-2024	0	7	4
			Total	0	7	7

V. Industrial Experience :

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

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

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL 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	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING (TAMIL MEDIUM)	2014	UNIVERSITY COLLEGE OF ENGINEERING RAMANATHAPURAM	ANNA UNIVERSITY	73.1	FIRST CLASS	
P.G.	M.E.	THERMAL ENGINEERING	2019	ANNAI VAILANKANNI COLLEGE OF ENGINEERING	ANNA UNIVERSITY	73.6	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
OTHERS - MARUTHI POLYTECHNIC COLLEGE	OTHERS - LECTURER	28-11-2019	26-06-2023	3	6	29
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	12-02-2024	03-06-2024	0	3	21
			Total	3	10	24

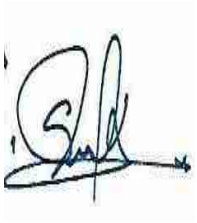
V. Industrial Experience :

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

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

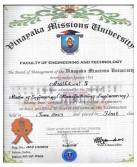
AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)

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



Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. ASAIKKANI S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	2 MIDDLE KARUPAZAGHU STREET
Line 2	PULIYANKUDI-627855
District	TENKASI
Telephone number	-
Mobile number	+91 - 8526560275
Email	KANI73ANNAM@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	GTXPS5943E
Passport Number	
Aadhar Number	952072618699
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	15-06-1973
Age	51
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	1994	OTHERS - REGIONAL ENGIEERING COLLEGE	BHARATHIYAR UNIVERSITY	56	SECOND CLASS	
P.G.	M.E.	MANUFACTURING ENGINEERING	2013	OTHERS - VINAYAGA MISSIONS UNIVERSITY	OTHERS - VINAYAGA MISSIONS UNIVERSITY	71	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
S VEERASAMY CHETTIAR COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	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 Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
SRISAITECH CONSULTANCY	PROJECT MANAGER	CONTRACT WORK	22-10-2009	15-06-2011	1	7	25
SWETHA CONSTRUCTION	SITE ENGINEER	CONTRACT WORK	13-09-2004	17-09-2009	5	0	5
MSRB ENGINEERING WORKS CHENNAI	SITE IN CHARGE	INSPECTION	05-05-2000	18-08-2004	4	3	14
SYSTEMS AND COMPONENTS PVT LTD BOMBAY	SERVICE ENGINEER	PRODUCTION	02-02-1996	15-03-2000	4	1	14
				Total	15	0	27

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

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
8			5	

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

Signature of the Faculty : 

Name of the College	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 : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.A.	ENGLISH	2010	OTHERS - ST XAVIERS COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	47	OTHERS - THIRD	
P.G.	OTHERS - M.A.	OTHERS - ENGLISH	2015	OTHERS - ST JOHNS COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	56	SECOND CLASS	
OTHERS - M.PHI.	OTHERS - M.PHIL	OTHERS - ENGLISH	2016	OTHERS - ST JOHNS COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	74	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	22-04-2022	05-06-2024	2	1	14
			Total	2	1	14

V. Industrial Experience :

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

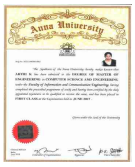
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.E.-COMPUTER 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 completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	COMPUTER SCIENCE AND ENGINEERING	2015	SACS M A V M M ENGINEERING COLLEGE	ANNA UNIVERSITY	76	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2017	PSN ENGINEERING COLLEGE	ANNA UNIVERSITY	8.4	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	25-07-2023	04-06-2024	0	10	11
			Total	0	10	16

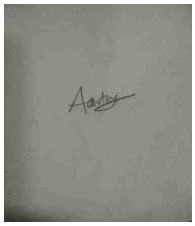
V. Industrial Experience :

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

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

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. GLADSON D
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	24-4/1 ELLAMAVILAI
Line 2	KALKULAM
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9486679168
Email	PRICIPALPSNEC@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BUEPG8096H
Passport Number	
Aadhar Number	620362065520
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	21-10-1994
Age	30
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	AUTOMOBILE ENGINEERING	2016	OTHERS - NOORUL ISLAM CENTRE FOR HIGHER EDUCATION	OTHERS - NOORUL ISLAM CENTRE FOR HIGHER EDUCATION	75	FIRST CLASS	
P.G.	M.E.	AUTOMOBILE ENGINEERING	2018	OTHERS - NOORUL ISLAM CENTRE FOR HIGHER EDUCATION	OTHERS - NOORUL ISLAM FOR CENTRE FOR HIGHER EDUCATION	79	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	06-12-2022	04-06-2024	1	5	30
			Total	1	5	2

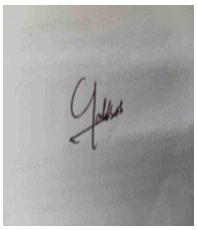
V. Industrial Experience :

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

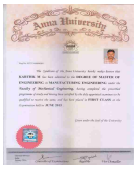
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL AND AUTOMATION ENGINEERING
Name of the faculty member	MR. KARTHIK M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1/180 ALWAR NADAR STREET
Line 2	KURUMBALAPERI
District	TENKASI
Telephone number	-
Mobile number	+91 - 9442148728
Email	PRICIPALPSNEC@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	GTSPK2803K
Passport Number	
Aadhar Number	327928083291
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	30-12-1988
Age	36
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	2013	SARDAR RAJA COLLEGE OF ENGINEERING	ANNA UNIVERSITY	64	SECOND CLASS	
P.G.	M.E.	MANUFACTURING ENGINEERING	2015	SARDAR RAJA COLLEGE OF ENGINEERING	ANNA UNIVERSITY	71	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	04-01-2023	03-06-2024	1	4	31
			Total	1	5	3

