



**Anna University, Chennai
Vaigai College of Engineering - 9133**

Consolidated_Report

13.faculty

Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	296483
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	DR. MOTHILAL S
Regular Or Adjunct	Regular
Image	
Present Designation	PRINCIPAL
Residential Address Line 1	72/64, A. SENGULAM ROAD, THIRUMANGALAM
Line 2	MADURAI - 625706
District	MADURAI
Telephone number	-
Mobile number	+91 - 9789591442
Email	DOCTORMOTHILAL@GMAIL.COM
Gender	MALE
Community	MBC
PAN Number	AVIPM9932C
Passport Number	
Faculty code given by C.O.E.	9133250
Faculty code given by A.I.C.T.E.	1-11051240647
Date of Birth	30-05-1971
Age	53
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	1998	THIAGARAJAR COLLEGE OF ENGINEERING (AUTONOMOUS)	MADURAI KAMARAJ UNIVERSITY	62	FIRST CLASS	
P.G.	M.E.	PRODUCTION ENGINEERING	1999	THIAGARAJAR COLLEGE OF ENGINEERING (AUTONOMOUS)	MADURAI KAMARAJ UNIVERSITY	64	FIRST CLASS	
PH.D.	PH.D.	MECHANICAL ENGINEERING	2012	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	A STUDY ON SUCCESS AND PERFORMANCE OF INDIAN THIRD PARTY LOGISTICS 3PL INDUSTRY
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
ADHIPARASAKTHI ENGINEERING COLLEGE	PROFESSOR	27-12-2020	28-10-2024	3	10	2
SETHU INSTITUTE OF TECHNOLOGY (AUTONOMOUS)	OTHERS - LECTURER	21-07-2006	30-06-2007	0	11	11
SETHU INSTITUTE OF TECHNOLOGY (AUTONOMOUS)	PROFESSOR	08-03-2012	23-11-2020	8	8	16
VAIGAI COLLEGE OF ENGINEERING	PRINCIPAL	04-11-2024	04-12-2024	0	1	1
BHARATH NIKETAN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	03-01-2000	14-07-2006	6	6	12
SETHU INSTITUTE OF TECHNOLOGY (AUTONOMOUS)	OTHERS - SENIOR LECTURER	01-07-2007	31-12-2007	0	5	31
SETHU INSTITUTE OF TECHNOLOGY (AUTONOMOUS)	ASSOCIATE PROFESSOR	01-01-2011	07-03-2012	1	2	7
SETHU INSTITUTE OF TECHNOLOGY (AUTONOMOUS)	ASSISTANT PROFESSOR	01-01-2008	31-12-2010	2	11	31
Total				24	9	28

V. Industrial Experience :

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

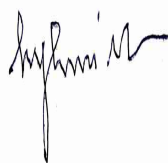
VI. C.O.E. Appointment Experience :

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

Signature of the Faculty :



Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	289601
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. SIVARANJANI R
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	PLOT NO 341/1, KK NAGAR, MADUARI
Line 2	MADURAI - 625020
District	MADURAI
Telephone number	-
Mobile number	+91 - 9629389872
Email	BHARATHI.SIVARANJANI@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BXYP5875D
Passport Number	
Faculty code given by C.O.E.	9133183
Faculty code given by A.I.C.T.E.	1-10534228911
Date of Birth	28-06-1980
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.	ELECTRONICS AND COMMUNICATION ENGINEERING	2001	GOVERNMENT COLLEGE OF ENGINEERING TIRUNELVELI	MANOMANIAM SUNDARNAR UNIVERSITY	76.5	DISTINCTION	
P.G.	M.E.	COMMUNICATION SYSTEMS	2005	THIAGARAJAR COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	8.96	DISTINCTION	
PH.D.	PH.D.	OTHERS - IMAGE PROCESSING	2020	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

DEVELOPMENT OF AUTOMATIC TARGET CLASSIFICATION ALGORITHMS FOR SAR IMAGERY

III. Faculty in which Ph.D. was awarded

FACULTY OF INFORMATION AND COMMUNICATION ENGINEERING

IV. Academic Experience :

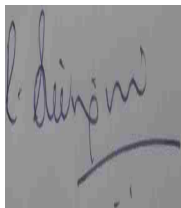
(Start from the Current working Experience) *

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
VAIGAI COLLEGE OF ENGINEERING	PROFESSOR	25-08-2021	13-11-2024	3	2	20
SETHU INSTITUTE OF TECHNOLOGY (AUTONOMOUS)	OTHERS - LECTURER	03-07-2001	30-06-2006	4	11	29
SETHU INSTITUTE OF TECHNOLOGY (AUTONOMOUS)	OTHERS - ASSISTANT PROFESSOR SENIOR GRADE	01-07-2010	31-12-2010	0	5	31
SETHU INSTITUTE OF TECHNOLOGY (AUTONOMOUS)	OTHERS - SENIOR LECTURER	01-07-2006	31-12-2007	1	5	31
SETHU INSTITUTE OF TECHNOLOGY (AUTONOMOUS)	ASSOCIATE PROFESSOR	01-01-2011	08-09-2020	9	8	8
SETHU INSTITUTE OF TECHNOLOGY (AUTONOMOUS)	ASSISTANT PROFESSOR	01-01-2008	30-06-2010	2	5	31
Total				22	5	3

V. Industrial Experience :							
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Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

VI. C.O.E. Appointment Experience :				
Capacity at which service is extended for the conduct of Exmination during the last year				
AUR (No. of 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	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	291221
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-ENGLISH
Name of the faculty member	DR. SUJATHA B
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	9/6/24, ADHIYAMAN 2ND STREET, VISWANATHAPURAM
Line 2	MADURAI - 625014
District	MADURAI
Telephone number	-
Mobile number	+91 - 8300011534
Email	GANESHANSUJATHA@GMAIL.COM
Gender	FEMALE
Community	OC
PAN Number	GFQPS0447A
Passport Number	
Faculty code given by C.O.E.	9120051
Faculty code given by A.I.C.T.E.	1-7437775833
Date of Birth	17-01-1975
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.A.	ENGLISH	1995	OTHERS - MANNAR THIRUMALAI NAYAKAR COLLEGE	MADURAI KAMARAJ UNIVERSITY	58	SECOND CLASS	
P.G.	OTHERS - M.A	OTHERS - ENGLISH	1997	OTHERS - THE MADURA COLLEGE	MADURAI KAMARAJ UNIVERSITY	61	FIRST CLASS	
PH.D.	PH.D.	OTHERS - ENGLISH	2020	OTHERS - MADURAI KAMARAJ UNIVERSITY	MADURAI KAMARAJ UNIVERSITY	Y		
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - ENGLISH	2009	OTHERS - MADURAI KAMARAJ UNIVERSITY	MADURAI KAMARAJ UNIVERSITY	58	SECOND CLASS	

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

II. Title of Ph.D. Thesis	PSYCHOLOGICAL EXPLORATION OF WOMEN CHARACTERS IN SELECT PLAYS OF GIRISH KARNAD
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
LATHA MATHAVAN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	24-09-2007	05-10-2012	5	0	12
VAIGAI COLLEGE OF ENGINEERING	PROFESSOR	08-07-2019	13-11-2024	5	4	6
PANDIAN SARASWATHI YADAV ENGINEERING COLLEGE	ASSISTANT PROFESSOR	03-12-2012	20-03-2019	6	3	18
Total				16	8	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 :

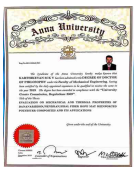
Capacity at which service is extended for the conduct of Exmination during the last year

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

Signature of the Faculty :

Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	285033
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	DR. KARTHIKEYAN M K V
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	27/1 MARI BHAVANAM INDRANI NAGAR FIRST STREET MUDAKKU SALAI
Line 2	MADURAI 625016
District	MADURAI
Telephone number	-
Mobile number	+91 - 9842635039
Email	MKVKARTHIK@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	ASOPK5386P
Passport Number	
Faculty code given by C.O.E.	9133181
Faculty code given by A.I.C.T.E.	1-10534228954
Date of Birth	07-07-1977
Age	47
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	2000	K.L.N.COLLEGE OF ENGINEERING (AUTONOMOUS)	MADURAI KAMARAJ UNIVERSITY	60	FIRST CLASS	
P.G.	M.E.	MANUFACTURING ENGINEERING	2008	K L N COLLEGE OF INFORMATION TECHNOLOGY	ANNA UNIVERSITY	75	DISTINCTION	
PH.D.	PH.D.	MECHANICAL ENGINEERING	2019	K L N COLLEGE OF INFORMATION TECHNOLOGY	ANNA UNIVERSITY	Y		

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I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis	EVALUATION ON MECHANICAL AND THERMAL PROPERTIES OF BANANARIBBON NENDRAN SISAL FIBER ROPE MAT REINFORCED POLYESTER COMPOSITES AND ITS APPLICATIONS
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
K L N COLLEGE OF INFORMATION TECHNOLOGY	ASSOCIATE PROFESSOR	28-07-2004	31-10-2020	16	3	4
VAIGAI COLLEGE OF ENGINEERING	PROFESSOR	18-08-2021	11-11-2024	3	2	25
Total				19	5	1

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
RAMES AUTO MOBILES	SERVICE ENGINEER	AUTO MOBILES SERVICE	08-02-2003	28-02-2004	1	0	20
Total					1	0	20

VI. C.O.E. Appointment Experience :

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

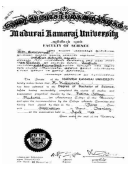
AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days) 3	Central Evaluation (No. of scripts Evaluated) 400	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of my knowledge.

