







Anna University, Chennai
PSN Engineering College - 9523

Consolidated_Report
13.faculty

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	268594
Name of the Department	STRUCTURAL ENGINEERING
Name of the Degree & Course	M.E.-STRUCTURAL ENGINEERING
Name of the faculty member	DR. M S RAVIKUMAR
Regular Or Adjunct	Regular
Image	
Present Designation	PRINCIPAL
Residential Address Line 1	8/82,MSR ILLAM, SOUTH THERIVILLAI, PUTHALAM
Line 2	KANYAKUMARI , 629602
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9442077274
Email	DRMSR1975@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AGPPR4644C
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-9524610202
Date of Birth	07-06-1975
Age	49
I. Particulars of Educational Qualification : (only completed)	

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

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

EXPERIMENTAL INVESTIGATION ON SELF COMPACTING SELF CURING CONCRETE STRUCTURES ELEMENTS WITH POZZOLANIC ADMIXTURES

III. Faculty in which Ph.D. was awarded

FACULTY OF CIVIL ENGINEERING

IV. Academic Experience :

(Start from the Current working Experience) *

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	PRINCIPAL	29-06-2015	03-02-2020	4	7	5
OTHERS - SUN POLYTECHNIC COLLEGE	PRINCIPAL	20-09-2006	30-04-2011	4	7	11
RAJAS ENGINEERING COLLEGE	OTHERS - LECTURER	20-07-2000	24-08-2004	4	1	5
PSN ENGINEERING COLLEGE	PRINCIPAL	15-02-2021	05-11-2024	3	8	19
OTHERS - NOORUL ISLAM UNIVERSITY	PROFESSOR	05-02-2020	12-02-2021	1	0	8
AMRITA COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	03-09-2004	18-09-2006	2	0	16
AMRITA COLLEGE OF ENGINEERING AND TECHNOLOGY	PROFESSOR	02-05-2011	28-06-2013	2	1	27
OTHERS - NOORUL ISLAM UNIVERSITY	PROFESSOR	01-07-2013	25-06-2015	1	11	25
Total				24	2	28

V. Industrial Experience :

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

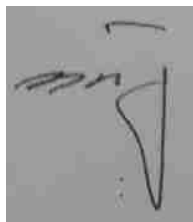
VI. C.O.E. Appointment Experience :

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

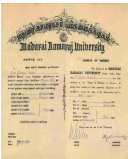


AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of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

Signature of the Faculty :



Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	298159
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-CHEMISTRY
Name of the faculty member	DR. THILLAI ARASU
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	PLOT NO 2, 19TH STREET, RAHMATH NAGAR
Line 2	TIRUNELVELI - 627011
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9677874922
Email	DRPTHILLAIARASU@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AFKPA2816D
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-2919105427
Date of Birth	13-04-1964
Age	60
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of 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	1985	OTHERS - SATHAKAT HULLA APPA COLLEGE	MADURAI KAMARAJ UNIVERSITY	79.9	FIRST CLASS	
P.G.	M.SC.	OTHERS - CHEMISTRY	1988	OTHERS - ANNAMALAI UNIVERSITY	ANNAMALAI UNIVERSITY	69.9	FIRST CLASS	
PH.D.	PH.D.	CHEMISTRY	1996	OTHERS - MANORMANIAM SUNDARNAR UNIVERSITY	MANOMANIAM SUNDARNAR UNIVERSITY	Y		

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

COMPLEXOMETRIC STUDIES ON SOME COPPER II AND NICKEL II TERNARY COMPLEXES OF BIOLOGICAL SIGNIFICANCE

III. Faculty in which Ph.D. was awarded

OTHERS

IV. Academic Experience :

(Start from the Current working Experience) *

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	09-09-2024	18-11-2024	0	2	10
OTHERS - ERITREA INSTITUTE OF TECHNOLOGY	ASSOCIATE PROFESSOR	09-02-2006	08-02-2008	1	11	28
DR SIVANTHI ADITANAR COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	08-12-1998	31-01-2006	7	1	24
OTHERS - WOLLEGA UNIVERSITY	PROFESSOR	06-10-2016	31-07-2024	7	9	26
OTHERS - DR MGR ENGINNERING COLLEGE	OTHERS - LECTURER	04-06-1997	30-11-1998	1	5	27
OTHERS - KALASALINGAM UNIVERSITY	PROFESSOR	02-06-2008	30-06-2015	7	0	29
PSN ENGINEERING COLLEGE	PROFESSOR	01-07-2015	05-09-2016	1	2	5
Total				26	10	4

V. Industrial Experience :

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

VI. C.O.E. Appointment Experience :


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




AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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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	9523 - PSN ENGINEERING COLLEGE
Faculty ID	270624
Name of the Department	AUTOMOBILE ENGINEERING
Name of the Degree & Course	M.E.-AUTOMOBILE ENGINEERING
Name of the faculty member	DR. PRABHU N
Regular Or Adjunct	Regular
Image	 <p>DR. P. N. PRABHU Professor PSN ENGINEERING COLLEGE Kilasaipattinam, Palayamkottai Tamil Nadu - 627 011</p>
Present Designation	PROFESSOR
Residential Address Line 1	72 SAIBABA COLONY THIYAGARAJANAGAR
Line 2	TIRUNELVELI 627011
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9789449362
Email	PRABHUKITS@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	ASYPP4393B
Passport Number	
Faculty code given by C.O.E.	9523249
Faculty code given by A.I.C.T.E.	1-7517479488
Date of Birth	29-03-1979
Age	45
I. Particulars of Educational Qualification : (only completed)	

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

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score : 44 09

File :

II. Title of Ph.D. Thesis

FRAMEWORK METHOD FOR DESIGN OPTIMIZATION OF FIVE AXIS INDUSTRIAL ROBOTS

III. Faculty in which Ph.D. was awarded

FACULTY OF MECHANICAL ENGINEERING

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PET ENGINEERING COLLEGE	OTHERS - LECTURER	29-07-2005	02-07-2007	1	11	5
GOVERNMENT COLLEGE OF ENGINEERING TIRUNELVELI	OTHERS - GRADUATE TRAINEE	29-07-2002	28-07-2005	2	11	31
MADHA ENGINEERING COLLEGE	OTHERS - LECTURER	15-08-2000	12-02-2002	1	5	29
OTHERS - KOTTAYAM INSTITUTE OF TECHNOLOGY AND SCIENCE	PRINCIPAL	10-12-2014	31-12-2018	4	0	22
OTHERS - HINDUSTAN UNIVERSITY	OTHERS - SENIOR LECTURER	04-07-2007	05-05-2009	1	10	2
PSN ENGINEERING COLLEGE	OTHERS - DIRECTOR	02-01-2019	05-11-2024	5	10	4
PSN COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ASSOCIATE PROFESSOR	01-06-2009	09-12-2014	5	6	9
Total				23	8	18

V. Industrial Experience :

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

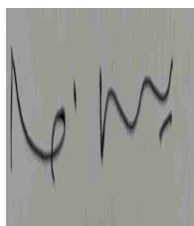
VI. C.O.E. Appointment Experience :


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

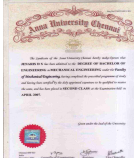
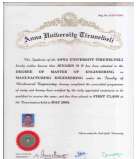

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of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

Signature of the Faculty :



Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	279719
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	DR. JENARIS D S
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	37/J, BHARATHIYAR STREET
Line 2	PATHAMADAI,627453
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 7339181928
Email	JENARISMECH@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	ANFPJ1955K
Passport Number	
Faculty code given by C.O.E.	9523250
Faculty code given by A.I.C.T.E.	1-12961416907
Date of Birth	15-07-1972
Age	52
I. Particulars of Educational Qualification : (only completed)	

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

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	21-12-2018	01-01-2022	3	0	12
PONJESLY COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	06-09-2010	31-10-2015	5	1	25
PSN ENGINEERING COLLEGE	PROFESSOR	03-01-2022	08-11-2024	2	10	6
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	02-11-2015	20-12-2018	3	1	19
VINS CHRISTIAN COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	01-06-2009	03-09-2010	1	3	3
Total				15	5	7

V. Industrial Experience :

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

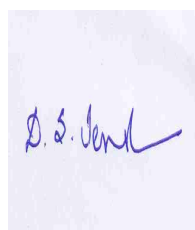
VI. C.O.E. Appointment Experience :


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




AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
54		40	3000	

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

Signature of the Faculty :



Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	291285
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.TECH.-AGRICULTURAL ENGINEERING
Name of the faculty member	DR. JAYAKUMAR A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	1/5, PILLAYAR KOVIL STREET, KURUNJAKULAM
Line 2	TENKASI - 627719
District	TENKASI
Telephone number	-
Mobile number	+91 - 9443340955
Email	AYJEYAKUMAR@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AIAPJ4661N
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-43412244051
Date of Birth	04-06-1969
Age	55
I. Particulars of Educational Qualification : (only completed)	

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

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

STRENGTHENING OF HIGH PERFORMANCE REINFORCED CEMENT CON HOLLOW BEAMS USING FIBRE REINFORCED POLYMER LAMINATES

III. Faculty in which Ph.D. was awarded

FACULTY OF CIVIL ENGINEERING

IV. Academic Experience :

(Start from the Current working Experience) *

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	07-03-2023	13-11-2024	1	8	7
HOLY CROSS ENGINEERING COLLEGE	ASSISTANT PROFESSOR	03-01-2013	07-06-2019	6	5	5
Total				8	1	13

V. Industrial Experience :

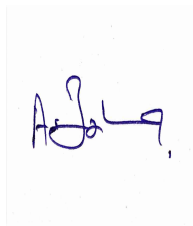
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days


VI. C.O.E. Appointment Experience :




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

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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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	9523 - PSN ENGINEERING COLLEGE
Faculty ID	268964
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL AND AUTOMATION ENGINEERING
Name of the faculty member	DR. SATISH PANDIAN G
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	3/141 NORTH STREET KOLLANKINAR PO
Line 2	TUTICORIN 628302
District	THOOTHUKUDI
Telephone number	-
Mobile number	+91 - 9600590039
Email	DRGSP@PSNEC.AC.IN
Gender	MALE
Community	SC
PAN Number	EPIPS6690D
Passport Number	
Faculty code given by C.O.E.	9225347
Faculty code given by A.I.C.T.E.	1-2515915997
Date of Birth	03-06-1985
Age	39
I. Particulars of Educational Qualification : (only completed)	

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

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

MODELS FOR ANALYSIS AND ION OF SUSTAINABLE PROGRAM A STUDY IN INDIAN MANUFACTURING INDUSTRIES

III. Faculty in which Ph.D. was awarded

FACULTY OF MECHANICAL ENGINEERING

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	15-09-2021	05-11-2024	3	1	21
THIAGARAJAR COLLEGE OF ENGINEERING (AUTONOMOUS)	OTHERS - FULL TIME RESEARCH SCHOLAR	10-01-2011	18-09-2015	4	8	9
V S B ENGINEERING COLLEGE (AUTONOMOUS)	ASSOCIATE PROFESSOR	01-02-2016	30-06-2020	4	4	29
Total				12	2	0