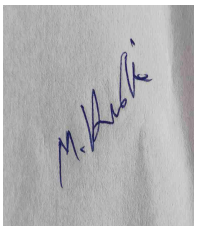
V. Industrial Experience :

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

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

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	AUTOMOBILE ENGINEERING
Name of the Degree & Course	B.E.-AUTOMOBILE ENGINEERING
Name of the faculty member	MR. SURESH D
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	32/4, NALAYIRAMUDAIYAKULAM,SONAGAN VILAI
Line 2	TIRUCHENDUR,628201
District	THOOTHUKUDI
Telephone number	-
Mobile number	+91 - 7667764969
Email	DSURESHENG02@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	EXGPS8543M
Passport Number	
Aadhar Number	958389902942
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	02-04-1979
Age	45
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	2010	GOVERNMENT COLLEGE OF ENGINEERING TIRUNELVELI	ANNA UNIVERSITY	57	SECOND CLASS	
P.G.	M.E.	THERMAL ENGINEERING	2016	UNIVERSAL COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.68	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
OTHERS - 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 the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL AND AUTOMATION ENGINEERING
Name of the faculty member	MR. BALAMURUGAN A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	7/111, SOUTH STREET, MARUTHANVALVOO
Line 2	THOOTHUKUDI,628303
District	THOOTHUKUDI
Telephone number	-
Mobile number	+91 - 9842434675
Email	ALWINBALA95@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	CGEPB5066R
Passport Number	
Aadhar Number	754511766771
Faculty code given by C.O.E.	9523301
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	20-06-1995
Age	29
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	2016	GRACE COLLEGE OF ENGINEERING	ANNA UNIVERSITY	6.98	FIRST CLASS	
P.G.	M.E.	THERMAL ENGINEERING	2020	UNIVERSAL COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	8.42	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	14-09-2022	03-06-2024	1	8	20
			Total	1	8	24

V. Industrial Experience :

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

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

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.E.-CIVIL ENGINEERING
Name of the faculty member	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 completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	CIVIL ENGINEERING	2018	DMI ENGINEERING COLLEGE	ANNA UNIVERSITY	74	FIRST CLASS	
P.G.	M.E.	SOIL MECHANICS AND FOUNDATION ENGINEERING	2020	SOLAMALAI COLLEGE OF ENGINEERING	ANNA UNIVERSITY	81.3	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	06-04-2022	04-06-2024	2	1	29
			Total	2	1	29

V. Industrial Experience :

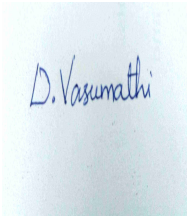
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
ALPHA CONSULTANCY FOR SOIL AND MATERIAL TESTING	GEO TECH ENGINEER	TESTING OF SOIL	05-11-2020	30-03-2022	1	4	25
				Total	1	4	26

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

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

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

Signature of the Faculty :



Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-MATHEMATICS
Name of the faculty member	MR. GOPALAKRISHNAN K
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	9/168,SURYA NAGAR
Line 2	KALLIGUDI
District	MADURAI
Telephone number	-
Mobile number	+91 - 9585843048
Email	GOPAL08MAT12@GMAIL.COM.COM
Gender	MALE
Community	BC
PAN Number	BSDPG9073P
Passport Number	
Aadhar Number	270820410635
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	11-04-1991
Age	33
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.SC.	OTHERS - MATHEMATICS	2011	OTHERS - THE AMERICAN COLLEGE	MADURAI KAMARAJ UNIVERSITY	57	SECOND CLASS	
P.G.	M.SC.	OTHERS - MATHEMATICS	2014	OTHERS - AYYA NADAR JANAKAI AMMAL COLLEGE	MADURAI KAMARAJ UNIVERSITY	63	FIRST CLASS	
OTHERS - MPHIL	OTHERS - MATHEMATICS	OTHERS - MATHEMATICS	2015	OTHERS - ANJAC COLLEGE	MADURAI KAMARAJ UNIVERSITY	74	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	26-04-2022	05-06-2024	2	1	10
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	07-07-2016	31-10-2018	2	3	25
			Total	4	5	7

V. Industrial Experience :	

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

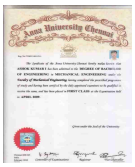
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL AND AUTOMATION ENGINEERING
Name of the faculty member	MR. ASHOK KUMAR I
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1/25/38 MARIAMMAL ILLAM, RAJIVE NAGAR
Line 2	ARUPPUKOTTAI-626101
District	VIRUDHUNAGAR
Telephone number	-
Mobile number	+91 - 9486278280
Email	PRICIPALPSNEC@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	ATGPA0787M
Passport Number	
Aadhar Number	641424139856
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	15-06-1987
Age	37
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	2009	SRI RAMAKRISHNA INSTITUTE OF TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	66	FIRST CLASS	
P.G.	M.E.	COMPUTER AIDED DESIGN	2014	ANNA UNIVESITY REGIONAL CAMPUS,TIRUNELVELI	ANNA UNIVERSITY	7.21	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	10-01-2023	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	Days

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

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.TECH.-AGRICULTURAL ENGINEERING
Name of the faculty member	MR. 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)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	CIVIL ENGINEERING	2014	SATYAM COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	84.8	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2020	ANNA UNIVESITY REGIONAL CAMPUS, TIRUNELVELI	ANNA UNIVERSITY	87.4	DISTINCTION	