Signature of the Faculty :



Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	291466
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-CHEMISTRY
Name of the faculty member	DR. KALAIVANI R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	5/19, 3RD CROSS STREET, ANJAL NAGAR
Line 2	MADURAI - 625018
District	MADURAI
Telephone number	-
Mobile number	+91 - 8300179305
Email	KALAIVANIRJDR@GMAIL.COM
Gender	FEMALE
Community	MBC
PAN Number	AXDPK9050A
Passport Number	
Faculty code given by C.O.E.	9133218
Faculty code given by A.I.C.T.E.	1-43361743568
Date of Birth	21-04-1977
Age	47
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.SC.	OTHERS - CHEMISTRY	1999	OTHERS - FATIMA COLLEGE	MADURAI KAMARAJ UNIVERSITY	76	DISTINCTION	
P.G.	M.SC.	OTHERS - CHEMISTRY	2001	OTHERS - THE MADURA COLLEGE	MADURAI KAMARAJ UNIVERSITY	68.8	FIRST CLASS	
PH.D.	PH.D.	CHEMISTRY	2015	OTHERS - MANONMANIAM SUNDARANAR UNIVERSITY	MANOMANIAM SUNDARANAR UNIVERSITY	Y		
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - CHEMISTRY	2006	OTHERS - BHARATHI DASAN UNIVERSITY	BHARATHI DASAN UNIVERSITY	76	SECOND CLASS	

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I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION Score : File :	
II. Title of Ph.D. Thesis	INHIBITION OF CORROSION OF ALUMINIUM BY POLYMERS
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
N.P.R COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ASSOCIATE PROFESSOR	20-07-2022	30-04-2023	0	9	12
VAIGAI COLLEGE OF ENGINEERING	ASSOCIATE PROFESSOR	15-09-2023	13-11-2024	1	1	29
OTHERS - KALASALINGM UNIVERSITY	ASSISTANT PROFESSOR	15-06-2008	09-09-2014	6	2	25
AAA COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSOCIATE PROFESSOR	10-09-2014	31-12-2019	5	3	21
OTHERS - MANKAYAR GARASI COLLEGE OF ARTS AND SCIENCE FOR WOMEN	OTHERS - HEAD OF THE DEPARTMENT	02-06-2020	01-11-2021	1	4	30
OTHERS - THE MADURA COLLEGE	ASSISTANT PROFESSOR	02-02-2004	31-05-2008	4	3	28
Total				19	2	26

V. Industrial Experience :

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

VI. C.O.E. Appointment Experience :

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

AUR (No. of days) 6	Squad Member (No. of days)	External Examiner (Practical) (No. of days) 3	Central Evaluation (No. of scripts Evaluated) 150	Re-Evaluation (No. of scripts Evaluated) 20
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It is certified that all the information provided are true to the best of my knowledge.

Signature of the Faculty :



Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	302192
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-MATHEMATICS
Name of the faculty member	MRS. AMMAKANNU G
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	1/217, KALAI NAGAR 6TH STREET, THANAKANKULAM
Line 2	MADURAI - 625006
District	MADURAI
Telephone number	0452 - 2911009
Mobile number	+91 - 7639185732
Email	AMMAKANNU1973@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	AOVPA8259A
Passport Number	
Faculty code given by C.O.E.	9133252
Faculty code given by A.I.C.T.E.	1-3765456374
Date of Birth	15-05-1973
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.SC.	OTHERS - MATHEMATICS	1993	OTHERS - MANNAR THIRUMALAI NAYAKAR COLLEGE	MADURAI KAMARAJ UNIVERSITY	66	FIRST CLASS	
P.G.	M.SC.	OTHERS - MATHEMATICS	2002	OTHERS - MANNAR THIRUMALAI NAYAKAR COLLEGE	MADURAI KAMARAJ UNIVERSITY	67	FIRST CLASS	
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - MATHEMATICS	2008	OTHERS - MADURAI KAMARAJ UNIVERSITY	MADURAI KAMARAJ UNIVERSITY	61	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
VICKRAM COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	23-03-2005	04-06-2009	4	2	13
SETHU INSTITUTE OF TECHNOLOGY (AUTONOMOUS)	ASSISTANT PROFESSOR	14-06-2023	27-11-2023	0	5	14
OTHERS - KALASALINGAM UNIVERSITY	ASSISTANT PROFESSOR	12-06-2017	17-05-2021	3	11	6
ST. MICHAEL COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	10-08-2009	17-05-2017	7	9	8
VAIGAI COLLEGE OF ENGINEERING	ASSOCIATE PROFESSOR	04-11-2024	30-01-2025	0	2	26
Total				16	7	11

V. Industrial Experience :							
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Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

VI. C.O.E. Appointment Experience :				
Capacity at which service is extended for the conduct of Exmination during the last year				
AUR (No. of 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	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	287946
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-PHYSICS
Name of the faculty member	DR. MAHENDRAN R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	NO 2, MALAR ILLAM JAMPUROPURAM 2ND STREET
Line 2	GORIPALAYAM, MADURAI - 625002
District	MADURAI
Telephone number	0425 - 2911009
Mobile number	+91 - 9994904601
Email	MAHENDRANASPPHY@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	BAWPM4871L
Passport Number	
Faculty code given by C.O.E.	9133191
Faculty code given by A.I.C.T.E.	1-11001356871
Date of Birth	20-08-1981
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	2001	OTHERS - DAVANGA ARTS COLLEGE	MADURAI KAMARAJ UNIVERSITY	81.4	FIRST CLASS	
P.G.	M.TECH.	OTHERS - MATERIAL SCIENCE	2007	NATIONAL INSTITUTE OF TECHNOLOGY, TIRUCHIRAPPALLI	NATIONAL INSTITUTE OF TECHNOLOGY, TIRUCHIRAPPALLI	8.52	FIRST CLASS	
P.G.	M.SC.	OTHERS - PHYSICS	2003	OTHERS - VHNSN COLLEGE	MADURAI KAMARAJ UNIVERSITY	71.6	FIRST CLASS	
PH.D.	PH.D.	MATERIAL SCIENCE AND ENGINEERING	2018	NATIONAL INSTITUTE OF TECHNOLOGY, TIRUCHIRAPPALLI	NATIONAL INSTITUTE OF TECHNOLOGY, TIRUCHIRAPPALLI	Y		

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

PHASE TRANSFORMATION PHASE STABILITY AND CRYSTALLIZATION KINETICS OF RARE EARTH GD3 AND SM3 DOPED ZIRCONIA

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
VAIGAI COLLEGE OF ENGINEERING	ASSOCIATE PROFESSOR	12-01-2022	04-12-2024	2	10	24
NATIONAL INSTITUTE OF TECHNOLOGY, TIRUCHIRAPPALLI	OTHERS - SENIOR RESEARCH FELLOW	07-11-2012	07-11-2016	4	0	1
NATIONAL INSTITUTE OF TECHNOLOGY, TIRUCHIRAPPALLI	OTHERS - GUEST LECTURE	01-07-2019	31-05-2021	1	10	31
Total				8	9	1

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
AFCON	QUALITY CONTROLE	INSPECTION	14-08-2008	28-09-2012	4	1	15
Total					4	1	15

VI. C.O.E. Appointment Experience :

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

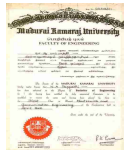
AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of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

Signature of the Faculty :



Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	259526
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. PAPPATHI N A
Regular Or Adjunct	Regular
Image	 
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	A1 BLOCK, HARINI APARTMENT INDIRA AVENUE
Line 2	THIRUPPALAI, MADURAI - 625014
District	MADURAI
Telephone number	0452 - 2911009
Mobile number	+91 - 8012913285
Email	PAPPATHISHAYAANOFFICIAL@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	AVRPP2389P
Passport Number	
Faculty code given by C.O.E.	9133199
Faculty code given by A.I.C.T.E.	1-3568538246
Date of Birth	07-08-1981
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.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2002	PSNA COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	MADURAI KAMARAJ UNIVERSITY	72	FIRST CLASS	
P.G.	M.E.	EMBEDDED SYSTEM TECHNOLOGIES	2010	OTHERS - RAJA COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA 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
VICKRAM COLLEGE OF ENGINEERING	OTHERS - SENIOR LECTURER	13-08-2007	30-09-2008	1	1	19
ST. MICHAEL COLLEGE OF ENGINEERING AND TECHNOLOGY	OTHERS - LECTURER	13-06-2002	31-05-2005	2	11	18
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	03-07-2017	28-10-2024	7	3	26
N.P.R COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ASSISTANT PROFESSOR	02-07-2010	24-04-2017	6	9	23
Total				18	2	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 Examination during the last year**

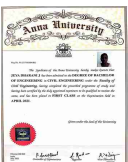
AUR (No. of days) 13	Squad Member (No. of days)	External Examiner (Practical) (No. of days) 3	Central Evaluation (No. of scripts Evaluated) 250	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of my knowledge.

Signature of the Faculty :



Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	258975
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.E.-CIVIL ENGINEERING
Name of the faculty member	MS. JEYA DHARANI J
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	22/4, NAINAR OORANI STREET, SANTHAIPETTAI
Line 2	MELUR, MADURAI - 625106
District	MADURAI
Telephone number	-
Mobile number	+91 - 9655397838
Email	DHARANIVIDYUT333@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	CXDPJ8412K
Passport Number	
Faculty code given by C.O.E.	9133242
Faculty code given by A.I.C.T.E.	1-44717977774
Date of Birth	30-07-2000
Age	24
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	CIVIL ENGINEERING	2021	VICKRAM COLLEGE OF ENGINEERING	ANNA UNIVERSITY	82	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2023	N.P.R COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	90	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
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	01-08-2024	28-10-2024	0	2	28
Total				0	2	29

V. Industrial Experience :

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

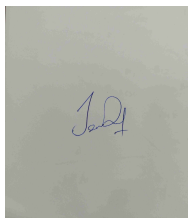
VI. C.O.E. Appointment Experience :

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

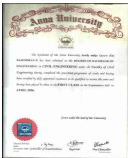
AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of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

Signature of the Faculty :

A rectangular box containing a handwritten signature in blue ink. The signature is stylized and appears to be 'J. D.' or similar. The background of the box is a light gray, and the entire box is set within a larger white rectangular frame.

Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	259272
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.E.-CIVIL ENGINEERING
Name of the faculty member	MR. RAJENDRAN R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	12B, THIRUMALAI COLONY, 7TH STREET, P P CHAVADI
Line 2	MADURAI - 625016
District	MADURAI
Telephone number	-
Mobile number	+91 - 9894299928
Email	RAJENDRANCIVIL88@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BGPPR9701K
Passport Number	
Faculty code given by C.O.E.	9133241
Faculty code given by A.I.C.T.E.	1-44719039064
Date of Birth	08-08-1984
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	2006	OTHERS - RAJA COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	65	FIRST CLASS	
P.G.	M.E.	SOIL MECHANICS AND FOUNDATION ENGINEERING	2015	OTHERS - RAJA COLLEGE OF ENGINEERING	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
LATHA MATHAVAN ENGINEERING COLLEGE	OTHERS - LECTURER	26-06-2012	31-05-2013	0	11	5
SRI VIDYA COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	06-11-2017	03-07-2018	0	7	28
R.V.S. COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	05-02-2016	29-04-2017	1	2	24
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	01-08-2024	28-10-2024	0	2	28
Total				3	0	26

V. Industrial Experience :

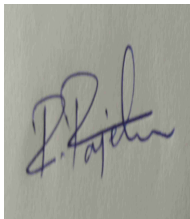
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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

Signature of the Faculty :



Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	259377
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.E.-CIVIL ENGINEERING
Name of the faculty member	MR. MUTHANAND P
Regular Or Adjunct	Regular
Image	 
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	6/4, MANORANJITHAM STREET, I O C NAGAR
Line 2	VILANGUDI, MADURAI - 625018
District	MADURAI
Telephone number	-
Mobile number	+91 - 9894845019
Email	MUTHANANDPANDIAN@GMAIL.COM
Gender	MALE
Community	MBC
PAN Number	AOLPM7242M
Passport Number	
Faculty code given by C.O.E.	9133209
Faculty code given by A.I.C.T.E.	1-7391874701
Date of Birth	26-03-1982
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.	CIVIL ENGINEERING	2008	COIMBATORE INSTITUTE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	6.01	SECOND CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2011	MEPCO SCHLENK ENGINEERING COLLEGE (AUTONOMOUS)	ANNA UNIVERSITY	7.89	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
PSNA COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ASSISTANT PROFESSOR	30-06-2016	09-09-2022	6	2	10
SETHU INSTITUTE OF TECHNOLOGY (AUTONOMOUS)	ASSISTANT PROFESSOR	28-06-2011	31-05-2016	4	11	3
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	24-04-2023	28-10-2024	1	6	5
SBM COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	12-09-2022	21-04-2023	0	7	10
Total				13	2	1

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
AROGAN CONSULTANCY AND PROPERTIES DEVELOPER PVT LTD	ENGINEER QUALITY AUDIT	QUALITY AUDIT	27-11-2008	26-08-2009	0	8	30
Total					0	8	3

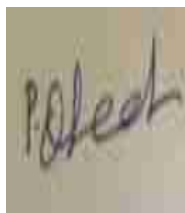
VI. C.O.E. Appointment Experience :

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

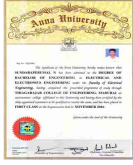
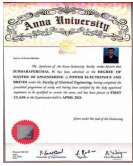
AUR (No. of days) 7	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of my knowledge.

Signature of the Faculty :



Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	260112
Name of the Department	ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the Degree & Course	B.E.-ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the faculty member	MR. SUNDARAPERUMAL N
Regular Or Adjunct	Regular
Image	 
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3/228, NAICKAN PATTI, ALAGAR KOIL POST
Line 2	MADURAI - 625301
District	MADURAI
Telephone number	-
Mobile number	+91 - 9789250017
Email	NSPERUMAL89@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	EXWPS7580A
Passport Number	
Faculty code given by C.O.E.	9133192
Faculty code given by A.I.C.T.E.	1-11333212228
Date of Birth	20-05-1989
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.	ELECTRICAL AND ELECTRONICS ENGINEERING	2016	THIAGARAJAR COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	7.65	FIRST CLASS	
P.G.	M.E.	POWER ELECTRONICS AND DRIVES	2021	PANDIAN SARASWATHI YADAV ENGINEERING COLLEGE	ANNA UNIVERSITY	8.94	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
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	27-05-2021	28-10-2024	3	5	2
Total				3	5	4

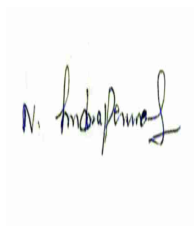
V. Industrial Experience :

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

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

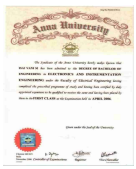
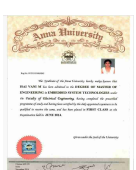
AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of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

A handwritten signature in blue ink, appearing to read "N. Indupama", is centered within a light gray rectangular box.

Signature of the Faculty :

Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	260231
Name of the Department	ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the Degree & Course	B.E.-ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the faculty member	DR. ISAI VANI M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	2/456/1, PANDIAN STREET, GOMATHIPURAM 6TH MAIN ROAD
Line 2	MADURAI - 625020
District	MADURAI
Telephone number	-
Mobile number	+91 - 7708449675
Email	ISAINEC06@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	CMVPT3919C
Passport Number	
Faculty code given by C.O.E.	9133263
Faculty code given by A.I.C.T.E.	1-44484089884
Date of Birth	03-04-1985
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 INSTRUMENTATION ENGINEERING	2006	NATIONAL ENGINEERING COLLEGE (AUTONOMOUS)	ANNA UNIVERSITY	75	FIRST CLASS	
P.G.	M.E.	EMBEDDED SYSTEM TECHNOLOGIES	2014	OTHERS - RAJA COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	82	FIRST CLASS	
PH.D.	PH.D.	ELECTRICAL ENGINEERING	2022	ANNA UNIVERSITY REGIONAL CAMPUS, MADURAI	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

PERFORMANCE ENHANCEMENT OF MULTIPROCESSOR SYSTEM ON CHIP FOR DISTANCE RELAY

III. Faculty in which Ph.D. was awarded

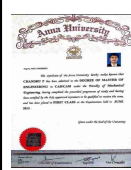
FACULTY OF ELECTRICAL ENGINEERING

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	19-06-2023	28-10-2024	1	4	10
VICKRAM COLLEGE OF ENGINEERING	OTHERS - LECTURER	04-06-2007	05-10-2007	0	4	2
Total				1	8	16

V. Industrial Experience :							
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
VI. C.O.E. Appointment Experience : Capacity at which service is extended for the conduct of Exmination during the last year							
AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)			
It is certified that all the information provided are true to the best of my knowledge.							
							
Signature of the Faculty :							

Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	260964
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-GENERAL ENGINEERING
Name of the faculty member	MR. CHANDRU P
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3/353, AYYANAN NAGAR, Y. OTHAKADAI
Line 2	MADURAI - 625107
District	MADURAI
Telephone number	-
Mobile number	+91 - 9791256422
Email	CHANDRU.RUTHUNSHA@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AVJPC7500K
Passport Number	
Faculty code given by C.O.E.	9133244
Faculty code given by A.I.C.T.E.	1-7437504135
Date of Birth	09-12-1990
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.	AERONAUTICAL ENGINEERING	2013	MOUNT ZION COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.64	FIRST CLASS	
P.G.	M.E.	CAD/CAM	2015	IMMANUEL ARASAR JJ COLLEGE OF ENGINEERING	ANNA UNIVERSITY	7.94	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
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	20-08-2019	28-11-2024	5	3	9
PANDIAN SARASWATHI YADAV ENGINEERING COLLEGE	ASSISTANT PROFESSOR	16-08-2018	19-08-2019	1	0	4
IMMANUEL ARASAR JJ COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	06-07-2015	10-08-2018	3	1	5
Total				9	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)
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It is certified that all the information provided are true to the best of my knowledge.



Signature of the Faculty :

Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	261778
Name of the Department	ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the Degree & Course	B.E.-ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the faculty member	MS. SONIA C
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3, ARUMUGAM PILLAI STREET, MAIN ROAD
Line 2	MELUR, MADURAI - 625106
District	MADURAI
Telephone number	-
Mobile number	+91 - 8438435192
Email	CSONIA.CHOCKALINGAM@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	DWRPS6767J
Passport Number	
Faculty code given by C.O.E.	9133195
Faculty code given by A.I.C.T.E.	1-2185456380
Date of Birth	09-05-1989
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.	ELECTRICAL AND ELECTRONICS ENGINEERING	2010	OTHERS - RAJA COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	78	DISTINCTION	
P.G.	M.E.	POWER ELECTRONICS AND DRIVES	2013	SUDHARSA N ENGINEERING COLLEGE	ANNA UNIVERSITY	8.56	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
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	14-03-2022	29-10-2024	2	7	16
SETHU INSTITUTE OF TECHNOLOGY (AUTONOMOUS)	ASSISTANT PROFESSOR	05-06-2013	20-11-2021	8	5	16
Total				11	1	3

V. Industrial Experience :

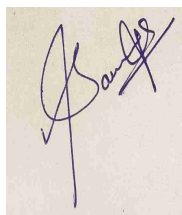
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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)
3		10	300	

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

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

Signature of the Faculty :

Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	261918
Name of the Department	ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the Degree & Course	B.E.-ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the faculty member	MRS. SARANYA V
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	4-1-98A, JEYARAM HOSPITAL ROAD, RAMMUNI NAGAR
Line 2	T. KALLUPATTI, MADURAI - 625702
District	MADURAI
Telephone number	-
Mobile number	+91 - 8098090960
Email	SARANKARTHI20@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	EEYPS0454A
Passport Number	
Faculty code given by C.O.E.	9133208
Faculty code given by A.I.C.T.E.	1-43516614271
Date of Birth	15-11-1992
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	2014	K L N COLLEGE OF INFORMATION TECHNOLOGY	ANNA UNIVERSITY	8.7	DISTINCTION	
P.G.	M.E.	POWER ELECTRONICS AND DRIVES	2016	MEPCO SCHLENK ENGINEERING COLLEGE (AUTONOMOUS)	ANNA UNIVERSITY	9.4	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
M A M COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	24-11-2016	10-05-2018	1	5	17
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	10-02-2023	29-10-2024	1	8	18
Total				3	2	6

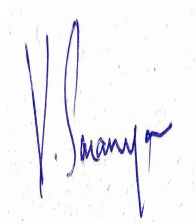
V. Industrial Experience :

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

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

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

**Signature of the Faculty :**

Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	265080
Name of the Department	ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the Degree & Course	B.E.-ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the faculty member	MS. SASIBHARATHI C
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	4/337A, EMD NAGAR, SIKKANDAR CHAVADI
Line 2	MADURAI - 625018
District	MADURAI
Telephone number	-
Mobile number	+91 - 8610027170
Email	C.SASIBHARATHI@GMAIL.COM
Gender	FEMALE
Community	MBC
PAN Number	GLDPS6206L
Passport Number	
Faculty code given by C.O.E.	9133230
Faculty code given by A.I.C.T.E.	1-9466174448
Date of Birth	16-09-1995
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.	ELECTRICAL AND ELECTRONICS ENGINEERING	2017	ULTRA COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	83.1	FIRST CLASS	
P.G.	M.E.	POWER SYSTEMS ENGINEERING	2020	THIAGARAJAR COLLEGE OF ENGINEERING (AUTONOMOUS)	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
SACS M.A.V.M.M. ENGINEERING COLLEGE	ASSISTANT PROFESSOR	16-02-2021	30-06-2022	1	4	13
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	01-02-2024	27-11-2024	0	9	27
Total				2	2	11