V. Industrial Experience :

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

VI. C.O.E. Appointment Experience :


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



AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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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	9523 - PSN ENGINEERING COLLEGE
Faculty ID	291399
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. MOHANRAJ S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	5, EAST STREET, RETTANAI POST, TINDIVANAM
Line 2	VILUPPURAM - 604306
District	VILLUPURAM
Telephone number	-
Mobile number	+91 - 9842144405
Email	BHARATHRAJ07@GMAIL.COM
Gender	MALE
Community	MBC
PAN Number	AMJPM4065G
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-435416091
Date of Birth	26-11-1983
Age	41
I. Particulars of Educational Qualification : (only completed)	

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

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	22-05-2009	01-07-2020	11	1	11
PSN COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ASSISTANT PROFESSOR	13-08-2007	21-05-2009	1	9	9
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	02-07-2020	13-11-2024	4	4	12
Total				17	3	4

V. Industrial Experience :

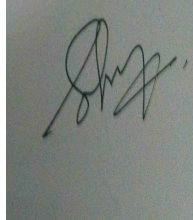
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

VI. C.O.E. Appointment Experience :


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




AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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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	9523 - PSN ENGINEERING COLLEGE
Faculty ID	296974
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-CHEMISTRY
Name of the faculty member	MR. KUMARASAMY S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	134, CHURCH STREET, VEERAVANALLUR
Line 2	TIRUNELVELI - 627426
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 7373623100
Email	SKSWAMY.CM@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AENPN5390M
Passport Number	
Faculty code given by C.O.E.	9523328
Faculty code given by A.I.C.T.E.	1-4663730345
Date of Birth	16-08-1979
Age	45
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.SC.	OTHERS - CHEMISTRY	2000	OTHERS - MDT HINDU COLLEGE	MANOMANIAM SUNDARAN UNIVERSITY	73	FIRST CLASS	
P.G.	M.SC.	OTHERS - CHEMISTRY	2003	OTHERS - SRI PRAMAKALYANI COLLEGE OF ARTS AND SCIENCE	MANOMANIAM SUNDARAN UNIVERSITY	63	FIRST CLASS	
OTHERS - MPHIL	OTHERS - MPHIL	CHEMISTRY	2009	OTHERS - VINAYAGA MISSION UNIVERSITY	OTHERS - VINAYAGA MISSION UNIVERSITY	63	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
FRANCIS XAVIER ENGINEERING COLLEGE (AUTONOMOUS)	ASSISTANT PROFESSOR	22-06-2015	28-02-2018	2	8	9
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	22-01-2024	15-11-2024	0	9	25
EINSTEIN COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	20-08-2018	11-12-2023	5	3	23
OTHERS - KALASALINGAM UNIVERSITY	ASSISTANT PROFESSOR	02-08-2008	15-12-2014	6	4	14
Total				15	2	13

V. Industrial Experience :

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

VI. C.O.E. Appointment Experience :

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



AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
10		6	400	10

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



Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	299493
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.TECH.-AGRICULTURAL ENGINEERING
Name of the faculty member	MR. ASHOK KUMARAVEL P K
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	3B, K.C.NAYANAR STREET, MILITARY LINES, SAMATHANAPURAM
Line 2	PALAYAMKOTTAI - 627002
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9789943298
Email	ASHOKKUMARAVEL@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	ANGPA2947R
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-2939845766
Date of Birth	02-10-1985
Age	39
I. Particulars of Educational Qualification : (only completed)	

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

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
V V COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	24-04-2013	30-05-2014	1	1	6
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	02-06-2014	28-04-2023	8	10	27
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	02-05-2023	19-11-2024	1	6	18
Total				11	6	24

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
ITD CEMENTATION INDIA PVT LTD	ENGINEER	EXECUTION	02-06-2008	31-10-2010	2	4	29
Total					2	4	0

VI. C.O.E. Appointment Experience :


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



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

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

Signature of the Faculty :



Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	292393
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	M.E.-VLSI DESIGN
Name of the faculty member	MR. BABU P
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	4/99, 15-1, PARAMARTHA LINGAPURAM, MAHADHANAPURAM POST
Line 2	KANIYAKUMARI - 629702
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9003942943
Email	BASANTHJUNE03@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AQBPB3270G
Passport Number	
Faculty code given by C.O.E.	9523092
Faculty code given by A.I.C.T.E.	1-429879751
Date of Birth	15-11-1980
Age	44
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2005	PSN COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	71	FIRST CLASS	
P.G.	M.E.	APPLIED ELECTRONICS	2010	PSN COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	73	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	07-07-2010	02-05-2023	12	9	27
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	03-05-2023	14-11-2024	1	6	12
PSN COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	OTHERS - LECTURER	01-02-2006	30-07-2007	1	5	27
Total				15	10	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	9523 - PSN ENGINEERING COLLEGE
Faculty ID	272469
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	DR. D S MANOJ ABRAHAM
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	96 VAGHEESAM PILLAI STREET, PONNAPA NADAR NAGAR,
Line 2	NAGERCOIL 629004
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9944356354
Email	DRDSMANOJABRAHAM@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BDAPM0146F
Passport Number	
Faculty code given by C.O.E.	9523293
Faculty code given by A.I.C.T.E.	1-11010978531
Date of Birth	03-06-1980
Age	44
I. Particulars of Educational Qualification : (only completed)	

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

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

INVESTIGATION OF ACCELERATED AGING EFFECTS IN PHENOLIC ABLATIVE COMPOSITES

III. Faculty in which Ph.D. was awarded

FACULTY OF MECHANICAL ENGINEERING

IV. Academic Experience :

(Start from the Current working Experience) *

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	24-11-2021	06-11-2024	2	11	13
PONJESLY COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	14-12-2008	20-06-2014	5	6	7
OTHERS - UDHAYA POLYTECHNIC COLLEGE	OTHERS - LECTURER	05-07-2004	31-08-2007	3	1	27
SATYAM COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	03-01-2017	05-10-2021	4	9	3
VINS CHRISTIAN COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	02-07-2014	31-12-2014	0	5	30
V V COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	02-01-2015	31-12-2016	1	11	30
Total				18	10	26

V. Industrial Experience :

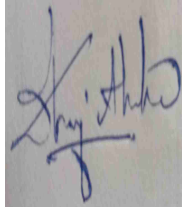
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
RBR GROUPS	SERVICE ENGINEER	SUPERVISOR	01-06-2002	30-06-2004	2	0	30
Total					2	0	0


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



AUR (No. of days) 14	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated) 400	Re-Evaluation (No. of scripts Evaluated)

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

Signature of the Faculty :



Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	272686
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.E.-ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the faculty member	MR. ROBIN JESUBALAN
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	16, PITCHIVANA STREET, PALAYAMKOTTAI
Line 2	TIRUNELVELI,627002
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9943149314
Email	ROBINJESUBALAN@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AZPPR6810B
Passport Number	
Faculty code given by C.O.E.	9523036
Faculty code given by A.I.C.T.E.	1-1218339333
Date of Birth	03-09-1969
Age	55
I. Particulars of Educational Qualification : (only completed)	

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

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
HOLY CROSS ENGINEERING COLLEGE	OTHERS - HOD	27-06-2011	12-06-2013	1	11	16
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	12-07-2013	02-03-2023	9	7	22
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	03-03-2023	06-11-2024	1	8	4
INFANT JESUS COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	01-08-2010	25-06-2011	0	10	25
OTHERS - ST JOHNS COLLEGE	OTHERS - HOD	01-06-1995	31-07-2010	15	1	30
Total				29	4	10

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
THE INDIA CEMENTS LTD	GRADUATE ENGINEERING TRAINEE	ADMINISTRATI ON PRIVATE MAINTENANC E	23-08-1993	23-08-1994	1	0	1
Total					1	0	1

VI. C.O.E. Appointment Experience :



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

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
		4	500	100

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	265098
Name of the Department	COMPUTER SCIENCE AND ENGINEERING
Name of the Degree & Course	M.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MS. M ANITHA
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	7/436A-11 SEETHAKATHI STREET,SAMMANDHAPURAM
Line 2	RAJAPALAYAM,626117
District	VIRUDHUNAGAR
Telephone number	-
Mobile number	+91 - 9944714122
Email	ANITHARANISESI@GMAIL.COM
Gender	FEMALE
Community	MBC
PAN Number	BEDPA5921C
Passport Number	
Faculty code given by C.O.E.	9523022
Faculty code given by A.I.C.T.E.	1-1441533482
Date of Birth	14-06-1989
Age	35
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	COMPUTER SCIENCE AND ENGINEERING	2010	OTHERS - RAJA COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	76	FIRST CLASS	
P.G.	M.TECH.	OTHERS - NETWORK ENGINEERING	2012	OTHERS - KALASALINGAM UNIVERSITY	OTHERS - KALASALINGAM UNIVERSITY	81	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	04-06-2022	04-11-2024	2	5	1
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	01-06-2012	03-06-2022	10	0	3
Total				12	5	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)
25		50	2000	250

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

M.Anitha

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	264825
Name of the Department	MASTER OF BUSINESS ADMINISTRATION
Name of the Degree & Course	M.B.A.-MASTER OF BUSINESS ADMINISTRATION
Name of the faculty member	MRS. THANGAPOO A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	5/97,C AMMAN KOVIL STREET
Line 2	KURAVARKULA,SENGULAM POST ,627102
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9095581216
Email	THANGAMLOTUS.30@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BCIPT0162M
Passport Number	
Faculty code given by C.O.E.	9523260
Faculty code given by A.I.C.T.E.	1-9311059451
Date of Birth	18-03-1991
Age	33
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.B.A.	BUSINESS ADMINISTRATION	2011	OTHERS - GOVINDA MMAL ADITANAR WOMENS ARTS AND SCIENCE COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	65	FIRST CLASS	
P.G.	M.B.A.	MASTER OF BUSINESS ADMINISTRATION	2013	SCAD COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	79	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	22-06-2021	05-11-2024	3	4	14
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	03-06-2013	21-06-2021	8	0	19
Total				11	5	5

V. Industrial Experience :

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


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




AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
14		25	1000	50

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



Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	264978
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	DR. LIVINGSTON T
Regular Or Adjunct	Regular
Image	 <p>Dr. S. R. VIVEKUMAR Associate Professor PSN ENGINEERING COLLEGE Perumalpuram Post, Periyankottai Tirunelveli - 627 152</p>
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	7/138Z, ZION NAGAR, TUCKERAMMALPURAM
Line 2	PERUMALPURAM POST,627007
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 8870633225
Email	LIVI2018NOV@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AHOPL5459R
Passport Number	
Faculty code given by C.O.E.	9523068
Faculty code given by A.I.C.T.E.	1-9312623104
Date of Birth	29-05-1985
Age	39
I. Particulars of Educational Qualification : (only completed)	