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	30-10-2023	14-02-2024	0	3	16
THAMIRABHARANI ENGINEERING COLLEGE	ASSISTANT PROFESSOR	29-08-2022	20-09-2023	1	0	23
ANNA UNIVESITY REGIONAL CAMPUS,TIRUNELVELI	OTHERS - TEMPORARY TEACHING STAFF	15-02-2021	30-12-2021	0	10	13
			Total	2	2	23

V. Industrial Experience :	

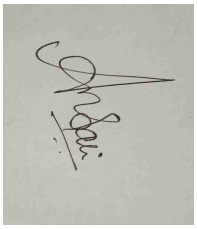
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
ANGELA CONSULTANT	SITE ENGINEER	FIELD WORK	02-06-2014	10-08-2018	4	2	9
				Total	4	2	9

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

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

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

Signature of the Faculty :



Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.E.-CIVIL ENGINEERING
Name of the faculty member	MRS. MISPA BROWN S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	69A TUCKKARAMMAL PURAM
Line 2	627602
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 7502292711
Email	MISPA.SV@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	CZHPM0153Q
Passport Number	
Aadhar Number	823737576875
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU10000
Date of Birth	11-04-1987
Age	37
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	CIVIL ENGINEERING	2011	PSN ENGINEERING COLLEGE	ANNA UNIVERSITY	78	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2015	PSN ENGINEERING COLLEGE	ANNA UNIVERSITY	84	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	07-06-2011	09-09-2012	1	3	3
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	05-10-2020	04-06-2024	3	7	31
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	01-07-2015	08-11-2015	0	4	8
			Total	5	3	14

V. Industrial Experience :	

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

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

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

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.E.-CIVIL ENGINEERING
Name of the faculty member	MS. RENU K
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	7-73/69NESAVALAR COLONY
Line 2	ARALVOIMOZHI,629301
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 8531981958
Email	RENU.KATHIR97@GMAIL.COM
Gender	FEMALE
Community	MBC
PAN Number	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 : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	CIVIL ENGINEERING	2018	DMI ENGINEERING COLLEGE	ANNA UNIVERSITY	77.2	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2020	A R COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	80.3	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	13-12-2021	04-06-2024	2	5	23
			Total	2	5	25

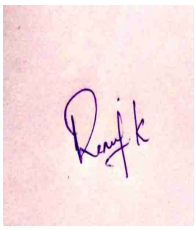
V. Industrial Experience :

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

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

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-MATHEMATICS
Name of the faculty member	MRS. GIRIJA S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	4/19 DHASARATHARAM STREET
Line 2	MUKKUDAL 627-601
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9025927905
Email	GIRI19AUG88@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BWLPG9776R
Passport Number	
Aadhar Number	224621165018
Faculty code given by C.O.E.	9506296
Faculty code given by A.I.C.T.E.	
Date of Birth	19-05-1988
Age	36
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.SC.	OTHERS - MATHAMATICS	2008	OTHERS - MANO COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	56	SECOND CLASS	
P.G.	M.SC.	OTHERS - MATHAMATICS WITH INFORMATION TECHNOLOGY	2010	OTHERS - SREE PARAMA KALYANI COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	72	FIRST CLASS	
P.G.	OTHERS - M.PHIL	OTHERS - MATHS	2012	OTHERS - STJOHNS COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	62	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN INSTITUTE OF TECHNOLOGY AND SCIENCE	ASSISTANT PROFESSOR	14-05-2012	09-12-2013	1	6	27
SCAD COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	07-07-2011	10-05-2012	0	10	4
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	07-06-2019	05-06-2024	4	11	29
EINSTEIN COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	02-01-2017	03-06-2019	2	5	2
			Total	9	10	8

V. Industrial Experience :

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

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

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
15				

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	STRUCTURAL ENGINEEERING
Name of the Degree & Course	M.E.-STRUCTURAL ENGINEERING
Name of the faculty member	MS. MAKESHWARI N
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	2/7, MARIAMMAN KOVIL NORTH STREET,
Line 2	T K KULAM PETTAI -627010
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 8220653704
Email	SRCEMAHESHWARI@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	GACPM8333J
Passport Number	
Aadhar Number	924103249666
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	
Date of Birth	12-08-1987
Age	37
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	CIVIL ENGINEERING	2012	SARDAR RAJA COLLEGE OF ENGINEERING	ANNAMALAI UNIVERSITY	79	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2017	SARDAR RAJA COLLEGE OF ENGINEERING	ANNA UNIVERSITY	81	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	14-06-2019	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 Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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

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

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.E.-CIVIL ENGINEERING
Name of the faculty member	MR. JACINTH SELVA DOSS K
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	69A TUCKERAMMALPURAM
Line 2	627001
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 7502292610
Email	JACINTH.K.SELVADOSS@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AKCPJ3570C
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	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	CIVIL ENGINEERING	2007	OTHERS - KARUNYA INISTITUTE OF TECHNOLOGY	ANNA UNIVERSITY	80	FIRST CLASS	
P.G.	M.TECH.	ENVIRONMENTAL SCIENCE AND TECHNOLOGY	2009	ANNA UNIVESITY REGIONAL CAMPUS,TIRUNELVELI	ANNA UNIVERSITY	75	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	06-06-2011	04-06-2024	12	11	29
			Total	12	11	4

V. Industrial Experience :

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

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

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	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 completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.SC.	OTHERS - CHEMISTRY	2013	OTHERS - STXAVIERS COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	63	FIRST CLASS	
P.G.	OTHERS - M.PHIL	OTHERS - CHEMISTRY	2017	OTHERS - MSUNIVERSITY	MANOMANIAM SUNDARNAR UNIVERSITY	71	FIRST CLASS	
P.G.	M.SC.	OTHERS - CHEMISTRY	2016	OTHERS - ANJAC COLLEGE	MADURAI KAMARAJ UNIVERSITY	70	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	06-04-2022	05-06-2024	2	1	30
			Total	2	1	0