V. Industrial Experience :

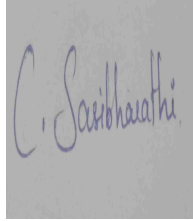
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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

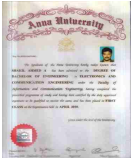
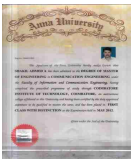
AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of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

Signature of the Faculty :



Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	265271
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. SHAKIL AHMED A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	69, MUNIYANDI KOVIL STREET, VAITHIYANATHAPURAM WEST
Line 2	NEW ELLIS NAGAR, MADURAI - 625016
District	MADURAI
Telephone number	-
Mobile number	+91 - 8248454245
Email	SHAKIL09051988@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	EPMPS4939P
Passport Number	
Faculty code given by C.O.E.	9133214
Faculty code given by A.I.C.T.E.	1-43524799451
Date of Birth	09-05-1988
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.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2010	K L N COLLEGE OF INFORMATION TECHNOLOGY	ANNA UNIVERSITY	78	FIRST CLASS	
P.G.	M.E.	COMMUNICATION ENGINEERING	2012	COIMBATORE INSTITUTE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	8.2	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
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	13-05-2023	04-11-2024	1	5	23
SETHU INSTITUTE OF TECHNOLOGY (AUTONOMOUS)	ASSISTANT PROFESSOR	06-05-2012	12-06-2018	6	1	7
Total				7	6	3

V. Industrial Experience :

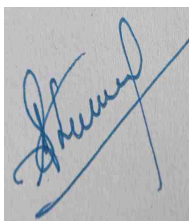
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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) 10	Squad Member (No. of days)	External Examiner (Practical) (No. of days) 2	Central Evaluation (No. of scripts Evaluated) 350	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of my knowledge.

Signature of the Faculty :



Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	265513
Name of the Department	COMPUTER SCIENCE AND ENGINEERING
Name of the Degree & Course	B.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MRS. VIJAYALAKSHMI J
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	292, VOC NAGAR 3RD STREET, P P CHAVADI
Line 2	MADURAI - 625016
District	MADURAI
Telephone number	-
Mobile number	+91 - 8695849143
Email	VIJI3004.J@GMAIL.COM
Gender	FEMALE
Community	MBC
PAN Number	ASWPV3180C
Passport Number	
Faculty code given by C.O.E.	9133234
Faculty code given by A.I.C.T.E.	1-10537041190
Date of Birth	30-04-1987
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.	COMPUTER SCIENCE AND ENGINEERING	2008	KAMARAJ COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	77	DISTINCTION	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2010	OTHERS - RAJA COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA 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
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	25-08-2021	04-11-2024	3	2	11
SREE SASTHA INSTITUTE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	15-06-2011	13-09-2013	2	2	29
OTHERS - RAJA COLLEGE OF ENGINEERING AND TECHNOLOGY	OTHERS - LECTURER	08-08-2008	31-01-2009	0	5	24
FATIMA MICHAEL COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	03-06-2019	31-03-2020	0	9	28
ULTRA COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	01-06-2010	31-05-2011	0	11	30
Total				7	9	6

V. Industrial Experience :

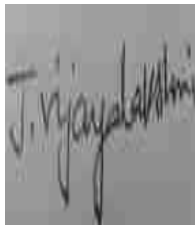
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

VI. C.O.E. Appointment Experience :

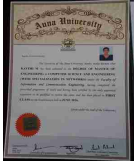
Capacity at which service is extended for the conduct of Exmination during the last year

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days) 6	Central Evaluation (No. of scripts Evaluated) 600	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of my knowledge.

Signature of the Faculty : 

Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	265723
Name of the Department	COMPUTER SCIENCE AND ENGINEERING
Name of the Degree & Course	B.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MRS. KAVERI M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3/545A, RAJEEV STREET, MUNISHWARAR NAGAR,
Line 2	THIRUPPALAI, MADURAI - 625014
District	MADURAI
Telephone number	-
Mobile number	+91 - 7339660350
Email	KAVERIAATHI@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	CSQPK5351N
Passport Number	
Faculty code given by C.O.E.	9133207
Faculty code given by A.I.C.T.E.	1-12617329707
Date of Birth	21-03-1991
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.TECH.	OTHERS - COMPUTER SCIENCE AND ENGINEERING	2013	OTHERS - KALASALINGAM UNIVERSITY	OTHERS - DEEMED UNIVERSITY	73	FIRST CLASS	
P.G.	M.E.	OTHERS - CSE WITH SPECIALIZATION IN NETWORKS	2016	K.L.N.COLLEGE OF ENGINEERING (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
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	15-12-2022	04-11-2024	1	10	21
OTHERS - MADURAI INSTITUTE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	03-07-2017	15-12-2019	2	5	13
Total				4	4	6

V. Industrial Experience :

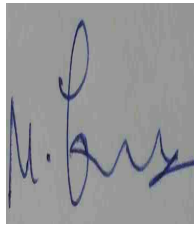
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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

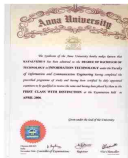
AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days) 6	Central Evaluation (No. of scripts Evaluated) 500	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of my knowledge.

Signature of the Faculty :



Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	265926
Name of the Department	COMPUTER SCIENCE AND ENGINEERING
Name of the Degree & Course	B.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MRS. KAYALVIZHI S
Regular Or Adjunct	Regular
Image	Error: loading ../uploads/
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	2/364C, PAMBA NAGAR 2ND STREET, IYER BUNGALOW
Line 2	MADURAI - 625014
District	MADURAI
Telephone number	-
Mobile number	+91 - 9486144595
Email	KAYALVIZHI.1285@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BBNPK3933P
Passport Number	
Faculty code given by C.O.E.	9133186
Faculty code given by A.I.C.T.E.	1-10534229036
Date of Birth	12-05-1985
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.TECH.	INFORMATION TECHNOLOGY	2006	SETHU INSTITUTE OF TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	77	DISTINCTION	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2008	OTHERS - ARULMIGU KALASALINGAM COLLEGE OF ENGINEERING	ANNA UNIVERSITY	83	DISTINCTION	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	24-09-2021	04-11-2024	3	1	11
LATHA MATHAVAN ENGINEERING COLLEGE	OTHERS - LECTURER	21-07-2008	12-12-2008	0	4	23
OTHERS - KALASALINGAM UNIVERSITY	ASSISTANT PROFESSOR	15-12-2008	15-12-2010	2	0	1
N.P.R COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ASSISTANT PROFESSOR	05-06-2015	23-04-2017	1	10	19
ULTRA COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	05-01-2013	05-05-2015	2	4	1
JAYA COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	02-01-2018	14-07-2021	3	6	13
Total				13	3	10

V. Industrial Experience :

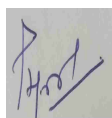
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

VI. C.O.E. Appointment Experience :

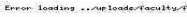
Capacity at which service is extended for the conduct of Examination during the last year

AUR (No. of days) 1	Squad Member (No. of days)	External Examiner (Practical) (No. of days) 5	Central Evaluation (No. of scripts Evaluated) 600	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of my knowledge.



Signature of the Faculty :

Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	267001
Name of the Department	COMPUTER SCIENCE AND ENGINEERING
Name of the Degree & Course	B.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MR. RAMPRASATH N
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	14/26, PONNAGARAM 2ND STREET, HOT WATER CANNEL ROAD
Line 2	MADURAI - 625016
District	MADURAI
Telephone number	-
Mobile number	+91 - 9629236372
Email	RAMPRASATHMESE@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BIAPR6935G
Passport Number	
Faculty code given by C.O.E.	9133223
Faculty code given by A.I.C.T.E.	1-7429831638
Date of Birth	01-06-1993
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.TECH.	INFORMATION TECHNOLOGY	2014	BHARATH NIKETAN ENGINEERING COLLEGE	ANNA UNIVERSITY	8.03	FIRST CLASS	
P.G.	M.E.	SOFTWARE ENGINEERING	2016	BHARATH NIKETAN ENGINEERING COLLEGE	ANNA UNIVERSITY	8.28	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 - MADURAI INSTITUTE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	26-06-2017	20-06-2019	1	11	25
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	25-09-2023	04-11-2024	1	1	10
Total				3	1	6

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
GLENWOOD MICRO SYSTEMS	DATA ANALYST	MEDICAL CODING	18-08-2021	10-09-2022	1	0	24
Total					1	0	24

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

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days) 5	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of my knowledge.



Signature of the Faculty :

Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	258909
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.E.-CIVIL ENGINEERING
Name of the faculty member	MRS. SIVASANGARI G
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	8, CHOKKALINGA NAGAR 2ND STREET, BYE PASS ROAD
Line 2	KALAVASAL, MADURAI - 625016
District	MADURAI
Telephone number	-
Mobile number	+91 - 9095352169
Email	SIVASANGARI11196@GMAIL.COM
Gender	FEMALE
Community	MBC
PAN Number	HNMP88903Q
Passport Number	
Faculty code given by C.O.E.	9133237
Faculty code given by A.I.C.T.E.	1-44718192757
Date of Birth	10-07-1996
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	2017	KALASALINGAM INSTITUTE OF TECHNOLOGY	ANNA UNIVERSITY	70	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2019	GOVERNMENT COLLEGE OF ENGINEERING TIRUNELVELI	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
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	01-07-2024	28-10-2024	0	3	28
Total				0	3	29

V. Industrial Experience :

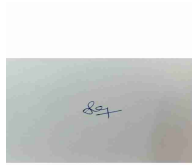
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

VI. C.O.E. Appointment Experience :

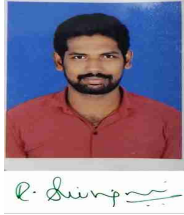
Capacity at which service is extended for the conduct of Examination during the last year

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



Signature of the Faculty :

Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	259847
Name of the Department	ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the Degree & Course	B.E.-ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the faculty member	MR. GIRISH GOWTHAM J
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	67/20, ALAGAR NAGAR 5TH STREET, K PUDUR
Line 2	MADURAI - 625007
District	MADURAI
Telephone number	-
Mobile number	+91 - 8825737656
Email	GIRISHGOWTHAM26@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	AZTPG9297K
Passport Number	
Faculty code given by C.O.E.	9133228
Faculty code given by A.I.C.T.E.	1-10595858066
Date of Birth	26-12-1992
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	2014	ST. XAVIER'S CATHOLIC COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	75.6	FIRST CLASS	
P.G.	M.E.	POWER ELECTRONICS AND DRIVES	2016	GOVERNMENT COLLEGE OF TECHNOLOGY COIMBATORE (AUTONOMOUS)	ANNA UNIVERSITY	86.3	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
PANDIAN SARASWATHI YADAV ENGINEERING COLLEGE	ASSISTANT PROFESSOR	07-10-2021	30-11-2023	2	1	25
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	01-12-2023	28-10-2024	0	10	28
Total				3	0	23

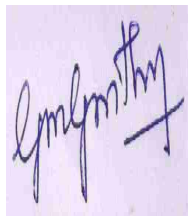
V. Industrial Experience :

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

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

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



Signature of the Faculty :

Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	285162
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.E.-GENERAL ENGINEERING
Name of the faculty member	MRS. DURGA DEVI M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	21/9A, JEGAJEEVAN RAM STREET,
Line 2	KARIAPATTI, VIRUDHUNAGAR - 626106
District	VIRUDHUNAGAR
Telephone number	-
Mobile number	+91 - 9342983491
Email	DURGAGIRISH1326@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	FVTPM2667E
Passport Number	
Faculty code given by C.O.E.	9133267
Faculty code given by A.I.C.T.E.	1-11084888501
Date of Birth	13-05-1996
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.	ELECTRONICS AND COMMUNICATION ENGINEERING	2017	SETHU INSTITUTE OF TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	76	FIRST CLASS	
P.G.	M.E.	COMMUNICATION SYSTEMS	2019	SETHU INSTITUTE OF TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	91.2	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
FATIMA MICHAEL COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	07-10-2021	31-10-2024	3	0	25
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	04-11-2024	28-11-2024	0	0	25
Total				3	1	20

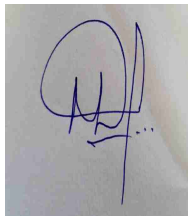
V. Industrial Experience :

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	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	271164
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. DIVYA J
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	24, SHANMUGANATHAPURAM 3RD STREET, ARAPALAYAM
Line 2	MADURAI - 625016
District	MADURAI
Telephone number	-
Mobile number	+91 - 8220690511
Email	DIVYAJEEVARAJAN@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BKGPD0771C
Passport Number	
Faculty code given by C.O.E.	9133157
Faculty code given by A.I.C.T.E.	1-7437503738
Date of Birth	24-12-1988
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.	ELECTRONICS AND COMMUNICATION ENGINEERING	2010	P.T.R. COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	71	FIRST CLASS	
P.G.	M.E.	OTHERS - REMOTE SENSING	2012	PSNA COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	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
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	20-06-2019	05-11-2024	5	4	16
Total				5	4	18

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
WIPRO TECHNOLOGIES	SENIOR PROJECT ENGINEER	DEVELOPER	25-03-2013	04-05-2018	5	1	11
Total					5	1	11

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

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
		7	150	

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



Signature of the Faculty :

Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	271300
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. ARUNKUMAR M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	D.NO 4/193, ROYAL GARDEN 3RD STREET, NARASINGAM
Line 2	MADURAI - 625107
District	MADURAI
Telephone number	-
Mobile number	+91 - 9790355120
Email	ARUN.SRIRAMAR@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BDFPA1008P
Passport Number	
Faculty code given by C.O.E.	9133240
Faculty code given by A.I.C.T.E.	1-2303693862
Date of Birth	10-08-1988
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	2010	SETHU INSTITUTE OF TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	72	FIRST CLASS	
P.G.	M.E.	PRODUCTION ENGINEERING	2014	THIAGARAJAR COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	7.57	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
THENI KAMMAVAR SANGAM COLLEGE OF TECHNOLOGY	ASSISTANT PROFESSOR	16-06-2014	22-12-2020	6	6	7
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	01-08-2024	05-11-2024	0	3	5
Total				6	9	16

V. Industrial Experience :

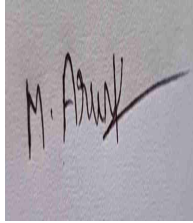
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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

Signature of the Faculty :



Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	268239
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. JOTHILAKSHMI M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	2/82, YATHAVA STREET, KUDIRAIKUTTI,
Line 2	KUSAVANKUNDU, MADURAI - 625022
District	MADURAI
Telephone number	-
Mobile number	+91 - 7845275338
Email	MJOTHILAKSHMIECE@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BIZPJ2010F
Passport Number	
Faculty code given by C.O.E.	9133247
Faculty code given by A.I.C.T.E.	1-44722234844
Date of Birth	09-02-1993
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.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2014	OTHERS - KALASALINGAM UNIVERSITY	OTHERS - DEEMED UNIVERSITY	74	FIRST CLASS	
P.G.	M.E.	COMMUNICATION SYSTEMS	2016	THIAGARAJAR COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	77	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

IV. Academic Experience :

(Start from the Current working Experience) *

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PANDIAN SARASWATHI YADAV ENGINEERING COLLEGE	ASSISTANT PROFESSOR	10-07-2017	13-04-2019	1	9	4
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	07-10-2024	27-11-2024	0	1	21
Total				1	10	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 :

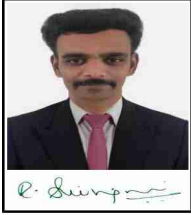
Capacity at which service is extended for the conduct of Examination during the last year

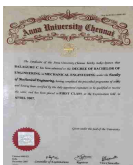
AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of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

A handwritten signature in blue ink, appearing to be 'M. P. A. L.', is written on a light pink background.

Signature of the Faculty :

Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	284697
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. BALAGURU C
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	2/402,PORKALA NAGAR FIRST STREET, TIRUMANGALAM
Line 2	MADURAI-625706
District	MADURAI
Telephone number	-
Mobile number	+91 - 8667212649
Email	BALAGURU.C21@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BBVPB8949J
Passport Number	
Faculty code given by C.O.E.	9133182
Faculty code given by A.I.C.T.E.	1-10534228960
Date of Birth	21-09-1985
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.E.	MECHANICAL ENGINEERING	2007	SACS M.A.V.M. M. ENGINEERING COLLEGE	ANNA UNIVERSITY	69	FIRST CLASS	
P.G.	M.E.	CAD/CAM	2012	SETHU INSTITUTE OF TECHNOLOGY (AUTONOMOUS)	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
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	17-08-2021	11-11-2024	3	2	26
K L N COLLEGE OF INFORMATION TECHNOLOGY	OTHERS - LECTURER	07-02-2008	30-06-2010	2	4	23
K L N COLLEGE OF INFORMATION TECHNOLOGY	ASSISTANT PROFESSOR	01-07-2010	31-10-2020	10	3	31
Total				15	11	24

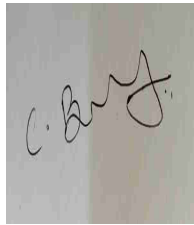
V. Industrial Experience :

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) 2	Central Evaluation (No. of scripts Evaluated) 500	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of my knowledge.



Signature of the Faculty :

Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	284788
Name of the Department	ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the Degree & Course	B.E.-GENERAL ENGINEERING
Name of the faculty member	MR. NAVEEN KUMAR N
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	4/44, SOUTH STREET, KATCHAIKATTI POST
Line 2	T. VADIPATTI TALUK, MADURAI - 625218
District	MADURAI
Telephone number	-
Mobile number	+91 - 9600490972
Email	MITHRANNAVEENM.E@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	BSPPN3249E
Passport Number	
Faculty code given by C.O.E.	9133246
Faculty code given by A.I.C.T.E.	1-44725446634
Date of Birth	27-08-1997
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.	ELECTRIC AL AND ELECTRONICS ENGINEERING	2020	J.P. COLLEGE OF ENGINEERING	ANNA UNIVERSITY	6.33	SECOND CLASS	
P.G.	M.E.	POWER ELECTRONICS AND DRIVES	2024	SBM COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.80	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
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	04-11-2024	28-11-2024	0	0	25
Total				0	0	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 Examination during the last year

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

Signature of the Faculty :

A handwritten signature in black ink, appearing to read "Naveen Singh", is positioned to the right of the text "Signature of the Faculty :". The signature is written in a cursive style with a large initial 'N' and a distinct 'S'.

Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	286136
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	DR. RAMMOHAN S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3/21, KRISHNA PURAM SOUTH 2ND STREET, THIRUPARANKUNDRAM
Line 2	PASUMALAI, MADURAI - 625004
District	MADURAI
Telephone number	-
Mobile number	+91 - 9944415765
Email	RAMMOHANMFG@GMAIL.COM
Gender	MALE
Community	MBC
PAN Number	BDMPR6803G
Passport Number	
Faculty code given by C.O.E.	9133235
Faculty code given by A.I.C.T.E.	1-43380123097
Date of Birth	21-12-1987
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	2011	SACS M.A.V.M. M. ENGINEERING COLLEGE	ANNA UNIVERSITY	66	FIRST CLASS	
P.G.	M.E.	MANUFACTURING ENGINEERING	2016	KAMARAJ COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	7.78	FIRST CLASS	
PH.D.	PH.D.	MECHANICAL ENGINEERING	2023	OTHERS - KALASALINGAM ACADEMIC OF RESEARCH AND EDUCATION	OTHERS - DEEMED 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 ON THE PERFORMANCE OF ABRASIVE WATERJET MACHINING ON ARMOR STEEL

III. Faculty in which Ph.D. was awarded

FACULTY OF MECHANICAL ENGINEERING

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
OTHERS - MADURAI INSTITUTE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	14-07-2016	31-01-2019	2	6	18
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	06-03-2024	12-11-2024	0	8	7
Total				3	2	27

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
AQUA SUB ENGINEERING	GET	CNC PRODUCTION	11-03-2012	30-03-2013	1	0	20
Total					1	0	20

VI. C.O.E. Appointment Experience :

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

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



Signature of the Faculty :

Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	286196
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. MILAN A M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	2/153 PERIYA SOORAKKUNDU MELUR
Line 2	MADURAI 625106
District	MADURAI
Telephone number	-
Mobile number	+91 - 6374986492
Email	MILANDIWAGAR007@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BVNPM8383B
Passport Number	
Faculty code given by C.O.E.	9111136
Faculty code given by A.I.C.T.E.	1-7437504512
Date of Birth	22-01-1993
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.	MECHANICAL ENGINEERING	2014	ANAND INSTITUTE OF HIGHER TECHNOLOGY	ANNA UNIVERSITY	87.31	DISTINCTION	
P.G.	M.E.	ENGINEERING DESIGN	2016	ANNA UNIVERSITY REGIONAL CAMPUS, MADURAI	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
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	08-07-2019	12-11-2024	5	4	5
OTHERS - MADURAI INSTITUTE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	08-07-2016	06-07-2019	2	11	30
Total				8	4	7

V. Industrial Experience :

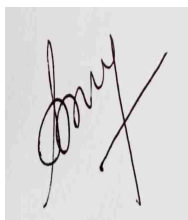
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

VI. C.O.E. Appointment Experience :

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

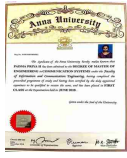
AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days) 2	Central Evaluation (No. of scripts Evaluated) 100	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of my knowledge.