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

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	11-10-2011	04-11-2024	13	0	25
PSN COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ASSISTANT PROFESSOR	11-05-2009	10-10-2011	2	4	31
Total				15	5	28

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
VIJAY ELECTRODES AND WIRES PVT LTD	QUALITY CONTROL ENGINEER	QUALITY CHECKING	09-05-2006	07-10-2007	1	4	30
Total					1	4	1

VI. C.O.E. Appointment Experience :


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



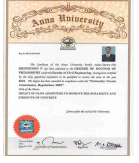
AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
		32	3000	100

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



Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	286547
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.E.-CIVIL ENGINEERING
Name of the faculty member	DR. BRIGHTSON P
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	18,8A-2, ALUVILAI, KANDHANVILAI POST
Line 2	KANIYAKUMARI - 629810
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9487311174
Email	DRBRIGHT.SA@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BGVPB9722J
Passport Number	
Faculty code given by C.O.E.	9602033
Faculty code given by A.I.C.T.E.	1-43460889321
Date of Birth	05-06-1984
Age	40
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	CIVIL ENGINEERING	2007	SUN COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	75	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2010	RVS COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	8.2	FIRST CLASS	
PH.D.	PH.D.	CIVIL ENGINEERING	2019	GOVERNMENT COLLEGE OF ENGINEERING, ERODE	ANNA UNIVERSITY	Y		

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

IMPACT OF NANO ADMIXTURES TO IMPROVE THE DURABILITY AND STRENGTH OF CON

III. Faculty in which Ph.D. was awarded

FACULTY OF CIVIL ENGINEERING

IV. Academic Experience :

(Start from the Current working Experience) *

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	28-10-2022	12-11-2024	2	0	16
SUN COLLEGE OF ENGINEERING AND TECHNOLOGY	OTHERS - LECTURER	21-06-2007	23-11-2008	1	5	3
OTHERS - RAJADHANI INSTITUTE OF TECHNOLOGY	ASSOCIATE PROFESSOR	18-03-2021	18-10-2022	1	7	1
OTHERS - ASOKA INSTITUTE OF ENGINEERING AND TECHNOLOGY	ASSOCIATE PROFESSOR	03-02-2020	27-02-2021	1	0	25
ARUNACHALA COLLEGE OF ENGINEERING FOR WOMEN	ASSISTANT PROFESSOR	01-07-2010	31-01-2020	9	6	31
Total				15	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)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
7		5	75	30

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



Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	271238
Name of the Department	AUTOMOBILE ENGINEERING
Name of the Degree & Course	B.E.-AUTOMOBILE ENGINEERING
Name of the faculty member	DR. N S SENTHUR
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	13 B, SIVAN KOVIL SOUTH MADA STREET
Line 2	PALAYAMKOTTAI 627002
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9942926967
Email	SENTHUR.NS@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	CEKPS9225P
Passport Number	
Faculty code given by C.O.E.	0
Faculty code given by A.I.C.T.E.	1-9485376603
Date of Birth	04-06-1986
Age	38
I. Particulars of Educational Qualification : (only completed)	

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

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

ANALYSIS OF PERFORMANCE COMBUSTION AND EMISSION CHARACTERISTICS OF BIODIESEL WATER EMULSIONS IN LOW HEAT REJECTION DI DIESEL ENGINE

III. Faculty in which Ph.D. was awarded

FACULTY OF MECHANICAL ENGINEERING

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
DHANALAKSHMI SRINIVASAN COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSOCIATE PROFESSOR	22-01-2020	20-01-2021	0	11	30
DHANALAKSHMI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	15-05-2012	30-06-2018	6	1	17
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	11-09-2023	05-11-2024	1	1	25
JOE SURESH ENGINEERING COLLEGE	ASSISTANT PROFESSOR	10-07-2008	08-07-2009	0	11	30
EINSTEIN COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	02-07-2018	07-01-2020	1	6	6
INFANT JESUS COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	01-04-2011	30-04-2012	1	0	30
OTHERS - BHARATH INSTITUTE OF HIGHER EDUCATION AND RESERCH	ASSOCIATE PROFESSOR	01-02-2021	30-06-2023	2	4	28
Total				14	3	18

V. Industrial Experience :

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


VI. C.O.E. Appointment Experience :


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





AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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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	9523 - PSN ENGINEERING COLLEGE
Faculty ID	288275
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-TAMIL
Name of the faculty member	DR. ARUMUGA SELVI P
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	23,ANNATHANA VINAYAGAR KOVIL STREET, PETTAI
Line 2	TIRUNELVELI - 627004
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9952256936
Email	PSELVI56SM@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BQEPA1901M
Passport Number	
Faculty code given by C.O.E.	9523321
Faculty code given by A.I.C.T.E.	1-43715739388
Date of Birth	29-05-1974
Age	50
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.A.	OTHERS - TAMIL	2000	OTHERS - UNIVERSITY OF MADRAS	UNIVERSITY OF MADRAS	Y	OTHERS - THIRD CLASS	
P.G.	OTHERS - M.A	TAMIL	2004	OTHERS - ALAGAPPA UNIVERSITY	ALAGAPPA UNIVERSITY	Y	SECOND CLASS	
PH.D.	PH.D.	TAMIL	2017	OTHERS - MDT HINDU COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	Y		
OTHERS - MPHIL	OTHERS - MPHIL	TAMIL	2012	OTHERS - MDT HINDU COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	Y	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

PERASIRIYAR C ELAKUVANARIN TAMIL
ILAKIYA PANGALIPPUM
PADAIPALUMAIYUM

III. Faculty in which Ph.D. was awarded

FACULTY OF SCIENCE AND
HUMANITIES

IV. Academic Experience :

(Start from the Current working Experience) *

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	29-09-2023	12-11-2024	1	1	14
OTHERS - ALADI ARUNA LIBERAL ARTS AND SCIENCE COLLEGE	ASSISTANT PROFESSOR	05-06-2023	28-09-2023	0	3	24
OTHERS - MDT HINDU COLLEGE	OTHERS - LECTURER	03-12-2012	01-12-2014	1	11	30
OTHERS - RANI ANNA GOVERNMENT COLLEGE FOR WOMEN	ASSISTANT PROFESSOR	02-07-2018	31-05-2023	4	10	30
Total				8	4	10

V. Industrial Experience :

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

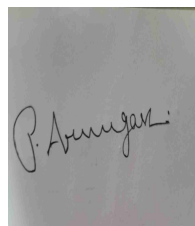
VI. C.O.E. Appointment Experience :


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


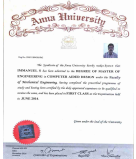
AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
7			350	10

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

Signature of the Faculty :



Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	294202
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. IMMANUEL S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	68, MAIN ROAD, RAMACHANDERAPURAM, MAVADI POST
Line 2	TIRUNELVELI -627107
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9789700531
Email	IMANMECH@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	ADBPI5635B
Passport Number	
Faculty code given by C.O.E.	9523320
Faculty code given by A.I.C.T.E.	1-434127111
Date of Birth	18-03-1982
Age	42
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	2003	DR SIVANTHI ADITANAR COLLEGE OF ENGINEERING	MANOMANIAM SUNDARAN UNIVERSITY	6.8	FIRST CLASS	
P.G.	M.E.	COMPUTER AIDED DESIGN	2014	ANNA UNIVERSITY REGIONAL CAMPUS, TIRUNELVELI	ANNA UNIVERSITY	7.1	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	11-08-2010	02-06-2023	12	9	23
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	03-06-2023	14-11-2024	1	5	12
Total				14	3	7

V. Industrial Experience :

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

VI. C.O.E. Appointment Experience :


Capacity at which service is extended for the conduct of 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)
15		2	250	

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



Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	299739
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL AND AUTOMATION ENGINEERING
Name of the faculty member	MR. FRANKLIN MOSES M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	4/83A, PURAVASERI, NEAR TO THIRAVIYAM HOSPITAL, THEREKALPUTHUR, THIRUPATHISARAM
Line 2	KANIYAKUMARI -629901
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9842079729
Email	FRANKLINMOSES01@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AATPF0046Q
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-3369652814
Date of Birth	15-12-1980
Age	44
I. Particulars of Educational Qualification : (only completed)	

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

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

IV. Academic Experience :

(Start from the Current working Experience) *

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
M.I.E.T. ENGINEERING COLLEGE (AUTONOMOUS)	ASSISTANT PROFESSOR	30-11-2011	29-11-2013	1	11	30
FRANCIS XAVIER ENGINEERING COLLEGE (AUTONOMOUS)	ASSISTANT PROFESSOR	27-06-2016	17-11-2016	0	4	21
VINS CHRISTIAN COLLEGE OF ENGINEERING	OTHERS - LECTURER	10-08-2006	23-06-2008	1	10	14
PSN ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	05-07-2019	20-11-2024	5	4	16
KALAIVANAR N.S.K COLLEGE OF ENGINEERING (FORMERLY K N S K COLLEGE OF ENGINEERING)	ASSISTANT PROFESSOR	04-12-2013	14-05-2016	2	5	11
UDAYA SCHOOL OF ENGINEERING	OTHERS - LECTURER	03-07-2008	12-11-2011	3	4	10
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	02-01-2017	02-07-2019	2	6	1
Total				17	11	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	9523 - PSN ENGINEERING COLLEGE
Faculty ID	292999
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.E.-ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the faculty member	MRS. NIRANJANADEVI V
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3/44-1,NORTH STREET,PALKULAM,TIRUKKALUR
Line 2	THIRUCHENDUR-628612
District	THOOTHUKUDI
Telephone number	-
Mobile number	+91 - 9940666008
Email	NIRANJANA68@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BBTPN0007M
Passport Number	
Faculty code given by C.O.E.	9523129
Faculty code given by A.I.C.T.E.	1-3358587161
Date of Birth	15-07-1989
Age	35
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2012	JAYARAJ ANNAPACKIAM CSI COLLEGE OF ENGINEERING	ANNA UNIVERSITY	7.98	FIRST CLASS	
P.G.	M.E.	APPLIED ELECTRONICS	2016	SCAD COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.74	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	29-06-2016	14-11-2024	8	4	16
Total				8	4	18

V. Industrial Experience :

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

VI. C.O.E. Appointment Experience :

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


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



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

Signature of the Faculty :



N. Pranjana

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	293311
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. MAHESH RAJA A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	PLOT NO 59, MUTHAMIL RANI NAGAR, NEAR KARUNGULAM.
Line 2	TIRUNELVELI - 627356
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9994586143
Email	AKMAHESHRAJA9@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	BOOPM4364L
Passport Number	
Faculty code given by C.O.E.	9523192
Faculty code given by A.I.C.T.E.	1-4522193784
Date of Birth	09-02-1990
Age	34
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	2011	OTHERS - NOORUL ISLAM COLLEGE OF ENGINEERING	ANNA UNIVERSITY	66	FIRST CLASS	
P.G.	M.E.	COMPUTER AIDED DESIGN	2015	ADHIYAM AAN COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	84	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	12-06-2018	14-11-2024	6	5	3
NARAYANAGURU COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	01-06-2015	08-06-2018	3	0	8
Total				9	5	13