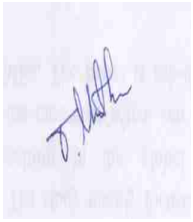
V. Industrial Experience :

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

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

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-CHEMISTRY
Name of the faculty member	MS. BHARATHI T
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	SREE KRISHNAPURAM, GANAPATHIPURAM
Line 2	KANNYAKUMARAI 629-502
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9789390050
Email	PRIYABHARATHI1994@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BJBPT4953L
Passport Number	
Aadhar Number	504569741251
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	
Date of Birth	13-04-1993
Age	31
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.SC.	OTHERS - CHEMISTRY	2013	OTHERS - HOLY CROSS COLLEGE NAGERCOIL	MANOMANIAM SUNDARNAR UNIVERSITY	70	FIRST CLASS	
P.G.	OTHERS - M.PHIL	OTHERS - CHEMISTRY	2017	JAYARAJ ANNAPACKIAM CSI COLLEGE OF ENGINEERING	MANOMANIAM SUNDARNAR UNIVERSITY	77	FIRST CLASS	
P.G.	M.SC.	OTHERS - CHEMISTRY	2016	OTHERS - HOLY CROSS COLLEGE NAGERCOIL	MANOMANIAM SUNDARNAR UNIVERSITY	71	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	10-06-2019	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

V. Industrial Experience :

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

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

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	AUTOMOBILE ENGINEERING
Name of the Degree & Course	M.E.-AUTOMOBILE ENGINEERING
Name of the faculty member	MR. ARUN M R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	52 METTU STREET,VADIVEESWARAM
Line 2	NAGERCOIL
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9500426637
Email	ARUNMR1094@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	CFVPA4138K
Passport Number	
Aadhar Number	347811993867
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	
Date of Birth	12-10-1994
Age	30
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	AUTOMOBILE ENGINEERING	2016	OTHERS - NOORUL ISLAM CENTER FOR HIGHER EDUCATION	OTHERS - NOORUL ISLAM CENTER FOR HIGHER EDUCATOIN	75	FIRST CLASS	
P.G.	M.E.	AUTOMOBILE ENGINEERING	2018	OTHERS - NOORUL ISLAM CENTER FOR HIGHER EDUCATION	OTHERS - NOORUL ISLAM CENTER FOR HIGHER EDUCATION	80	FIRST CLASS	

* 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	27-01-2020	04-06-2024	4	4	9
			Total	4	4	11

V. Industrial Experience :

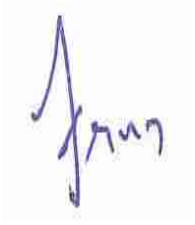
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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

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

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

Signature of the Faculty :



Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MRS. SUBHA SHREE M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	21/ B2 KURICHI MAIN ROAD
Line 2	627001
District	TIRUNELVELI
Telephone number	0462 - 0
Mobile number	+91 - 9894934802
Email	MSUBHASHREE1617@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BWEPS8999D
Passport Number	
Aadhar Number	673723865975
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	
Date of Birth	16-10-1986
Age	38
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.TECH.	POLYMER TECHNOLOGY	2008	KAMARAJ COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	84	DISTINCTION	
P.G.	M.E.	INDUSTRIAL ENGINEERING	2014	BHARATH NIKETAN ENGINEERING COLLEGE	ANNA UNIVERSITY	8.5	DISTINCTION	

* 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	27-01-2020	04-06-2024	4	4	9
			Total	4	4	11

V. Industrial Experience :

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

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

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. THIVAGAR A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1/1 MUPPDATHI AMMAN KOVIL SECOND STREET
Line 2	PULINYANUKUDI
District	TENKASI
Telephone number	-
Mobile number	+91 - 9894841109
Email	PRICIPALPSNEC@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	BMHPT5886P
Passport Number	
Aadhar Number	941142554927
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	14-09-1999
Age	25
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	2020	PSN COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	68	FIRST CLASS	
P.G.	M.E.	CRYOGENIC ENGINEERING	2022	PSN COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	73	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	22-08-2022	04-06-2024	1	9	14
			Total	1	9	18

V. Industrial Experience :	

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

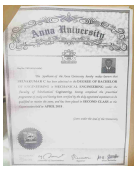
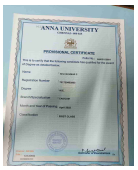
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL 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)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	2018	EXCEL COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	6.3	SECOND CLASS	
P.G.	M.E.	CAD/CAM	2022	M P NACHIMUTHU M JAGANATHAN ENGINEERING COLLEGE	ANNA UNIVERSITY	8.3	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	10-05-2023	03-06-2024	1	0	25
			Total	1	0	25

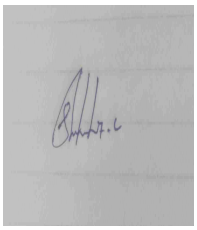
V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
SAKTHI AUTO COMPONENTS LTD	SHIFT INCHARGE	QUALITY INSPECTION	06-06-2018	08-11-2022	4	5	3
				Total	4	5	5

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

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECH.-INFORMATION TECHNOLOGY
Name of the faculty member	MRS. SALINI T
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	264 MAIN ROAD
Line 2	PANAGUDI-627109
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 7598165960
Email	SALINI14R@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	GNWPS8261J
Passport Number	
Aadhar Number	693362754396
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1452654281
Date of Birth	14-02-1985
Age	39
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	COMPUTER SCIENCE AND ENGINEERING	2006	PET ENGINEERING COLLEGE	ANNA UNIVERSITY	72.6	FIRST CLASS	
P.G.	M.TECH.	OTHERS - COMPUTER AND INFORMATION TECHNONLEGY	2014	OTHERS - MS UNINVERSITY	MANOMANIAM SUNDARNAR UNIVERSITY	80	DISTINCTION	

* Upload Scanned copy of Original Degree Certificate.