A handwritten signature in black ink, appearing to be 'Jmy', is displayed on a light gray rectangular background.

Signature of the Faculty :

Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	286269
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. PADMA PRIYA H
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	38, HAJEES GARDEN OTHAKADAI
Line 2	MADURAI - 625107
District	MADURAI
Telephone number	-
Mobile number	+91 - 9940989862
Email	PRIYANALLASAMY1418@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	CBPPP2126N
Passport Number	
Faculty code given by C.O.E.	9133236
Faculty code given by A.I.C.T.E.	1-4491431304
Date of Birth	14-05-1992
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.	ELECTRONICS AND COMMUNICATION ENGINEERING	2013	P.S.R.R COLLEGE OF ENGINEERING	ANNA UNIVERSITY	7.16	FIRST CLASS	
P.G.	M.E.	COMMUNICATION SYSTEMS	2018	ANNA UNIVERSITY REGIONAL CAMPUS, MADURAI	ANNA UNIVERSITY	7.93	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	19-02-2024	12-11-2024	0	8	23
Total				0	8	27

V. Industrial Experience :

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

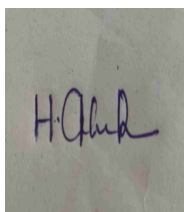
VI. C.O.E. Appointment Experience :

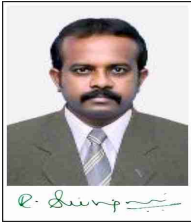
Capacity at which service is extended for the conduct of Examination during the last year

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

Signature of the Faculty :

A handwritten signature in blue ink, appearing to read 'H. Ghub', is positioned on a light-colored, textured rectangular background.

Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	286383
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. NIRMAL PRATHEEP D
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	14, 2ND MAIN STREET, THIRUVALLUVAR NAGAR
Line 2	PALANGANATHAM, MADURAI - 625003
District	MADURAI
Telephone number	-
Mobile number	+91 - 8778865424
Email	NIRMALJEES@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AQNPN3326M
Passport Number	
Faculty code given by C.O.E.	9133198
Faculty code given by A.I.C.T.E.	1-3713854510
Date of Birth	27-03-1986
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.	ELECTRONICS AND COMMUNICATION ENGINEERING	2009	BHARATH NIKETAN ENGINEERING COLLEGE	ANNA UNIVERSITY	62	SECOND CLASS	
P.G.	M.TECH.	OTHERS - DIGITAL COMMUNICATION AND NETWORKING	2013	OTHERS - KALASALI NGAM UNIVERSITY	OTHERS - DEEMED UNIVERSITY	6.59	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
PAVENDAR BHARATHIDASAN COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	27-06-2013	14-12-2013	0	5	18
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	05-09-2022	27-11-2024	2	2	23
Total				2	8	14

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
VALUE MENTOR	SENIOR INFORMATION SECURITY ENGINEER	CYBER SECURITY	14-11-2018	21-04-2021	2	5	8
Total					2	5	10

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

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

Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	286818
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. NANDHINI ABIRAMI K
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	53, LIC COLONY 2ND STREET, MEENAMBALPURAM
Line 2	MADURAI - 625002
District	MADURAI
Telephone number	-
Mobile number	+91 - 9150973575
Email	KNANDHINIABIRAMI@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BIYPN1848J
Passport Number	
Faculty code given by C.O.E.	9133225
Faculty code given by A.I.C.T.E.	1-44480436099
Date of Birth	05-01-1996
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.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2017	K L N COLLEGE OF INFORMATION TECHNOLOGY	ANNA UNIVERSITY	68.9	FIRST CLASS	
P.G.	M.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2019	VELAMMAL COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	84.4	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
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	09-10-2023	12-11-2024	1	1	4
Total				1	1	4

V. Industrial Experience :

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

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

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

A handwritten signature in blue ink, appearing to read "J. Nandini", is written over a light blue grid background.

Signature of the Faculty :

Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	287088
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. KOTHALAMUTHU R
Regular Or Adjunct	Regular
Image	 
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	2/101, NORTH STREET, VIJAYAKARISALKULAM POST
Line 2	VEMBAKOTTAI TALUK, SIVAKASI TOWN, VIRUDHUNAGAR - 626131
District	VIRUDHUNAGAR
Telephone number	-
Mobile number	+91 - 7639264651
Email	GRKMUTHU95@GMAIL.COM
Gender	MALE
Community	MBC
PAN Number	DXPPK5461Q
Passport Number	
Faculty code given by C.O.E.	9133239
Faculty code given by A.I.C.T.E.	1-7327061194
Date of Birth	19-04-1995
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.	MECHANICAL ENGINEERING	2016	UNNAMA LAI INSTITUTE OF TECHNOLOGY	ANNA UNIVERSITY	6.94	FIRST CLASS	
P.G.	M.E.	ENGINEERING DESIGN	2023	P.S.R. ENGINEERING COLLEGE (AUTONOMOUS)	ANNA UNIVERSITY	87	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
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	01-08-2024	12-11-2024	0	3	12
Total				0	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 Examination during the last year

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

A handwritten signature in blue ink, appearing to be 'R. K. Sharma', is centered within a light gray rectangular box.

Signature of the Faculty :

Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	287233
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.E.-CIVIL ENGINEERING
Name of the faculty member	MS. VINOTHINI P M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	11/19, BACK OF PUTTHER SCHOOL EAST STREET
Line 2	BODINAYAKANUR - 625513
District	THENI
Telephone number	-
Mobile number	+91 - 8778958745
Email	P.MVINOTHINI97@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	CDKPV5383E
Passport Number	
Faculty code given by C.O.E.	9133243
Faculty code given by A.I.C.T.E.	1-44718191894
Date of Birth	29-07-1997
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	2020	EXCEL ENGINEERING COLLEGE (AUTONOMOUS)	ANNA UNIVERSITY	60	SECOND CLASS	
P.G.	M.E.	CONSTRUCTION ENGINEERING AND MANAGEMENT	2024	R V S TECHNICAL CAMPUS COIMBATORE	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
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	19-08-2024	26-11-2024	0	3	8
Total				0	3	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 Examination during the last year

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

P. M. May

Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	287438
Name of the Department	COMPUTER SCIENCE AND ENGINEERING
Name of the Degree & Course	B.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MRS. SURIYA PRIYA S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	2/1183-3, SANTHANAM NAGAR 1ST STREET, TELECOM NAGAR
Line 2	KANNANENTHAL, MADURAI - 625014
District	MADURAI
Telephone number	-
Mobile number	+91 - 9487676103
Email	SURIYAPRIYASK@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	DMXPS0664A
Passport Number	
Faculty code given by C.O.E.	9133297
Faculty code given by A.I.C.T.E.	1-44718193175
Date of Birth	18-04-1992
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.	B.E.	COMPUTER SCIENCE AND ENGINEERING	2013	THENI KAMMAVAR SANGAM COLLEGE OF TECHNOLOGY	ANNA UNIVERSITY	81.3	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2015	KALASALINGAM INSTITUTE OF TECHNOLOGY	ANNA UNIVERSITY	82.8	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
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	06-03-2024	27-11-2024	0	8	22
Total				0	8	26

V. Industrial Experience :

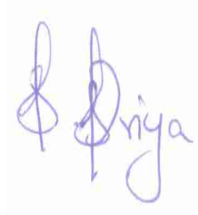
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

VI. C.O.E. Appointment Experience :

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

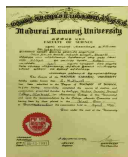
AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of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



Signature of the Faculty :

Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	288120
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-MATHEMATICS
Name of the faculty member	MR. MUTHUVEL S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	PLOT NO 32, SENTHILVEL NAGAR, PUDUKULAM 2ND BITS
Line 2	MADURAI - 625003
District	MADURAI
Telephone number	-
Mobile number	+91 - 9688208556
Email	SETHURAMANMUTHUVEL1@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AJHPM6602Q
Passport Number	
Faculty code given by C.O.E.	9133134
Faculty code given by A.I.C.T.E.	1-14223831369
Date of Birth	04-06-1970
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.SC.	OTHERS - MATHEMATICS	1990	OTHERS - AYYA NADAR JANAKI AMMAL COLLEGE	MADURAI KAMARAJ UNIVERSITY	69	FIRST CLASS	
P.G.	M.SC.	OTHERS - MATHEMATICS	1992	OTHERS - AYYA NADAR JANAKI AMMAL COLLEGE	MADURAI KAMARAJ UNIVERSITY	79	DISTINCTION	
OTHERS - M.PHIL	OTHERS - M.PHIL	MATHEMATICS	1993	OTHERS - AYYA NADAR JANAKI AMMAL COLLEGE	MADURAI KAMARAJ 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
OTHERS - MADURAI INSTITUTE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	28-06-2010	20-06-2018	7	11	23
SYED AMMAL ENGINEERING COLLEGE (AUTONOMOUS)	OTHERS - LECTURER	14-07-1999	31-08-2000	1	1	18
SETHU INSTITUTE OF TECHNOLOGY (AUTONOMOUS)	OTHERS - SENIOR LECTURER	11-06-2007	11-06-2010	3	0	1
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	02-07-2018	12-11-2024	6	4	11
Total				18	5	26

V. Industrial Experience :

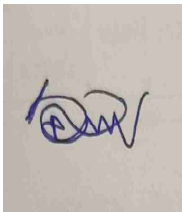
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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

AUR (No. of days) 1	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of my knowledge.