V. Industrial Experience :

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

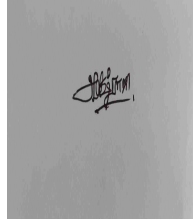
VI. C.O.E. Appointment Experience :


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



AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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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	9523 - PSN ENGINEERING COLLEGE
Faculty ID	294461
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. PREMADEVI P
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	75A,VAIKKANKARAI STREET
Line 2	ALWARTHIRUNAGARI-628612
District	THOOTHUKUDI
Telephone number	-
Mobile number	+91 - 9344756561
Email	JACKULINEBTECH@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	DAHPP5332J
Passport Number	
Faculty code given by C.O.E.	3105290
Faculty code given by A.I.C.T.E.	1-7493636385
Date of Birth	16-05-1991
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.	INFORMATION TECHNOLOGY	2013	NATIONAL ENGINEERING COLLEGE (AUTONOMOUS)	ANNA UNIVERSITY	6.7	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2015	DHANALAKSHMI SRINIVASAN COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	79	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	14-06-2024	14-11-2024	0	5	1
DHANALAKSHMI SRINIVASAN COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	04-09-2019	20-11-2020	1	2	17
Total				1	7	21

V. Industrial Experience :

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


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



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

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



Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	294865
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.E.-GENERAL ENGINEERING
Name of the faculty member	MRS. PRABHA C
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	38A/7 MATHA STREET,PATTAKASALIYANVILLAI
Line 2	NAGERCOIL-629002
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 8438563808
Email	PRABHAC707@GMAIL.COM
Gender	FEMALE
Community	MBC
PAN Number	BWAPC0420R
Passport Number	
Faculty code given by C.O.E.	9523333
Faculty code given by A.I.C.T.E.	1-44727967291
Date of Birth	07-11-1990
Age	34
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2012	SUN COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	8.09	FIRST CLASS	
P.G.	M.E.	COMMUNICATION SYSTEMS	2018	INFANT JESUS COLLEGE OF ENGINEERING	ANNA UNIVERSITY	7.88	SECOND CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

IV. Academic Experience :

(Start from the Current working Experience) *

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	08-04-2024	14-11-2024	0	7	7
Total				0	7	10

V. Industrial Experience :

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

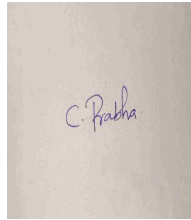
VI. C.O.E. Appointment Experience :


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

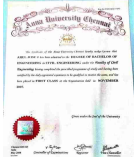

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of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

Signature of the Faculty :

A rectangular box containing a piece of light-colored paper with the handwritten signature "C Pratha" in blue ink.

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	297663
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.E.-CIVIL ENGINEERING
Name of the faculty member	MR. ARUL JOSE J
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	NORTH STREET, MELA ASARIPALLAM
Line 2	ASARIPALLAM PO, 629201
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9940844209
Email	ARULJOSE.AN@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	ANQPA0759H
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-44727474851
Date of Birth	13-06-1982
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	2007	RAJAS ENGINEERING COLLEGE	ANNA UNIVERSITY	7.2	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2010	SUN COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.6	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

IV. Academic Experience :

(Start from the Current working Experience) *

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	04-11-2024	16-11-2024	0	0	13
Total				0	0	13

V. Industrial Experience :

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

VI. C.O.E. Appointment Experience :


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



AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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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 'J. Oh', is centered within a light gray rectangular box.

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	298239
Name of the Department	AUTOMOBILE ENGINEERING
Name of the Degree & Course	M.E.-AUTOMOBILE ENGINEERING
Name of the faculty member	MR. CHAIRMAKANI R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3/124, MAIN ROAD, LAKSHMIPURAM, V.K.PUTHUR TALUK.
Line 2	TENKASI - 627861
District	TENKASI
Telephone number	-
Mobile number	+91 - 9865281980
Email	CHAIRMAKANI70@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BSVPC1626E
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-4643329165
Date of Birth	02-04-1966
Age	58
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	1995	OTHERS - SATHYABAMA ENGINEERING COLLEGE	UNIVERSITY OF MADRAS	58	SECOND CLASS	
P.G.	M.E.	MANUFACTURING ENGINEERING	2014	SARDAR RAJA COLLEGE OF ENGINEERING	ANNA UNIVERSITY	6.87	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	22-12-2022	18-11-2024	1	10	28
OTHERS - THANGAPALAM POLYTECHNIC COLLEGE	OTHERS - LECTURER	08-04-2014	29-07-2016	2	3	22
OTHERS - VEERASAMY CHETIYAR POLYTECHNIC COLLEGE	OTHERS - LECTURER	03-01-2011	31-12-2012	1	11	29
Total				6	2	21

V. Industrial Experience :

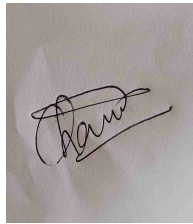
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
QUALITY MOTORS SERVICES CHENNAI	MANAGER	MANAGER	24-10-2002	16-11-2011	9	0	24
KUMARASAMY AUTOMOBILES MARUTHI PVT LTD CHENNAI	SERVICE ENGINEER	SERVICE ENGINEER	14-03-2000	22-10-2002	2	7	9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

VI. C.O.E. Appointment Experience :


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



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

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



Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	298283
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.E.-GENERAL ENGINEERING
Name of the faculty member	MRS. ANBUKANI M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	2/10, 5-21, 10TH STREET, KEELASURANDAI,V.K.PUTHUR TALUK
Line 2	TENKASI - 627859
District	TENKASI
Telephone number	-
Mobile number	+91 - 8190869437
Email	ANBUKANI679@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BQLPA8396R
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-44727825981
Date of Birth	23-02-1991
Age	33
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2012	SARDAR RAJA COLLEGE OF ENGINEERING	ANNA UNIVERSITY	7.62	FIRST CLASS	
P.G.	M.E.	VLSI DESIGN	2014	SARDAR RAJA COLLEGE OF ENGINEERING	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	11-11-2024	18-11-2024	0	0	8
Total				0	0	8

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
VIDAL HEALTH CARE PVT LTD TIRUNELVELI	LIASION OFFICER	DATA ENTRY OFFICER	02-03-2015	31-08-2017	2	5	30
Total					2	5	2


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

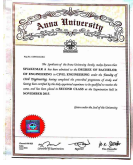

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of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



Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	299383
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.E.-CIVIL ENGINEERING
Name of the faculty member	MR. SIVA KUMAR
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	258, MUPPIDATHI AMMAN KOVIL STREET, THENPATHU
Line 2	TIRUNELVELI - 627006
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9362172250
Email	MSIVA84@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	BPGPS3180B
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-44727825994
Date of Birth	08-12-1984
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	2015	GOVERNMENT COLLEGE OF ENGINEERING TIRUNELVELI	ANNA UNIVERSITY	Y	SECOND CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2020	PSN ENGINEERING COLLEGE	ANNA UNIVERSITY	Y	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	08-11-2024	19-11-2024	0	0	12
Total				0	0	12

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
ARK BUILDERS AND PROPERTIES PROMOTERS PVT LTD	PROJECT MANAGER	STRUCTURAL DEPT	03-07-2006	01-11-2024	18	3	30
Total					18	3	1


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



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

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



Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	299533
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECH.-INFORMATION TECHNOLOGY
Name of the faculty member	MRS. GANGA S V
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	8/67, POOLANCODE NULLIVILAI, PEYANKUZHI
Line 2	KANIYAKUMARI - 629809
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9789126863
Email	GANGASV24@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BEQPG6875J
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-43814287298
Date of Birth	24-02-1990
Age	34
I. Particulars of Educational Qualification : (only completed)	

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

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	04-05-2023	19-11-2024	1	6	16
Total				1	6	19

V. Industrial Experience :

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


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



AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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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 'Rana', is centered within a light gray rectangular box.

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	299651
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.TECH.-AGRICULTURAL ENGINEERING
Name of the faculty member	MR. BEN CLINTON D
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	19/109, DDS ILLAM, KANDANVILAI AND POST
Line 2	NAGARCOIL - 629810
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 7402366869
Email	BENCLINTON123@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	CNBPB7178J
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-447278826184
Date of Birth	11-07-1994
Age	30
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	CIVIL ENGINEERING	2016	JEPPIAAR SRR ENGINEERING COLLEGE	ANNA UNIVERSITY	6.07	SECOND CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2019	OTHERS - SATHYABAMA INSTITUTE OF SCIENCE AND TECHNOLOGY	OTHERS - SATHYABAMA UNIVERSITY	7.64	DISTINCTION	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
THAMIRABHARANI ENGINEERING COLLEGE	ASSISTANT PROFESSOR	29-08-2022	20-06-2023	0	9	23
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	23-10-2024	19-11-2024	0	0	28
Total				0	10	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	9523 - PSN ENGINEERING COLLEGE
Faculty ID	299900
Name of the Department	AUTOMOBILE ENGINEERING
Name of the Degree & Course	B.E.-AUTOMOBILE ENGINEERING
Name of the faculty member	MR. SURESH D
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	35/34, NALAYIRAMUDAIYARKULAM, SONAGANVILAI POST, TIRUCHENDUR
Line 2	THOOTHUKUDI -628201
District	THOOTHUKUDI
Telephone number	-
Mobile number	+91 - 7667764969
Email	DSURESHENG02@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	EXGPS8543M
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-9597107906
Date of Birth	02-04-1979
Age	45
I. Particulars of Educational Qualification : (only completed)	

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

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
OTHERS - SAMUEL POLYTECHNIC COLEGE	OTHERS - LECTURER	23-06-2008	10-09-2010	2	2	18
OTHERS - CHANDY COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	20-06-2016	29-07-2020	4	1	10
OTHERS - PSN POLYTECHNIC COLLEGE	OTHERS - LECTURER	14-09-2010	29-07-2011	0	10	16
OTHERS - CHANDY ITI	PRINCIPAL	13-08-2020	22-12-2022	2	4	10
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	10-01-2023	20-11-2024	1	10	11
Total				11	5	8

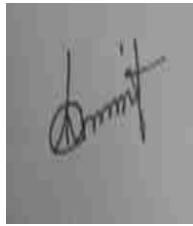
V. Industrial Experience :