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

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

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

V. Industrial Experience :

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

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

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

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.E.-ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the faculty member	MR. BALASUBRAMANIAN M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	14, NORTH ANAVARATHA VINAYAGAR KOVIL STREET
Line 2	TIRUNELVELI TOWN 627-006
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9585600947
Email	BALASUBRAMANIANB6@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BVBPB6954M
Passport Number	
Aadhar Number	596504484884
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	9523248
Date of Birth	21-11-1987
Age	37
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	ELECTRICAL AND ELECTRONICS ENGINEERING	2012	MAHAKAVI BHARATHIYAR COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	66	FIRST CLASS	
P.G.	M.E.	APPLIED ELECTRONICS (PART TIME)	2017	GOVERNMENT COLLEGE OF ENGINEERING TIRUNELVELI	ANNA UNIVERSITY	67	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	09-12-2019	04-06-2024	4	5	27
			Total	4	5	29

V. Industrial Experience :

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

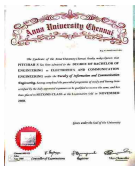
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.E.-ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the faculty member	MR. PITCHAIAH S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	4/244, SOUTH CAR STREET
Line 2	KADAYAM,627415
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9952782900
Email	PITCHIAHSUBU@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	DUDPS3665B
Passport Number	
Aadhar Number	963822602031
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	9523228
Date of Birth	14-04-1985
Age	39
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2006	SCAD COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	70	SECOND CLASS	
P.G.	M.E.	COMMUNICATION SYSTEMS	2011	ANAND INSTITUTE OF HIGHER TECHNOLOGY	ANNA UNIVERSITY	72	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	18-06-2019	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 Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
PROPHOENIX	PROGRAMMER	DATABASE	05-07-2012	31-05-2013	0	10	27
				Total	0	10	1

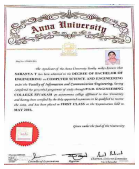
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
6		2	1	1

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	M.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MS. RENUKA DEVI M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	571/3 INAMANIYACHI BYPASS ROAD
Line 2	KOVILPATTI 628-501
District	THOOTHUKUDI
Telephone number	-
Mobile number	+91 - 9384695849
Email	SRUTHISUHI@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BSGPR8200J
Passport Number	
Aadhar Number	297973476093
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	
Date of Birth	05-06-1992
Age	32
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	COMPUTER SCIENCE AND ENGINEERING	2013	P.S.R.R COLLEGE OF ENGINEERING	ANNA UNIVERSITY	73.5	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2015	P.S.R.R COLLEGE OF ENGINEERING	ANNA UNIVERSITY	86	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	12-06-2019	04-06-2024	4	11	23
			Total	4	11	28

V. Industrial Experience :

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

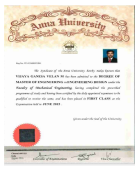
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. VIJAYA GANESA VELAN M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	B2 RAAGHAR ENCLAVE
Line 2	PILLAIYAR KOVIL STREET, SS COLONY-625016
District	MADURAI
Telephone number	-
Mobile number	+91 - 9600892665
Email	PRICIPALPSNEC@GMAIL.COM
Gender	MALE
Community	MBC
PAN Number	ANPPV6034M
Passport Number	
Aadhar Number	750435775493
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	24-02-1991
Age	33
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	2012	THIAGARAJAR COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	83.6	DISTINCTION	
P.G.	M.E.	ENGINEERING DESIGN	2015	OTHERS - SVS SCHOOL OF ENGINNEERING	ANNA UNIVERSITY	76.6	FIRST CLASS	

* 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	30-01-2020	04-06-2024	4	4	6
			Total	4	4	8

V. Industrial Experience :	

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

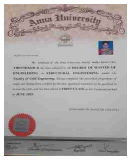
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	STRUCTURAL ENGINEEERING
Name of the Degree & Course	M.E.-STRUCTURAL ENGINEERING
Name of the faculty member	MRS. THENMOZHI R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	496 GANDHI NAGAR, MALAIYADIPATTI,
Line 2	RAJAPALAYAM 626 117
District	VIRUDHUNAGAR
Telephone number	-
Mobile number	+91 - 9843979756
Email	CIVILLYDIATHENMOZHI@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	AIXPT5585C
Passport Number	
Aadhar Number	230312075959
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	26-04-1989
Age	35
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	CIVIL ENGINEERING	2010	SRI VENKATESWARAA COLLEGE OF TECHNOLOGY	ANNA UNIVERSITY	73	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2015	RATHINAM TECHNICAL CAMPUS (AUTONOMOUS)	ANNA UNIVERSITY	7.4	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
NADAR SARASWATHI COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	26-03-2015	20-03-2021	5	11	26
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	25-03-2021	04-06-2024	3	2	11
			Total	9	2	8

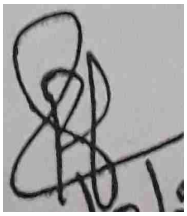
V. Industrial Experience :