Signature of the Faculty :



Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	290131
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-CHEMISTRY
Name of the faculty member	MR. SUNDARESAN M
Regular Or Adjunct	Regular
Image	 
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	15B, REGUNATHAPURAM EAST STREET,
Line 2	DEVAKOTTAI, SIVAGANGAI - 630302
District	SIVAGANGAI
Telephone number	-
Mobile number	+91 - 9626562751
Email	SUNDAR.M0573@GMAIL.COM
Gender	MALE
Community	OC
PAN Number	GQFPS2849J
Passport Number	
Faculty code given by C.O.E.	9133103
Faculty code given by A.I.C.T.E.	1-2962277552
Date of Birth	20-05-1973
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.SC.	OTHERS - CHEMISTRY	1993	OTHERS - HHRAJAH S COLLEGE	BHARATH IDASAN UNIVERSITY	66	FIRST CLASS	
P.G.	M.SC.	OTHERS - CHEMISTRY	2003	OTHERS - ALAGAPPA UNIVERSITY	ALAGAPPA UNIVERSITY	65.21	FIRST CLASS	
OTHERS - M.PHIL	OTHERS - M.PHIL	CHEMISTRY	2008	OTHERS - ALAGAPPA UNIVERSITY	ALAGAPPA 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
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	18-01-2016	13-11-2024	8	9	27
OTHERS - SHREE SEVUGAN ANNAMALAI COLLEGE	OTHERS - LECTURER	02-07-2007	12-04-2008	0	9	11
Total				9	7	12

V. Industrial Experience :

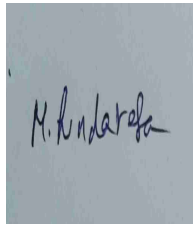
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days) 3	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of my knowledge.

Signature of the Faculty :



Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	291094
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-TAMIL
Name of the faculty member	MRS. DARMIN JEYA SUBA N
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	5/381, THIRUMAL NAGAR, THIRUMOHUR
Line 2	Y.OTHAKADAI, MADURARI- 625107
District	MADURAI
Telephone number	-
Mobile number	+91 - 9626533033
Email	JEYASUBA2008@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	JEIPD4142D
Passport Number	
Faculty code given by C.O.E.	9133220
Faculty code given by A.I.C.T.E.	1-9133220001
Date of Birth	16-05-1979
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.A.	OTHERS - TAMIL	2000	OTHERS - NESAMANI MEMORIAL CHRISTIAN COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	53	SECOND CLASS	
P.G.	OTHERS - M.A.	TAMIL	2002	OTHERS - SCOTT CHRISTIAN COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	61.5	FIRST CLASS	
OTHERS - M.PHIL.	OTHERS - M.PHIL.	TAMIL	2003	OTHERS - SCOTT CHRISTIAN COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	63.5	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
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	03-10-2023	13-11-2024	1	1	11
Total				1	1	11

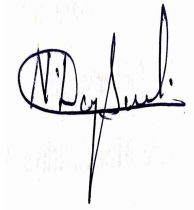
V. Industrial Experience :

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) 250	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of my knowledge.



Signature of the Faculty :

Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	293992
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.E.-CIVIL ENGINEERING
Name of the faculty member	MRS. ASHA M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	6, MARUTHAPPA NAGAR 2ND STREET
Line 2	VIJAYAPURAM
District	TIRUPPUR
Telephone number	0452 - 2911009
Mobile number	+91 - 9788845201
Email	ASHAMOHAN93@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BCWPA4824R
Passport Number	
Faculty code given by C.O.E.	9133249
Faculty code given by A.I.C.T.E.	1-4220097635
Date of Birth	10-07-1993
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.	CIVIL ENGINEERING	2014	JAI SHRIRAM ENGINEERING COLLEGE	ANNA UNIVERSITY	7.89	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2018	JAI SHRIRAM ENGINEERING COLLEGE	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
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	06-09-2018	14-11-2024	6	2	9
Total				6	2	10

V. Industrial Experience :

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

VI. C.O.E. Appointment Experience :

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

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

Signature of the Faculty :

A handwritten signature in blue ink, consisting of a stylized 'd' followed by a vertical line and a small 'n' shape.

Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	294112
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.E.-CIVIL ENGINEERING
Name of the faculty member	MRS. VIJAYALAKSHMI M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	5/198, CHINNAKANNU NAGAR
Line 2	NAGAMALAI PUDUKKOTTAI
District	MADURAI
Telephone number	0452 - 2911009
Mobile number	+91 - 9597448967
Email	VIJICIVILPROFESSOR@GMAIL.COM
Gender	FEMALE
Community	MBC
PAN Number	AQPPV8961N
Passport Number	
Faculty code given by C.O.E.	9133248
Faculty code given by A.I.C.T.E.	1-7430950359
Date of Birth	08-05-1992
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.	CIVIL ENGINEERING	2014	PSNA COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	9.0	DISTINCTION	
P.G.	M.E.	CONSTRUCTION ENGINEERING AND MANAGEMENT	2017	CHRISTIAN COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	9.06	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
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	17-06-2019	14-11-2024	5	4	28
Total				5	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 Examination during the last year

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

A handwritten signature in blue ink, appearing to be 'M. Q.', is written on a light-colored background.

Signature of the Faculty :

Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	307117
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-MATHEMATICS
Name of the faculty member	MRS. BRINTHA RANI M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	6/54, VIJAYA SAMUNDEESWARI ILLAM, THULASI RAM STREET
Line 2	MEENAKSHI NAGAR, VILLAPURAM, MADURAI - 625012
District	MADURAI
Telephone number	-
Mobile number	+91 - 9600311086
Email	ARUNJANASAI@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	CRAPB0681B
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-7426601121
Date of Birth	27-10-1986
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.SC.	OTHERS - MATHEMATICS	2007	OTHERS - NMS SERMATHAI VASAN COLLEGE FOR WOMEN	MADURAI KAMARAJ UNIVERSITY	73.5	FIRST CLASS	
P.G.	M.SC.	OTHERS - MATHEMATICS	2009	OTHERS - THIAGARAJAR COLLEGE OF ARTS AND SCIENCE	MADURAI KAMARAJ UNIVERSITY	71.2	FIRST CLASS	
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - MATHEMATICS	2011	OTHERS - THIAGARAJAR COLLEGE OF ARTS AND SCIENCE	MADURAI KAMARAJ UNIVERSITY	72.87	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
LATHA MATHAVAN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	13-06-2019	30-11-2019	0	5	18
MANGAYARKARASI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	11-12-2019	30-07-2022	2	7	20
SACS M.A.V.M.M. ENGINEERING COLLEGE	ASSISTANT PROFESSOR	05-07-2017	24-11-2018	1	4	20
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	04-11-2024	28-11-2024	0	0	25
Total				4	6	26

V. Industrial Experience :

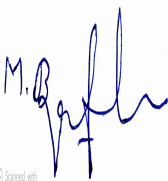
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

VI. C.O.E. Appointment Experience :

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

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

Signature of the Faculty : 

Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	302215
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-MATHEMATICS
Name of the faculty member	MR. SIVAKUMAR R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1B, BABU NAGAR IST STREET EXTENSION
Line 2	IRAVATHANALLUR, MADURAI
District	MADURAI
Telephone number	-
Mobile number	+91 - 9884218700
Email	AAKALYAA.KUMAR@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	CWYPS2050J
Passport Number	
Faculty code given by C.O.E.	9536066
Faculty code given by A.I.C.T.E.	1-7431089930
Date of Birth	07-03-1982
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.SC.	OTHERS - MATHEMATICS	2003	OTHERS - SN COLLEGE	MADURAI KAMARAJ UNIVERSITY	68	FIRST CLASS	
P.G.	M.SC.	OTHERS - MATHEMATICS	2005	OTHERS - SN COLLEGE	MADURAI KAMARAJ UNIVERSITY	75	FIRST CLASS	
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - MATHEMATICS	2006	OTHERS - SN COLLEGE	MADURAI KAMARAJ 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
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	29-07-2019	22-11-2024	5	3	25
THIAGARAJAR COLLEGE OF ENGINEERING (AUTONOMOUS)	ASSISTANT PROFESSOR	13-05-2016	14-07-2019	3	2	2
N.P.R COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ASSISTANT PROFESSOR	02-07-2012	15-11-2014	2	4	14
RAMCO INSTITUTE OF TECHNOLOGY	ASSISTANT PROFESSOR	02-06-2015	30-04-2016	0	10	29
SACS M.A.V.M.M. ENGINEERING COLLEGE	ASSISTANT PROFESSOR	02-01-2015	06-05-2015	0	4	5
OTHERS - RMK ENGINEERING COLLEGE AUTONOMOUS	ASSISTANT PROFESSOR	01-09-2009	05-05-2012	2	8	5
Total				14	9	25

V. Industrial Experience :

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

VI. C.O.E. Appointment Experience :

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

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

Signature of the Faculty :

Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	308502
Name of the Department	COMPUTER SCIENCE AND ENGINEERING
Name of the Degree & Course	B.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MR. ARUNPRASATH T
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1-1-19, MADURAI ROAD
Line 2	USILAMPATTI - 625532
District	MADURAI
Telephone number	-
Mobile number	+91 - 9942695955
Email	ARUNPRASATH.DCE@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AOLPA1585R
Passport Number	
Faculty code given by C.O.E.	9133256
Faculty code given by A.I.C.T.E.	1-44789578604
Date of Birth	21-09-1989
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	2012	K S R COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	7.06	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2015	PSNA COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	6.39	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
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	01-01-2024	28-11-2024	0	10	28
Total				0	10	3

V. Industrial Experience :

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

VI. C.O.E. Appointment Experience :

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

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

A handwritten signature in black ink, appearing to read 'T. Arun Prasad', is centered within a rectangular box.