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



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

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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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	9523 - PSN ENGINEERING COLLEGE
Faculty ID	299942
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL AND AUTOMATION ENGINEERING
Name of the faculty member	MR. SIVAKUMAR G
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	2/65, NARNAMANGALKAM
Line 2	RAMNADHAPURAM -623537
District	RAMANATHAPURAM
Telephone number	-
Mobile number	+91 - 7200285719
Email	SIVAENGG047@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	FIYPS7217E
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-44729247771
Date of Birth	20-05-1992
Age	32
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	2014	UNIVERSITY COLLEGE OF ENGINEERING RAMANATHAPURAM	BHARATHIDASAN UNIVERSITY	7.31	FIRST CLASS	
P.G.	M.E.	THERMAL ENGINEERING	2019	ANNA VAILANKANNI COLLEGE OF ENGINEERING	ANNA UNIVERSITY	7.36	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
OTHERS - MARUTHI POLYTECHNIC COLLEGE	OTHERS - LECTURER	28-11-2019	26-06-2023	3	6	29
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	12-02-2024	20-11-2024	0	9	9
OTHERS - PSN POLYTECHNIC COLLEGE	OTHERS - LECTURER	06-06-2016	10-07-2017	1	1	5
Total				5	5	16

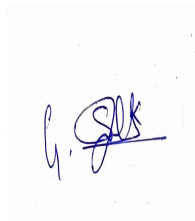
V. Industrial Experience :

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	9523 - PSN ENGINEERING COLLEGE
Faculty ID	304761
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-MATHEMATICS
Name of the faculty member	MRS. INFANT JINESHA M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	17/140, ERIYANVILAI, PALLIYADI POST
Line 2	KANIYAKUMARI - 629169
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9629166935
Email	JINFANTA64@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	GORPM2396A
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-44727380338
Date of Birth	12-03-1996
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.SC.	OTHERS - MATHEMATICS	2016	OTHERS - ANNAI VELANKANNI COLLEGE	MANOMANIAM SUNDARAN UNIVERSITY	76	DISTINCTION	
P.G.	M.SC.	OTHERS - MATHEMATICS	2018	OTHERS - SCOTT CHRISTIAN COLLEGE	MANOMANIAM SUNDARAN UNIVERSITY	72	FIRST CLASS	
OTHERS - MPHIL	OTHERS - MPHIL	OTHERS - MATHEMATICS	2019	OTHERS - ST HINDU COLLEGE	MANOMANIAM SUNDARAN UNIVERSITY	9.17	DISTINCTION	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	21-10-2024	26-11-2024	0	1	6
Total				0	1	6

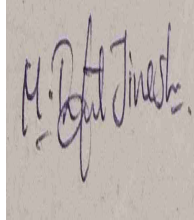
V. Industrial Experience :

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	9523 - PSN ENGINEERING COLLEGE
Faculty ID	309604
Name of the Department	COMPUTER SCIENCE AND ENGINEERING
Name of the Degree & Course	M.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MRS. ANUSHA V
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	60, AROMA NAGAR, JOTHI PURAM
Line 2	TIRUNELVELI - 627007
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9442150162
Email	VKANUSHA1234@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	DRVPA4620K
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-44727826270
Date of Birth	29-04-1997
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.	COMPUTER SCIENCE AND ENGINEERING	2018	OTHERS - RAJAS INTERNATIONAL INSTITUTE OF TECHNOLOGY FOR WOMEN	ANNA UNIVERSITY	7.14	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2020	MAR EPHRAEM COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	8.41	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	26-11-2024	29-11-2024	0	0	4
Total				0	0	4

V. Industrial Experience :

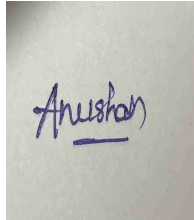
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

VI. C.O.E. Appointment Experience :


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




AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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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	9523 - PSN ENGINEERING COLLEGE
Faculty ID	287868
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-ENGLISH
Name of the faculty member	MR. ALISTER LAWRENCE
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1192G, AJR NAGR , KTC NAGR, MAHARAJANAGAR POST
Line 2	TIRUNELVELI - 627011
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9789424946
Email	DUKELAWRANCE200@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	DLIPA9864G
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-44727380484
Date of Birth	08-03-1992
Age	32
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.A.	ENGLISH	2012	OTHERS - SATAKATH ULLAH APPA COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	35	OTHERS - THIRD CLASS	
P.G.	OTHERS - MA	OTHERS - ENGLISH	2015	OTHERS - ST JOHNS COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	62	FIRST CLASS	
OTHERS - MPHIL	OTHERS - MPHIL	OTHERS - ENGLISH	2016	OTHERS - ST JOHNS COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	71	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	18-10-2024	12-11-2024	0	0	26
OTHERS - MS UNIVERSITY CONSTITUTIONAL COLLEGE THISAYANVILLAI	ASSISTANT PROFESSOR	15-12-2016	30-04-2019	2	4	17
OTHERS - ST JOHNS COLLEGE	ASSISTANT PROFESSOR	04-03-2024	01-10-2024	0	6	29
Total				3	0	12

V. Industrial Experience :

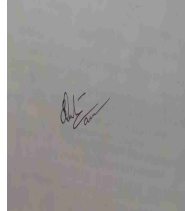
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days


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




AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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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	9523 - PSN ENGINEERING COLLEGE
Faculty ID	287685
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-PHYSICS
Name of the faculty member	MRS. ANURADHA S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	78, PERUMAL MADA STREET, SOUTH BAZZAR, PALAYAMKOTTAI
Line 2	TIRUNELVELI - 627002
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9380612092
Email	ANURADHA.RPT@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	GYFPS7283N
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-44727380360
Date of Birth	15-08-1977
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 - PHYSICS	1998	OTHERS - SARAH TUCKER COLLEGE	MANOMANIAM SUNDARAN UNIVERSITY	80.1	FIRST CLASS	
P.G.	M.SC.	OTHERS - PHYSICS	2001	OTHERS - SARAH TUCKER COLLEGE	MANOMANIAM SUNDARAN UNIVERSITY	63.3	FIRST CLASS	
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - PHYSICS	2004	OTHERS - MANOMANIAM SUNDARAN UNIVERSITY	MANOMANIAM SUNDARAN UNIVERSITY	65.5	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	21-10-2024	12-11-2024	0	0	23
OTHERS - KBJ GURRUKULAM CBSE SENIOR SECONDARY SCHOOL	OTHERS - TEACHER PHYSICS	01-06-2013	30-04-2023	9	10	30
Total				9	11	28

V. Industrial Experience :

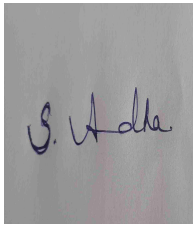
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days


VI. C.O.E. Appointment Experience :



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

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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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	9523 - PSN ENGINEERING COLLEGE
Faculty ID	299410
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.E.-CIVIL ENGINEERING
Name of the faculty member	MR. MOHAMED ILLYAS
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	18/5, AVVAIYAR STREET, SATHYA ROAD
Line 2	SAMATHANAPURAM, 627002
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9842971458
Email	JMDILLYAS@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BATPM3472N
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-44727826061
Date of Birth	01-02-1988
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.	CIVIL ENGINEERING	2021	KALAIVANAR N.S.K COLLEGE OF ENGINEERING (FORMERLY KNSK COLLEGE OF ENGINEERING)	ANNA UNIVERSITY	7.65	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2023	NOORUL ISLAM COLLEGE OF ENGINEERING AND TECHNOLOGY	OTHERS - NOORUL ISLAM CENTRE FOR HIGHER EDUCATION	7.99	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	11-11-2024	19-11-2024	0	0	9
Total				0	0	9

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
ARK BUILDERS PVT LTD	SITE ENGINEER	SITE ENGINEER	18-06-2007	01-11-2024	17	4	14
Total					17	4	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)

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



Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	306467
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-PHYSICS
Name of the faculty member	MRS. ABISHA P
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	4-194, SARALVILAI, THIPPIRAMALAI
Line 2	KANIYAKUMARI - 629157
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9489319438
Email	AABISHA32@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	CYCPV8866K
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-44727826232
Date of Birth	20-05-1996
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.SC.	OTHERS - PHYSICS	2016	OTHERS - UDAYA COLLEGE OF ARTS AND SCIENCE	MANOMANIAM SUNDARAN UNIVERSITY	6.8	FIRST CLASS	
P.G.	M.SC.	OTHERS - PHYSICS	2018	OTHERS - NOORUL ISLAM UNIVERSITY	OTHERS - NOORUL ISLAM UNIVERSITY	7.29	FIRST CLASS	
OTHERS - MPHIL	OTHERS - MPHIL	OTHERS - PHYSICS	2019	OTHERS - NOORUL ISLAM UNIVERSITY	OTHERS - NOORUL ISLAM UNIVERSITY	84	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	21-10-2024	27-11-2024	0	1	7
Total				0	1	7


V. Industrial Experience :

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


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



AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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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	9523 - PSN ENGINEERING COLLEGE
Faculty ID	284705
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. MANISHA SANTHIYA
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	55/1, SOUTH STREET, SIVASHANMUGAPURAM,KALAKAD
Line 2	TIRUNELVELI - 627501
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 7397132550
Email	MANISHASANTHIYA1989@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	EFUPM1254K
Passport Number	
Faculty code given by C.O.E.	9523340
Faculty code given by A.I.C.T.E.	1-44730962091
Date of Birth	17-08-1999
Age	25
I. Particulars of Educational Qualification : (only completed)	

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

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

IV. Academic Experience :

(Start from the Current working Experience) *

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	16-09-2024	11-11-2024	0	1	26
Total				0	1	26

V. Industrial Experience :

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

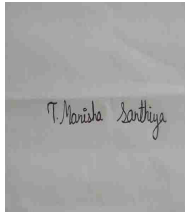
VI. C.O.E. Appointment Experience :

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


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



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

Signature of the Faculty :



T. Manisha Sathya

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	310942
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. USHA U K
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	18, PRIYA GARDEN THACHANALLUR
Line 2	TIRUNELVELI - 627358
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 8903790465
Email	UKUSHA14490@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	AFRPU0549N
Passport Number	
Faculty code given by C.O.E.	9523345
Faculty code given by A.I.C.T.E.	1-8903790465
Date of Birth	14-04-1990
Age	35
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2011	PET ENGINEERING COLLEGE	ANNA UNIVERSITY	82	DISTINCT ION	
P.G.	M.E.	VLSI DESIGN	2017	PSN ENGINEERING COLLEGE	ANNA UNIVERSITY	82	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	17-12-2024	20-01-2025	0	1	4
OTHERS - PASTOR LENSSEN POLYTECHNIC COLLEGE	OTHERS - LECTURER	06-06-2011	30-11-2012	1	5	25
Total				1	6	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**

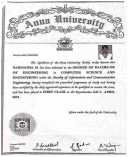

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of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



Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	311353
Name of the Department	COMPUTER SCIENCE AND ENGINEERING
Name of the Degree & Course	B.TECH.-ARTIFICIAL INTELLIGENCE AND DATA SCIENCE
Name of the faculty member	MS. NARMATHA M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	312,NORTH STREET ,SUNDERRAJAPURAM,DOHNAVUR
Line 2	627102
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9384218905
Email	NARMATHANARMU003@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	HCCPM6346A
Passport Number	
Faculty code given by C.O.E.	9523348
Faculty code given by A.I.C.T.E.	1-9384218905
Date of Birth	03-02-2000
Age	25
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	COMPUTER SCIENCE AND ENGINEERING	2021	DMI ENGINEERING COLLEGE	ANNA UNIVERSITY	7.55	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2024	SCAD COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.81	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	03-10-2024	23-01-2025	0	3	21
Total				0	3	22

V. Industrial Experience :

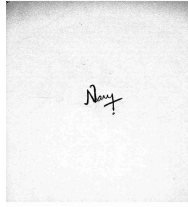
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

VI. C.O.E. Appointment Experience :


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



AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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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	9523 - PSN ENGINEERING COLLEGE
Faculty ID	311520
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.TECH.-AGRICULTURAL ENGINEERING
Name of the faculty member	MS. SUBHA NANDHINI R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	417, 5TH CROSS STREET, KODEESHWARAN NAGAR.
Line 2	TIRUNELVELI - 627006
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9443150124
Email	SUBHA07RAM@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	HXTPS2108L
Passport Number	
Faculty code given by C.O.E.	9523344
Faculty code given by A.I.C.T.E.	1-9443150124
Date of Birth	07-06-1996
Age	29
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.TECH.	OTHERS - CIVIL ENGINEERING	2017	OTHERS - KALASALI NGAM UNIVERSITY	OTHERS - KALASALI NGAM UNIVERSITY	7.47	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2024	PSN ENGINEERING COLLEGE	ANNA UNIVERSITY	8.20	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	28-10-2024	24-01-2025	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
KOTAK MAHINDRA LIFE	RECRUITMENT DEVELOPMENT MANAGER	HIRING	11-06-2018	11-06-2019	1	0	1
Total					1	0	1


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

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



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



Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	291620
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-AUTOMOBILE ENGINEERING
Name of the faculty member	MR. SELVAKUMAR C
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3/122,NAGESWARINAGAR,SUBRAMANIYAPURAM,MARANERI
Line 2	SIVAKASI-626124
District	VIRUDHUNAGAR
Telephone number	-
Mobile number	+91 - 8098007565
Email	SELVASWAMY21@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	CVJPC5046E
Passport Number	
Faculty code given by C.O.E.	9523312
Faculty code given by A.I.C.T.E.	1-43815186490
Date of Birth	21-09-1995
Age	29

I. Particulars of Educational Qualification : (only completed)

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

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	10-05-2023	13-11-2024	1	6	4
Total				1	6	7

V. Industrial Experience :

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

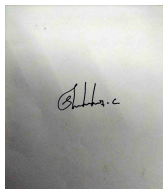
VI. C.O.E. Appointment Experience :


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

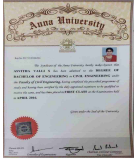

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of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

Signature of the Faculty :



Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	311667
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	M.E.-STRUCTURAL ENGINEERING
Name of the faculty member	MRS. ASVITHA VALLI S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	427/2, NARAYANASAMY KOVIL STREET, MELA MAVADI, MAVADI.
Line 2	TIRUNELVELI - 627107
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 8925051505
Email	SPSASVITHA@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BZPPA2741F
Passport Number	
Faculty code given by C.O.E.	123456
Faculty code given by A.I.C.T.E.	1-8925051505
Date of Birth	15-05-1995
Age	30
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	CIVIL ENGINEERING	2016	MEPCO SCHLENK ENGINEERING COLLEGE (AUTONOMOUS)	ANNA UNIVERSITY	85	FIRST CLASS	
P.G.	M.TECH.	OTHERS - STRUCTURAL AND CONSTRUCTION ENGINEERING	2018	AMRITA COLLEGE OF ENGINEERING AND TECHNOLOGY	OTHERS - AMRITA VISHWA VIDYAPEETAM	85	DISTINCTION	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	23-01-2025	24-01-2025	0	0	2
Total				0	0	2

V. Industrial Experience :

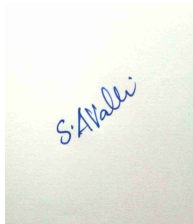
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

VI. C.O.E. Appointment Experience :


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




AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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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	9523 - PSN ENGINEERING COLLEGE
Faculty ID	313399
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-MATHEMATICS
Name of the faculty member	MRS. ALICE DIANA D
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	53B, GANDHI NAGAR WEST STREET, VICKRAMASINGAPURAM
Line 2	TIRUNELVELI - 627425
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 7708277841
Email	ALICEDIANA34@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	CPHPA6847K
Passport Number	
Faculty code given by C.O.E.	4879586
Faculty code given by A.I.C.T.E.	1-7708277841
Date of Birth	30-04-1991
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
OTHERS - M.PHILL	OTHERS - MATHEMATICS	MATHEMATICS	2018	OTHERS - MOTHER THERESA WOMENS UNIVERSITY	OTHERS - MOTHER THERESA UNIVERSITY	75	FIRST CLASS	
OTHERS - M.SC	OTHERS - MATHEMATICS	MATHEMATICS	2014	OTHERS - SRI PRAMAKALYANI COLLEGE	MANOMANIAM SUNDARAN UNIVERSITY	80	DISTINCTION	
OTHERS - B.SC	OTHERS - MATHEMATICS	MATHEMATICS	2011	OTHERS - CSI JAYARAJ ANNAPAKIYAM COLLEGE	MANOMANIAM SUNDARAN UNIVERSITY	78	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	29-12-2022	30-01-2025	2	1	2
Total				2	1	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	9523 - PSN ENGINEERING COLLEGE
Faculty ID	313639
Name of the Department	BIO-MEDICAL
Name of the Degree & Course	B.E.-BIOMEDICAL ENGINEERING
Name of the faculty member	MR. JACOB NEWTON S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	4/10N, SOUTH STREET, MUDALUR, SATTANKULAM
Line 2	THOTHUKUDI - 628702
District	THOOTHUKUDI
Telephone number	-
Mobile number	+91 - 9488740923
Email	JACOB.INNOVATION@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	ASIPJ5338E
Passport Number	
Faculty code given by C.O.E.	8794688
Faculty code given by A.I.C.T.E.	1-9488740923
Date of Birth	18-04-1993
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	2016	JAYARAJ ANNAPACKIAM CSI COLLEGE OF ENGINEERING	ANNA UNIVERSITY	64	SECOND CLASS	
P.G.	M.E.	VLSI DESIGN	2018	PSN ENGINEERING COLLEGE	ANNA UNIVERSITY	74	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

IV. Academic Experience :

(Start from the Current working Experience) *

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	21-01-2025	30-01-2025	0	0	10
Total				0	0	10

V. Industrial Experience :

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

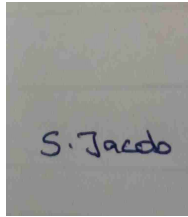
VI. C.O.E. Appointment Experience :

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



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

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

Signature of the Faculty :

A rectangular box containing a photograph of a piece of paper with the handwritten signature "S. Jacdo" in blue ink.

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	313655
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. SARASWATHI N
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	5C, SARDHARPURAM NORTH STREET, PALAYAPETTAI.
Line 2	TIRUNELVELI - 627008
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9843122123
Email	SARANATRAJ25@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	EHQPS2884K
Passport Number	
Faculty code given by C.O.E.	8468794
Faculty code given by A.I.C.T.E.	1-9843122123
Date of Birth	20-05-1989
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	2011	JAYARAM COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	76	FIRST CLASS	
P.G.	M.E.	VLSI DESIGN	2016	PSN ENGINEERING COLLEGE	ANNA UNIVERSITY	80	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	30-01-2025	31-01-2025	0	0	2
Total				0	0	2

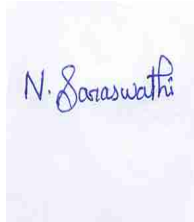
V. Industrial Experience :

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


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



AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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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 that reads "N. Saraswathi". The signature is written in a cursive style and is positioned in the upper left corner of a rectangular box.

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	263835
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECH.-INFORMATION TECHNOLOGY
Name of the faculty member	MRS. THARIK NAZEEM A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	17, RAHMATH NAGAR, RAHMAN PETTAI
Line 2	PETTAI, 627004
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 7871988784
Email	THARIKNAIMS@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	ANOPT1009P
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-7430765530
Date of Birth	01-04-1992
Age	32
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.TECH.	INFORMATION TECHNOLOGY	2013	OTHERS - MANONMANIAM SUNDARANAR UNIVERSITY	MANOMANIAM SUNDARANAR UNIVERSITY	87.92	DISTINCTION	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2016	SCAD COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	84.5	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	14-06-2019	30-10-2024	5	4	16
Total				5	4	18

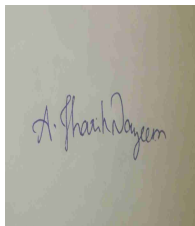
V. Industrial Experience :

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


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


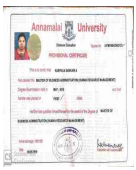
AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
		30	1500	

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 "A. Ghosh".

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	265549
Name of the Department	MASTER OF BUSINESS ADMINISTRATION
Name of the Degree & Course	M.B.A.-MASTER OF BUSINESS ADMINISTRATION
Name of the faculty member	MRS. KARPAGASANKARI A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	4/549,B,VOC NAGAR
Line 2	GOPALASAMUTHIRAM ROAD, SUTHAMALLI
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9003438887
Email	KSANKARI1997@GMAIL.COM
Gender	FEMALE
Community	OC
PAN Number	JNPPK1502N
Passport Number	
Faculty code given by C.O.E.	000000
Faculty code given by A.I.C.T.E.	1-7389454378
Date of Birth	08-06-1997
Age	27
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.B.A.	BUSINESS ADMINISTRATION	2017	OTHERS - SRI SARATHA COLLEGE FOR WOMEN	MANOMANIAM SUNDARNAR UNIVERSITY	65	FIRST CLASS	
P.G.	M.B.A.	MASTER OF BUSINESS ADMINISTRATION	2019	ANNAMALAI UNIVERSITY	ANNAMALAI UNIVERSITY	67	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	03-09-2019	07-03-2024	4	6	5
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	02-09-2024	04-11-2024	0	2	3
Total				4	8	12

V. Industrial Experience :

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

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

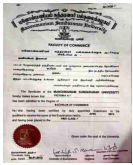

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated) 500	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best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

A handwritten signature in black ink, appearing to read "A. K. Chakraborty", is centered within a rectangular box. The signature is written in a cursive style.