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

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

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	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 completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.A.	OTHERS - TAMIL	2011	OTHERS - MSUNIVERSITY	MANOMANIAM SUNDARNAR UNIVERSITY	52.7	SECOND CLASS	
U.G.	B.A.	OTHERS - TAMIL	2014	OTHERS - TAMILNADU TEACHEAR EDUCATION UNIVERSI	OTHERS - TAMILNADU TEACHERS UNIVERSITY	69.7	FIRST CLASS	
P.G.	OTHERS - MA	OTHERS - TAMIL	2016	OTHERS - M S UNIVERSTITY	MANOMANIAM SUNDARNAR UNIVERSITY	65.8	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	26-12-2022	05-06-2024	1	5	11
			Total	1	5	13

V. Industrial Experience :	

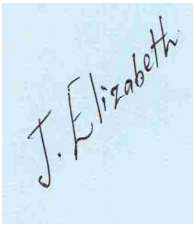
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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

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

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

Signature of the Faculty :



Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL AND AUTOMATION ENGINEERING
Name of the faculty member	MRS. RAAGAVI R B
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3/498 P.KONDUREDDYPATTI
Line 2	PERAIYUR
District	MADURAI
Telephone number	-
Mobile number	+91 - 9488748441
Email	PRICIPALPSNEC@GMAIL.COM
Gender	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	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	2016	SRI VIDYA COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	8.2	FIRST CLASS	
P.G.	M.E.	ENGINEERING DESIGN	2018	GOVERNMENT COLLEGE OF ENGINEERING TIRUNELVELI	ANNA UNIVERSITY	8.06	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	05-12-2022	03-06-2024	1	5	30
			Total	1	5	2

V. Industrial Experience :

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

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

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	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	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.A.	ENGLISH	2007	OTHERS - GOVERNMENT ARTS COLLEGE SALEM	PERIYAR UNIVERSITY	42	OTHERS - THIRD	
P.G.	OTHERS - M.A.	OTHERS - ENGLISH	2010	OTHERS - GOVERNMENT ARTS COLLEGE SALEM	PERIYAR UNIVERSITY	65	FIRST CLASS	
OTHERS - M.PHIL.	OTHERS - M.PHIL.	OTHERS - ENGLISH	2014	OTHERS - PRIST UNIVERSITY	OTHERS - PRIST UNIVERSITY	78	FIRST CLASS	

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I.a. Additional Qualification :- NET
Score : 89
File :

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	09-09-2014	05-06-2024	9	8	27
OTHERS - AVS COLLEGE OF ARTS AND SCIENCE	ASSISTANT PROFESSOR	01-09-2013	16-04-2014	0	7	16
			Total	10	4	15

V. Industrial Experience :

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

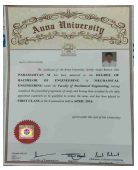
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. PARAMASIVAN M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	42 VETHAKOVIL NORTH STREET
Line 2	T N PUTHUKUDI
District	TENKASI
Telephone number	-
Mobile number	+91 - 8667293509
Email	PRICIPALPSNEC@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	CKEPP2622P
Passport Number	
Aadhar Number	790192662506
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	25-05-1995
Age	29
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	2016	S VEERASAMY CHETTIAR COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.5	FIRST CLASS	
P.G.	M.E.	THERMAL ENGINEERING	2021	R. V. S COLLEGE OF ENGINEERING	ANNA UNIVERSITY	8.9	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	04-01-2023	04-06-2024	1	5	1
			Total	1	5	3

V. Industrial Experience :

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

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

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	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 : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.SC.	OTHERS - MATHS	2007	OTHERS - SADAKATHULLAH APPA COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	90	DISTINCTION	
P.G.	M.SC.	OTHERS - MATHS	2009	OTHERS - STJOHNS COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	80	DISTINCTION	
OTHERS - M.PHILL	OTHERS - M.PHILL	OTHERS - MATHS	2010	OTHERS - STXAVIERS COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	80	DISTINCTION	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
THAMIRABHARANI ENGINEERING COLLEGE	ASSISTANT PROFESSOR	15-03-2013	15-12-2015	2	9	1
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	08-11-2022	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 the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

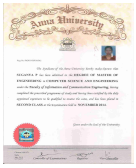
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECH.-INFORMATION TECHNOLOGY
Name of the faculty member	MRS. SUGANYA P
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	8/23 DHANALAKSHMI NAGAR REDDIYARPATTI
Line 2	627007
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9095327125
Email	SUGANYA021186@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	EZWPS6606D
Passport Number	
Aadhar Number	950299673020
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	9523307
Date of Birth	02-11-1986
Age	38
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.TECH.	INFORMATION TECHNOLOGY (SS)	2009	PSN COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	68	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2014	VINS CHRISTIAN COLLEGE OF ENGINEERING	ANNA UNIVERSITY	75	SECOND CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	03-02-2023	04-06-2024	1	4	2
			Total	1	4	4

V. Industrial Experience :

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

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

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECH.-INFORMATION TECHNOLOGY
Name of the faculty member	MS. MUTHULAKSHMI M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	8/127 GANDHI COLONY STREET
Line 2	VISWANATHAPERI-627757
District	TENKASI
Telephone number	-
Mobile number	+91 - 8220094892
Email	MUTHU2291996@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	EYWPM7758D
Passport Number	
Aadhar Number	965616643342
Faculty code given by C.O.E.	9523291
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	22-09-1996
Age	28
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	COMPUTER SCIENCE AND ENGINEERING	2018	PSN ENGINEERING COLLEGE	ANNA UNIVERSITY	6.27	SECOND CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2020	THIAGARAJAR COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	7.96	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

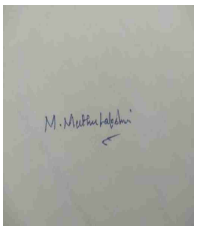
Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	10-05-2022	04-06-2024	2	0	26
			Total	2	0	26