Signature of the Faculty :

Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	302468
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-ENGLISH
Name of the faculty member	MRS. JANAKIDEVI R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	W15/5, KARUMARI AMMAN KOVIL 1ST STREET,
Line 2	PAMBAN NAGAR, THIRUPARANKUNDRAM, MADURAI
District	MADURAI
Telephone number	-
Mobile number	+91 - 9944212552
Email	JANAKIENGLISHMCW@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BGWPJ3073R
Passport Number	
Faculty code given by C.O.E.	9133216
Faculty code given by A.I.C.T.E.	1-44721734034
Date of Birth	17-01-1994
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.A.	ENGLISH	2014	OTHERS - BISHOP THORP COLLEGE	BHARATHI YAR UNIVERSITY	68.72	FIRST CLASS	
P.G.	OTHERS - M.A	OTHERS - ENGLISH	2016	OTHERS - GOVERNMENT ARTS COLLEGE COIMBATORE	BHARATHI YAR UNIVERSITY	67.5	FIRST CLASS	
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - ENGLISH	2018	OTHERS - THE MADURA COLLEGE	MADURAI KAMARAJ 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
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	04-09-2023	27-11-2024	1	2	24
Total				1	2	25

V. Industrial Experience :

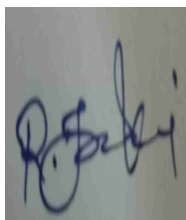
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

VI. C.O.E. Appointment Experience :

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

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



Signature of the Faculty :

Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	309203
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. MUTHU SELVI R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	11A-5W,EAST COLONY STREET,CHELLAYIPURAM
Line 2	UTHAMAPALAYAM, THENI -625530
District	THENI
Telephone number	0452 - 2911009
Mobile number	+91 - 9786671723
Email	SELVAMUTHU96@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	BZQPM2897F
Passport Number	
Faculty code given by C.O.E.	9110185
Faculty code given by A.I.C.T.E.	1-7436719243
Date of Birth	07-06-1995
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.	ELECTRONICS AND COMMUNICATION ENGINEERING	2016	JANSONS INSTITUTE OF TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	72	FIRST CLASS	
P.G.	M.E.	COMMUNICATION SYSTEMS	2018	BHARATH NIKETAN 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
SRM MADURAI COLLEGE FOR ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	18-07-2018	14-06-2019	0	10	28
LATHA MATHAVAN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	17-06-2019	07-07-2021	2	0	21
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	01-11-2024	29-11-2024	0	0	29
Total				3	0	18

V. Industrial Experience :

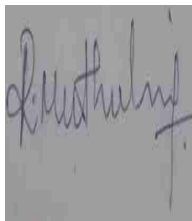
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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

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

Signature of the Faculty :



Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	286703
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-PHYSICS
Name of the faculty member	MR. BHUVANAMARIDHASAN B
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	2/1A1, THIRUVALLUVAR STREET, NEAR ST MICHAEL SCHOOL
Line 2	SASI NAGAR WEST, P AND T NAGAR EXTENSION, MADURAI - 625017
District	MADURAI
Telephone number	0452 - 2911009
Mobile number	+91 - 9994499460
Email	VIBABHUVAN@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	CHAPB6771Q
Passport Number	
Faculty code given by C.O.E.	9133019
Faculty code given by A.I.C.T.E.	1-2235880165
Date of Birth	02-12-1980
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.SC.	OTHERS - PHYSICS	2001	OTHERS - MADURAI KAMARAJ UNIVERSITY COLLEGE	MADURAI KAMARAJ UNIVERSITY	66	FIRST CLASS	
P.G.	M.SC.	OTHERS - MATERIALS SCIENCE AND TECHNOLOGY	2003	THIAGARAJAR COLLEGE OF ENGINEERING (AUTONOMOUS)	MADURAI KAMARAJ UNIVERSITY	67	FIRST CLASS	
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - PHYSICS	2019	OTHERS - ALAGAPPA UNIVERSITY	OTHERS - ALAGAPPA UNIVERSITY	83	DISTINCTION	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

IV. Academic Experience :

(Start from the Current working Experience) *

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
FATIMA MICHAEL COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	01-09-2009	04-01-2013	3	4	4
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	01-07-2013	12-11-2024	11	4	12
Total				14	8	20

V. Industrial Experience :

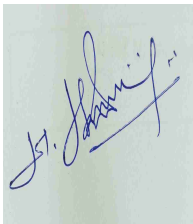
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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) 3	Central Evaluation (No. of scripts Evaluated) 250	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of my knowledge.

Signature of the Faculty :



Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	311070
Name of the Department	COMPUTER SCIENCE AND ENGINEERING
Name of the Degree & Course	B.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MS. ROOBICA N
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	92, MALLAKOTTAI, THIRUPATHUR
Line 2	SIVAGANGAI - 630566
District	SIVAGANGAI
Telephone number	-
Mobile number	+91 - 8056901917
Email	ROOBIKANAGARAJ@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	DARPR0290F
Passport Number	
Faculty code given by C.O.E.	9133251
Faculty code given by A.I.C.T.E.	1-44736665734
Date of Birth	22-06-2001
Age	24
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	COMPUTER SCIENCE AND ENGINEERING	2022	N.P.R COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	8.42	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2024	VELAMMAL COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	8.89	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
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	05-12-2024	21-01-2025	0	1	17
Total				0	1	17

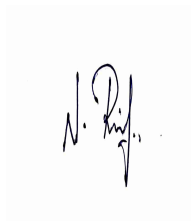
V. Industrial Experience :

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

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

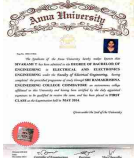
AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of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



Signature of the Faculty :

Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	257996
Name of the Department	ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the Degree & Course	B.E.-ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the faculty member	MRS. SIVAKAMI T
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1/81, KOVIL STREET, CHITTAMPATTI POST
Line 2	POOLAMPATTI, MADURAI - 625122
District	MADURAI
Telephone number	-
Mobile number	+91 - 8098860007
Email	SIVAKAMI159@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	AVYPT9998F
Passport Number	
Faculty code given by C.O.E.	9133238
Faculty code given by A.I.C.T.E.	1-44718010734
Date of Birth	15-01-1992
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	2014	SRI RAMAKRISHNA ENGINEERING COLLEGE (AUTONOMOUS)	ANNA UNIVERSITY	84	FIRST CLASS	
P.G.	M.E.	POWER ELECTRONICS AND DRIVES	2016	SRI SHAKTHI INSTITUTE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	82.5	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
SNS COLLEGE OF ENGINEERING (AUTONOMOUS)	ASSISTANT PROFESSOR	02-05-2016	05-08-2017	1	3	4
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	01-08-2024	26-10-2024	0	2	26
Total				1	5	2

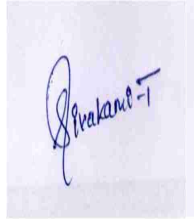
V. Industrial Experience :

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



Signature of the Faculty :

Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	258214
Name of the Department	ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the Degree & Course	B.E.-ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the faculty member	MR. SOLAIAPPAN K T
Regular Or Adjunct	Regular
Image	 
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	4A, TANK ROAD, JOTHI NAGAR, GOBICHETTIPALAYAM
Line 2	GOBICHETTIPALAYAM - 638476
District	ERODE
Telephone number	-
Mobile number	+91 - 6369070969
Email	APPANSOLAIKT@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	EHEPS1277J
Passport Number	
Faculty code given by C.O.E.	7111094
Faculty code given by A.I.C.T.E.	1-11332789338
Date of Birth	13-09-1988
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.	ELECTRICAL AND ELECTRONICS ENGINEERING	2010	SRI VENKATESWARA COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	69	FIRST CLASS	
P.G.	M.E.	POWER SYSTEMS ENGINEERING	2012	OTHERS - BIRLA INSTITUTE OF TECHNOLOGY	OTHERS - BIT MESRA DEEMED 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
JANSONS INSTITUTE OF TECHNOLOGY (AUTONOMOUS)	ASSISTANT PROFESSOR	26-06-2013	07-04-2017	3	9	12
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	18-04-2022	26-10-2024	2	6	9
Total				6	3	23

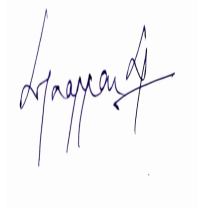
V. Industrial Experience :

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

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

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days) 3	Central Evaluation (No. of scripts Evaluated) 250	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of my knowledge.



Signature of the Faculty :

Name of the College	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	258384
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.E.-CIVIL ENGINEERING
Name of the faculty member	MR. NAGARAJAN G
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	76, KAMARAJAR STREET, MUTHU THEVAR COLONY
Line 2	VIRATTIPATHU, MADURAI - 625016
District	MADURAI
Telephone number	-
Mobile number	+91 - 9944702425
Email	MGNAGARAJAN7@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BEFPN0514J
Passport Number	
Faculty code given by C.O.E.	9133233
Faculty code given by A.I.C.T.E.	1-44488692908
Date of Birth	27-01-1997
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	PSNA COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	5.97	SECOND CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2020	KAMARAJ COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	7.63	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
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	06-03-2024	26-10-2024	0	7	21
Total				0	7	24

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
COVERNEST INSURANCE WEB AGGREGATOR PRIVATE LIMITED	SENIOR SOFTWARE DEVELOPER	DEVELOPER	13-11-2020	29-04-2023	2	5	17
Total					2	5	19

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

AUR (No. of 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	9133 - VAIGAI COLLEGE OF ENGINEERING
Faculty ID	258794
Name of the Department	ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the Degree & Course	B.E.-ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the faculty member	MR. ARAVINDARAJ R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	C4, 15TH AVENUE, GLADWAY GREEN CITY, AVANIYAPURAM BYE PASS ROAD
Line 2	AVANIYAPURAM, MADURAI - 625012
District	MADURAI
Telephone number	-
Mobile number	+91 - 6380738207
Email	ARAVINDVCEEEE@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BUBPA2796K
Passport Number	
Faculty code given by C.O.E.	9133180
Faculty code given by A.I.C.T.E.	1-9454855006
Date of Birth	31-05-1990
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.	ELECTRICAL AND ELECTRONICS ENGINEERING	2011	SETHU INSTITUTE OF TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	81	FIRST CLASS	
P.G.	M.E.	POWER SYSTEMS ENGINEERING	2016	ANNA UNIVERSITY REGIONAL CAMPUS, MADURAI	ANNA UNIVERSITY	8.52	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
SACS M.A.V.M.M. ENGINEERING COLLEGE	ASSISTANT PROFESSOR	12-07-2017	05-03-2021	3	7	25
VAIGAI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	08-03-2021	28-10-2024	3	7	21
Total				7	3	18

V. Industrial Experience :

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

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

AUR (No. of days) 3	Squad Member (No. of days)	External Examiner (Practical) (No. of days) 4	Central Evaluation (No. of scripts Evaluated) 200	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of my knowledge.



Signature of the Faculty :