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	266011
Name of the Department	MASTER OF BUSINESS ADMINISTRATION
Name of the Degree & Course	M.B.A.-MASTER OF BUSINESS ADMINISTRATION
Name of the faculty member	MRS. VICTORIA A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	7/271,KARTHIKEYAN NAGAR,B COLONY
Line 2	REDDIARPATTI,627007
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 8300051669
Email	BALAVICTORIA45@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BXKPV1087L
Passport Number	
Faculty code given by C.O.E.	9523327
Faculty code given by A.I.C.T.E.	1-43715686454
Date of Birth	10-07-1990
Age	34
I. Particulars of Educational Qualification : (only completed)	

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

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	03-07-2019	04-11-2024	5	4	2
Total				5	4	4

V. Industrial Experience :

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

VI. C.O.E. Appointment Experience :

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



AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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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	9523 - PSN ENGINEERING COLLEGE
Faculty ID	266090
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. K PUNGARAJAN
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	2/51 SOUTH STREET LAKSHMIPURAM AKKANAYAKKAN PATTI POST
Line 2	THOOTHUKUDI 628303
District	THOOTHUKUDI
Telephone number	-
Mobile number	+91 - 9345241169
Email	PUNGARAJAN1996@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	HDBPP2030J
Passport Number	
Faculty code given by C.O.E.	9523330
Faculty code given by A.I.C.T.E.	1-44175783041
Date of Birth	02-09-1996
Age	28
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	COMPUTER SCIENCE AND ENGINEERING	2019	THAMIRABHARANI ENGINEERING COLLEGE	ANNA UNIVERSITY	5.84	SECOND CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2023	PSN ENGINEERING COLLEGE	ANNA UNIVERSITY	8.07	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	08-01-2024	04-11-2024	0	9	28
Total				0	9	2

V. Industrial Experience :

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

VI. C.O.E. Appointment Experience :

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



AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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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	9523 - PSN ENGINEERING COLLEGE
Faculty ID	266397
Name of the Department	MASTER OF BUSINESS ADMINISTRATION
Name of the Degree & Course	M.B.A.-MASTER OF BUSINESS ADMINISTRATION
Name of the faculty member	MRS. MAHARANI N
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	22 VOC NAGAR 4TH STREET
Line 2	KOVILPATTI
District	THOOTHUKUDI
Telephone number	-
Mobile number	+91 - 9952446859
Email	PERUMALKUTTIMA041120@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	DHOPN6592Q
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-43841014033
Date of Birth	05-05-1992
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 obtained / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.SC.	OTHERS - ELECTRONICS AND COMMUNICATION	2012	OTHERS - SSDM COLLEGE	MANOMANI AM SUNDARNAR UNIVERSITY	75	DISTINCTION	
P.G.	M.B.A.	MASTER OF BUSINESS ADMINISTRATION	2014	INFANT JESUS COLLEGE OF ENGINEERING	ANNA UNIVERSITY	75	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	10-06-2019	04-11-2024	5	4	25
Total				5	4	27

V. Industrial Experience :

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

VI. C.O.E. Appointment Experience :


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


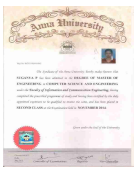
AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of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

Signature of the Faculty :



Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	266497
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECH.-INFORMATION TECHNOLOGY
Name of the faculty member	MRS. SUGANYA P
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	8/24 DHANALAKSHMI NAGAR
Line 2	REDDIYARPATTI 627007
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9095327125
Email	SUGANYA021186@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	EZWPS6606D
Passport Number	
Faculty code given by C.O.E.	9523307
Faculty code given by A.I.C.T.E.	1-43413606348
Date of Birth	02-11-1986
Age	38
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.TECH.	INFORMATION TECHNOLOGY	2009	PSN COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	68	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2014	VINS CHRISTIAN COLLEGE OF ENGINEERING	ANNA UNIVERSITY	75	SECOND CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	03-02-2023	04-11-2024	1	9	2
Total				1	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)	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	9523 - PSN ENGINEERING COLLEGE
Faculty ID	267016
Name of the Department	MASTER OF BUSINESS ADMINISTRATION
Name of the Degree & Course	M.B.A.-MASTER OF BUSINESS ADMINISTRATION
Name of the faculty member	MR. GLADWIN C M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1/281,PALLIVILAGAM HOUSE
Line 2	KIRATHOOR,629160
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9042406963
Email	WINGLAD70@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AMIPG9422C
Passport Number	
Faculty code given by C.O.E.	9523319
Faculty code given by A.I.C.T.E.	1-11317954585
Date of Birth	05-06-1980
Age	44
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.B.A.	BUSINESS ADMINISTRATION	2004	OTHERS - CSI JAYARAJ ANNAPACKIAM NALLUR	MANOMANIAM SUNDARAR UNIVERSITY	58	SECOND CLASS	
P.G.	M.B.A.	MASTER OF BUSINESS ADMINISTRATION	2006	OTHERS - VHNSN	MADURAI KAMARAJ UNIVERSITY	68	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
OTHERS - ST JOSPEH UNIVERSITY TONZONIA	ASSISTANT PROFESSOR	22-05-2014	27-07-2018	4	2	6
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	07-08-2023	05-12-2024	1	3	30
SCAD COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	05-06-2009	09-05-2014	4	11	5
EINSTEIN COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	01-09-2021	31-07-2023	1	10	30
Total				12	4	14

V. Industrial Experience :

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


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



AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
1		8	200	50

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



Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	267341
Name of the Department	MASTER OF BUSINESS ADMINISTRATION
Name of the Degree & Course	M.B.A.-MASTER OF BUSINESS ADMINISTRATION
Name of the faculty member	MRS. POOJA PRIYADHARSHNI B L
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	8,JEGA JEEVAN PURAM
Line 2	KALAKAD,627501
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9487320784
Email	POOJA.PRIADHARSHNI@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	GZCPP7201M
Passport Number	
Faculty code given by C.O.E.	9523337
Faculty code given by A.I.C.T.E.	1-44734078994
Date of Birth	09-07-2000
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	ARUNACHALA COLLEGE OF ENGINEERING FOR WOMEN	ANNA UNIVERSITY	79	FIRST CLASS	
P.G.	M.B.A.	MASTER OF BUSINESS ADMINISTRATION	2023	PET ENGINEERING COLLEGE	ANNA UNIVERSITY	87	DISTINCTION	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	11-06-2024	04-11-2024	0	4	24
Total				0	4	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	9523 - PSN ENGINEERING COLLEGE
Faculty ID	270872
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.E.-CIVIL ENGINEERING
Name of the faculty member	MRS. ABISHA A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	8/133, KOTHANARVILAI
Line 2	MONDAICADU, 629252
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 8012163311
Email	ABISHACIVIL@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	EPBPA4557Q
Passport Number	
Faculty code given by C.O.E.	9613196
Faculty code given by A.I.C.T.E.	1-11315920869
Date of Birth	19-08-1995
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.	CIVIL ENGINEERING	2016	PONJESLY COLLEGE OF ENGINEERING	ANNA UNIVERSITY	8.42	FIRST CLASS	
P.G.	M.E.	CONSTRUCTION ENGINEERING AND MANAGEMENT	2018	ST. XAVIER'S CATHOLIC COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	8.76	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
M.E.T. ENGINEERING COLLEGE	ASSISTANT PROFESSOR	27-10-2021	28-06-2024	2	8	2
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	10-07-2024	25-01-2025	0	6	16
Total				3	2	20


V. Industrial Experience :

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


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



AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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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	9523 - PSN ENGINEERING COLLEGE
Faculty ID	270944
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. ASAIKKANI S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	2/18, NADU KARUPPAZHAGU STREET
Line 2	PULIANGUDI 627855
District	TENKASI
Telephone number	-
Mobile number	+91 - 9080846983
Email	KANI73ANNAM@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	GTXPS5943E
Passport Number	
Faculty code given by C.O.E.	9523273
Faculty code given by A.I.C.T.E.	1-10986166384
Date of Birth	15-06-1973
Age	51
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	1994	OTHERS - REGIONAL ENGINEERING COLLEGE NITT	BHARATHI DASAN UNIVERSITY	Y	SECOND CLASS	
P.G.	M.E.	MANUFACTURING ENGINEERING	2013	OTHERS - KIRUBAN ANTHA VARIAR ENGINEERING COLLEGE	OTHERS - VINAYAGA MISSION UNIVERSITY	Y	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
S. VEERASAMY CHETTIAR COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	11-07-2013	19-02-2021	7	7	9
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	05-04-2021	05-11-2024	3	7	1
Total				11	2	12

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
SRI SAI TECH CONSULTANCY	PROJECT MANAGER	CONTRACT WORK	22-10-2009	15-06-2011	1	7	25
SWETHA CONSTRUCTION	SITE ENGINEER	CONTRACT WORK	13-09-2004	17-09-2009	5	0	5
MSRB ENGINEERING WORKS	SITE INCHARGE	INSPECTION	05-05-2000	18-08-2004	4	3	14
SYSTEMS AND COMPONENTS PVT LTD	SERVICE ENGINEER	PRODUCTION	02-02-1996	15-03-2000	4	1	14
Total					15	0	27


VI. C.O.E. Appointment Experience :



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

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated) 250	Re-Evaluation (No. of scripts Evaluated)

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	271725
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECH.-INFORMATION TECHNOLOGY
Name of the faculty member	MRS. VANASRI S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	10D NORTH STREET PANDIYARPURAM KEELAPATHAI
Line 2	TIRUNELVELI 627501
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9786982943
Email	VANASRI05@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	AQTPV8865B
Passport Number	
Faculty code given by C.O.E.	9523335
Faculty code given by A.I.C.T.E.	1-26699133956
Date of Birth	05-11-1989
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	MAHARAJA INSTITUTE OF TECHNOLOGY	ANNA UNIVERSITY	Y	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2014	PSN ENGINEERING COLLEGE	ANNA UNIVERSITY	Y	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	20-06-2024	05-11-2024	0	4	16
Total				0	4	18

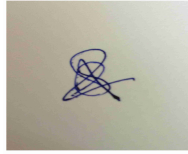
V. Industrial Experience :

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


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



AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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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	9523 - PSN ENGINEERING COLLEGE
Faculty ID	272552
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. THIVAGAR A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1/1 MUPPIDATHI AMMAN KOVIL 2ND STREET, PULIANGUDI
Line 2	TENKASI 627855
District	TENKASI
Telephone number	-
Mobile number	+91 - 9894841109
Email	SDTHIVAGAR@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	BMHPT5886P
Passport Number	
Faculty code given by C.O.E.	9523304
Faculty code given by A.I.C.T.E.	1-26996834241
Date of Birth	14-09-1999
Age	25
I. Particulars of Educational Qualification : (only completed)	

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

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	22-08-2022	06-11-2024	2	2	16
Total				2	2	17

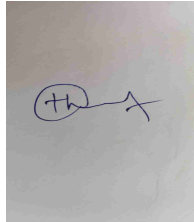
V. Industrial Experience :

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	9523 - PSN ENGINEERING COLLEGE
Faculty ID	272834
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. PALRAJ UMADEVI
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	6/1164 MIDDLE STREET,VELLUR
Line 2	VIRUDHUNAGAR-626005
District	VIRUDHUNAGAR
Telephone number	-
Mobile number	+91 - 8015333214
Email	UMAPALRAJ26@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	AFAPU7379H
Passport Number	
Faculty code given by C.O.E.	9523232
Faculty code given by A.I.C.T.E.	1-7377255608
Date of Birth	07-01-1993
Age	31
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2014	NELLAI COLLEGE OF ENGINEERING	ANNA UNIVERSITY	7.8	FIRST CLASS	
P.G.	M.E.	APPLIED ELECTRONICS	2016	NELLAI COLLEGE OF ENGINEERING	ANNA UNIVERSITY	8.1	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

IV. Academic Experience :

(Start from the Current working Experience) *

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	31-05-2019	06-11-2024	5	5	7
Total				5	5	9

V. Industrial Experience :

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

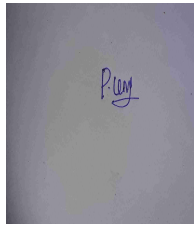
VI. C.O.E. Appointment Experience :

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


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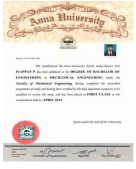

It is certified that all the information provided are true to the best of my knowledge.