V. Industrial Experience :

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

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

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

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

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	MASTER OF BUSINESS ADMINISTRATION
Name of the Degree & Course	M.B.A.-MASTER 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	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.A.	ENGLISH	2020	OTHERS - EINSTEN ARTS AND SCIENCE COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	55	SECOND CLASS	
P.G.	M.B.A.	MASTER OF BUSINESS ADMINISTRATION	2022	EINSTEIN COLLEGE OF ENGINEERING	ANNA UNIVERSITY	70	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	14-12-2023	04-06-2024	0	5	22
			Total	0	5	24

V. Industrial Experience :

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

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

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.E.-ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the faculty member	MRS. NIRANJANADEVI V
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3/46,NORTH STREET,PALKULAM,TIRUKALUR POST
Line 2	TUTICORIN,628612
District	THOOTHUKUDI
Telephone number	-
Mobile number	+91 - 9940666008
Email	NIRANJANA68@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BBTPN0007M
Passport Number	
Aadhar Number	453849435145
Faculty code given by C.O.E.	9523129
Faculty code given by A.I.C.T.E.	
Date of Birth	15-07-1989
Age	35
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2012	JAYARAJ ANNAPACKIAM CSI COLLEGE OF ENGINEERING	ANNA UNIVERSITY	7.98	FIRST CLASS	
P.G.	M.E.	APPLIED ELECTRONICS	2016	SCAD COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.8	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	29-06-2016	04-06-2024	7	11	6
			Total	7	11	11

V. Industrial Experience :

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

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

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	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	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	OTHERS - BTECH	OTHERS - INFORMATION AND COMMUNICATION TECHNOLOGIES	2013	OTHERS - MS UNIVERSITY	MANOMANIAM SUNDARNAR UNIVERSITY	8.75	DISTINCTION	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2016	SCAD COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	8.45	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

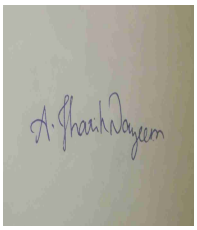
Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	14-06-2019	04-06-2024	4	11	21
			Total	4	11	26

V. Industrial Experience :	

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

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

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

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

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MRS. ARUL SELVI K
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	M 121,POTHIGAI NAGAR,PERUMALPURAM
Line 2	PALAYAMKOTTAI,627007
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9488657514
Email	PRICIPALPSNEC@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BHIPA8206J
Passport Number	
Aadhar Number	862796814085
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	27-04-1990
Age	34
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	COMPUTER SCIENCE AND ENGINEERING	2011	SCAD COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	76	FIRST CLASS	
P.G.	M.TECH.	OTHERS - MTECH IN NETWORK ENGINEERING	2013	KALASALINGAM INSTITUTE OF TECHNOLOGY	OTHERS - KALASALINGAM UNIVERSITY	78	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	19-10-2022	04-06-2024	1	7	17
			Total	1	7	20

V. Industrial Experience :

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

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

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	AUTOMOBILE ENGINEERING
Name of the Degree & Course	B.E.-AUTOMOBILE ENGINEERING
Name of the faculty member	MR. MANOJKUMAR K
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	2/99,COLONY STREET,KETCHILAPURAM,KALANKARAIPATTI
Line 2	KAYATHAR-628721
District	THOOTHUKUDI
Telephone number	-
Mobile number	+91 - 8148356032
Email	MANOJKUMARK2812@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	HHBPK9440M
Passport Number	
Aadhar Number	855515529941
Faculty code given by C.O.E.	9523274
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	28-12-1994
Age	30
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	2017	SALEM COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.14	FIRST CLASS	
P.G.	M.E.	AUTOMOBILE ENGINEERING	2019	PSN ENGINEERING COLLEGE	ANNA UNIVERSITY	7.32	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	13-03-2021	04-06-2024	3	2	23
			Total	3	2	24

V. Industrial Experience :

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

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

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECH.-INFORMATION TECHNOLOGY
Name of the faculty member	MRS. PETCHITHAI M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	THACHAMOZHI COLONY
Line 2	SATHANKULAM
District	THOOTHUKUDI
Telephone number	-
Mobile number	+91 - 8883270892
Email	PETCHITHAI10@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	FXRPP3540S
Passport Number	
Aadhar Number	366463072729
Faculty code given by C.O.E.	0
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	10-04-1996
Age	28
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	COMPUTER SCIENCE AND ENGINEERING	2018	PSN ENGINEERING COLLEGE	ANNA UNIVERSITY	6.65	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING(WITH SPECIALIZATION IN NETWORKS)	2020	PSN ENGINEERING COLLEGE	ANNA UNIVERSITY	8.7	DISTINCTION	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	17-08-2022	04-06-2024	1	9	19
			Total	1	9	23

V. Industrial Experience :	

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

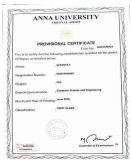
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

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

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MS. SARANYA T
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	17A, KRISHNAN KOVIL STREET KRISHNAPURAM 5TH WARD
Line 2	KADAYANALLUR TK 627751
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9843487628
Email	SARANYAMAGESH95@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	GDKPS3854M
Passport Number	
Aadhar Number	898329637141
Faculty code given by C.O.E.	9523221
Faculty code given by A.I.C.T.E.	
Date of Birth	27-01-1995
Age	29
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	COMPUTER SCIENCE AND ENGINEERING	2016	P S R ENGINEERING COLLEGE (AUTONOMOUS)	ANNA UNIVERSITY	80	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2018	S VEERASAMY CHETTIAR COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	87	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	03-06-2019	04-06-2024	5	0	2
			Total	5	0	2

V. Industrial Experience :

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

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

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	AUTOMOBILE ENGINEERING
Name of the Degree & Course	B.E.-AUTOMOBILE ENGINEERING
Name of the faculty member	MR. 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 : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	1995	OTHERS - SATYABAMA ENGINEERING COLLEGE	UNIVERSITY OF MADRAS	60	SECOND CLASS	
P.G.	M.E.	MANUFACTURING ENGINEERING	2014	SARDAR RAJA COLLEGE OF ENGINEERING	ANNA UNIVERSITY	6.87	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	22-12-2022	04-06-2024	1	5	14
OTHERS - THANGAPAZHAM POLYTECHNIC COLLEGE	OTHERS - LECTURER	08-04-2014	29-07-2016	2	3	22
OTHERS - S VEERASAMY CHETTIAR POLYTECHNIC COLLEGE	OTHERS - LECTURER	03-01-2011	31-12-2012	1	11	29
			Total	5	9	9

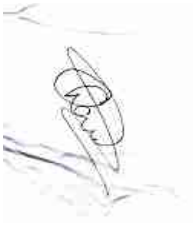
V. Industrial Experience :	

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

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

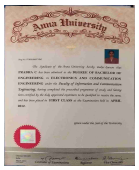
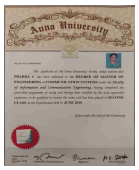
AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)

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



Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	B.E.-GENERAL 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 : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2012	SUN COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	8.09	FIRST CLASS	
P.G.	M.E.	COMMUNICATION SYSTEMS	2018	INFANT JESUS COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.88	SECOND CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

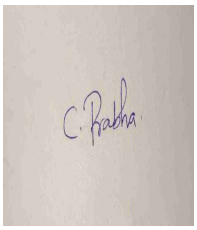
Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	08-04-2024	05-06-2024	0	1	28
			Total	0	1	28

V. Industrial Experience :

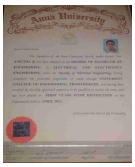
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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

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

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

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	M.E.-VLSI DESIGN
Name of the faculty member	MRS. AMUTHA R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	PLOT45,LAKSHMI BHAVANAM,VGP GABRIEL NAGAR,PUDUKULAM
Line 2	KONGADAMPARAI POST-627007
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9894225079
Email	AMUTHAKRISHNA8@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BTTPA7502A
Passport Number	
Aadhar Number	626875881141
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	22-03-1992
Age	32
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	ELECTRICAL AND ELECTRONICS ENGINEERING	2013	UNIVERSITY VOC COLLEGE OF ENGINEERING TUTICORIN	ANNA UNIVERSITY	8.85	DISTINCTION	
P.G.	M.E.	VLSI DESIGN	2021	PSN ENGINEERING COLLEGE	ANNA UNIVERSITY	8.34	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	29-11-2022	04-06-2024	1	6	6
			Total	1	6	9

V. Industrial Experience :

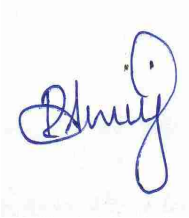
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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

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

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

Signature of the Faculty :



Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	M.E.-VLSI 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 completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2016	PSN INSTITUTE OF TECHNOLOGY AND SCIENCE	ANNA UNIVERSITY	7.37	FIRST CLASS	
P.G.	M.E.	VLSI DESIGN	2018	PSN ENGINEERING COLLEGE	ANNA UNIVERSITY	7.83	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	16-04-2024	04-06-2024	0	1	19
			Total	0	1	19

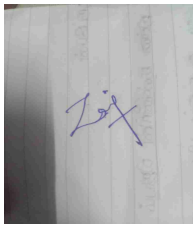
V. Industrial Experience :

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

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

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

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

Signature of the Faculty : 

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.E.-ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the faculty member	MRS. AMARA SELVI V
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	224C POONTHOTA STREET
Line 2	SANKAR NAGAR POST 627357
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 8610245630
Email	VAMARASELVI@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	BWUPV5956K
Passport Number	
Aadhar Number	315246972839
Faculty code given by C.O.E.	9523246
Faculty code given by A.I.C.T.E.	17439031408
Date of Birth	29-06-1990
Age	34
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2012	NATIONAL ENGINEERING COLLEGE (AUTONOMOUS)	ANNA UNIVERSITY	7.2	FIRST CLASS	
P.G.	M.E.	COMMUNICATION SYSTEMS	2014	ANNA UNIVESITY REGIONAL CAMPUS, MADURAI	ANNA UNIVERSITY	7.7	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	20-01-2020	04-06-2024	4	4	16
			Total	4	4	18

V. Industrial Experience :

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

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

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

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.TECH.-AGRICULTURAL ENGINEERING
Name of the faculty member	MRS. LIZZY ARPUTHA DORATHY L
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	204 WATER TANK STREET WEST SIVANTHIPURAM VKPURAM
Line 2	AMBASAMUDRAM 627425
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 8778782677
Email	LIZZYANUGRAHA@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	AMDPL1014L
Passport Number	
Aadhar Number	488836229955
Faculty code given by C.O.E.	9523298
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	27-06-1987
Age	37
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	CIVIL ENGINEERING	2011	PSN ENGINEERING COLLEGE	ANNA UNIVERSITY	78	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2014	ANNA UNIVESITY REGIONAL CAMPUS,TIRUNELVELI	ANNA UNIVERSITY	70	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	30-09-2022	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
			Total	7	6	19

V. Industrial Experience :	

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

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

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

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

Signature of the Faculty :