Signature of the Faculty :



PLUM

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	273105
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. IYAPPAN P
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	113 SENAIYAR SOUTH ST VASUDEVANALLUR,
Line 2	TENKASI-627758
District	TENKASI
Telephone number	-
Mobile number	+91 - 9994474707
Email	IYAN.PSNC@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	ADUPI3712Q
Passport Number	
Faculty code given by C.O.E.	9523336
Faculty code given by A.I.C.T.E.	1-3595163453
Date of Birth	11-05-1993
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	SARASWATHI VELU COLLEGE OF ENGINEERING	ANNA UNIVERSITY	Y	FIRST CLASS	
P.G.	M.E.	ENGINEERING DESIGN	2023	P.S.R. ENGINEERING COLLEGE (AUTONOMOUS)	ANNA UNIVERSITY	Y	DISTINCTION	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

IV. Academic Experience :

(Start from the Current working Experience) *

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	03-07-2024	06-11-2024	0	4	4
Total				0	4	6

V. Industrial Experience :

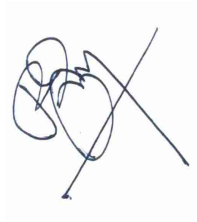
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

VI. C.O.E. Appointment Experience :


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


AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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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, consisting of several loops and a long, sweeping stroke that extends downwards and to the right.

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	273293
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. AMARASELVI V
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	35/224C POONTHOTTA STREET
Line 2	SANKARNAGAR P.O
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 7418524589
Email	VAMARASELVI@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	BWUPV5956K
Passport Number	
Faculty code given by C.O.E.	9523246
Faculty code given by A.I.C.T.E.	1-7439031408
Date of Birth	29-06-1990
Age	34
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
P.G.	M.E.	COMMUNICATION SYSTEMS	2014	ANNA UNIVESITY REGIONAL CAMPUS, MADURAI	ANNA UNIVERSITY	77	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	20-01-2020	06-11-2024	4	9	18
Total				4	9	22

V. Industrial Experience :

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


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



AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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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	9523 - PSN ENGINEERING COLLEGE
Faculty ID	273501
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	M.E.-VLSI DESIGN
Name of the faculty member	MRS. MARIA JENIFA P
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	4/5,NORTH STREET
Line 2	POOKUZHI,627152
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9952759112
Email	PMARIAJENI1995@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	CTDPM5829B
Passport Number	
Faculty code given by C.O.E.	9523332
Faculty code given by A.I.C.T.E.	1-4433637394
Date of Birth	11-06-1995
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	PSN INSTITUTE OF TECHNOLOGY AND SCIENCE	ANNA UNIVERSITY	78	FIRST CLASS	
P.G.	M.E.	VLSI DESIGN	2019	PSN ENGINEERING COLLEGE	ANNA UNIVERSITY	72	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	16-04-2024	06-11-2024	0	6	21
Total				0	6	24

V. Industrial Experience :

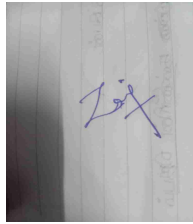
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days


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



AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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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 on a white background. The signature is stylized and appears to be 'Zix' or similar.

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	278792
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.E.-CIVIL ENGINEERING
Name of the faculty member	MRS. MISPA BROWN S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	18, CHOKKLINGAPURAM, MELASEVAL
Line 2	627452
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 7502292711
Email	MISPA.SV@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	CZHPM0153Q
Passport Number	
Faculty code given by C.O.E.	9523255
Faculty code given by A.I.C.T.E.	1-725276034
Date of Birth	11-04-1987
Age	37
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	CIVIL ENGINEERING	2011	PSN ENGINEERING COLLEGE	ANNA UNIVERSITY	7.8	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2015	PSN ENGINEERING COLLEGE	ANNA UNIVERSITY	8.25	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

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

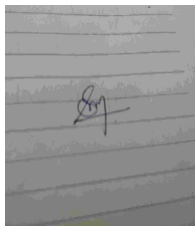
V. Industrial Experience :

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


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



AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
		15	250	

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



Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	275109
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.E.-ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the faculty member	MR. BALASUBRAMANIAN M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	14,NORTH ANAVARATHA VINAYAGAR KOVIL STREET,TIRUNELVELI TOWN
Line 2	627006
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9585600947
Email	BALASUBRAMANIANPSNEC@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BVBPB6954M
Passport Number	
Faculty code given by C.O.E.	9523248
Faculty code given by A.I.C.T.E.	1-7418384838
Date of Birth	21-11-1987
Age	37
I. Particulars of Educational Qualification : (only completed)	

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

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

IV. Academic Experience :

(Start from the Current working Experience) *

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
OTHERS - PASUMPON NETHAJI POLYTECHNIC COLLEGE	OTHERS - LECTURER	10-12-2012	08-12-2014	1	11	30
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	09-12-2019	07-11-2024	4	10	30
OTHERS - RV REHA POLYTECHNIC COLLEGE	OTHERS - LECTURER	09-12-2014	06-12-2019	4	11	29
Total				11	10	5

V. Industrial Experience :

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

VI. C.O.E. Appointment Experience :


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



AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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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 on a light blue rectangular background. The signature appears to be 'M. Bata' with a stylized flourish at the end.

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	279061
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.TECH.-AGRICULTURAL ENGINEERING
Name of the faculty member	MRS. LIZZY ARPUTHA DORATHY L
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	204, WATER TANK STREET, WEST SIVANTHIPURAM
Line 2	VICKRAMASINGAPURAM, 627425
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 8778782776
Email	LIZZYANUGRAHA@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	AMDPL1013H
Passport Number	
Faculty code given by C.O.E.	9523298
Faculty code given by A.I.C.T.E.	1-3627168091
Date of Birth	27-06-1987
Age	37
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	CIVIL ENGINEERING	2011	PSN ENGINEERING COLLEGE	ANNA UNIVERSITY	7.8	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2014	ANNA UNIVERSITY REGIONAL CAMPUS, TIRUNELVELI	ANNA UNIVERSITY	7	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	30-09-2022	08-11-2024	2	1	9
A.R COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	18-12-2017	16-06-2022	4	5	30
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	16-06-2014	26-10-2015	1	4	11
Total				7	11	25

V. Industrial Experience :

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


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



AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
		30	500	

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

Signature of the Faculty :



Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	279822
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.E.-CIVIL ENGINEERING
Name of the faculty member	MS. UDAYA JEBISHA
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	17-17/4, EATHAVILAI,
Line 2	MEKKAMANDAPAM POST, 629166
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 7397675227
Email	UDAYAJEBISHA85428@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	AEMPU5605B
Passport Number	
Faculty code given by C.O.E.	9613220
Faculty code given by A.I.C.T.E.	1-43388013598
Date of Birth	27-09-1996
Age	28
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	CIVIL ENGINEERING	2018	ARUNACHALA COLLEGE OF ENGINEERING FOR WOMEN	ANNA UNIVERSITY	7.76	FIRST CLASS	
P.G.	M.E.	CONSTRUCTION ENGINEERING AND MANAGEMENT	2020	ARUNACHALA COLLEGE OF ENGINEERING FOR WOMEN	ANNA UNIVERSITY	8.86	DISTINCTION	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
M.E.T. ENGINEERING COLLEGE	ASSISTANT PROFESSOR	13-02-2023	05-04-2024	1	1	21
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	08-04-2024	08-11-2024	0	7	1
Total				1	8	26

V. Industrial Experience :

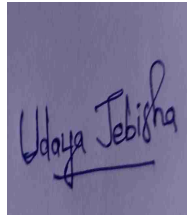
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

VI. C.O.E. Appointment Experience :


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



AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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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 on a purple background. The signature reads "Udaya Jebisha" with a horizontal line underneath the name.

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	280098
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.TECH.-AGRICULTURAL ENGINEERING
Name of the faculty member	MRS. CHITRA K
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	445/ T, ASTALAKSHMI NAGAR, KTC NAGAR
Line 2	627011
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 8428604230
Email	CHITRAGVP@GMAIL.COM
Gender	FEMALE
Community	MBC
PAN Number	EEFPK8625N
Passport Number	
Faculty code given by C.O.E.	9523346
Faculty code given by A.I.C.T.E.	1-1581771453
Date of Birth	12-11-1988
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.	CIVIL ENGINEERING	2011	THIAGARAJAR COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	7.75	FIRST CLASS	
P.G.	M.E.	CONSTRUCTION ENGINEERING AND MANAGEMENT	2023	EINSTEIN COLLEGE OF ENGINEERING	ANNA UNIVERSITY	8.64	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	30-08-2024	25-01-2025	0	4	27
Total				0	4	29

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
JOHN BUILDWELL INDIA PVT LTD	PND INCHARGE	OVERSEEING OF PROJECT	27-01-2021	22-12-2023	2	10	27
Total					2	10	1


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



AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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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	9523 - PSN ENGINEERING COLLEGE
Faculty ID	280408
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.TECH.-AGRICULTURAL ENGINEERING
Name of the faculty member	MR. MOHAMED THAMEEM ANSARI H
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	16/73, METHAMAR PALAYAM 4TH STREET, MELAPALAYAM
Line 2	PALAYAMKOTTAI, 627005
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9894983725
Email	TANSARI055@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BTEPA4273P
Passport Number	
Faculty code given by C.O.E.	9523323
Faculty code given by A.I.C.T.E.	1-43715686421
Date of Birth	21-06-1992
Age	32
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	CIVIL ENGINEERING	2014	SATYAM COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	8.48	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2020	ANNA UNIVERSITY REGIONAL CAMPUS, TIRUNELVELI	ANNA UNIVERSITY	8.74	DISTINCTION	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	30-10-2023	08-11-2024	1	0	10
THAMIRABHARANI ENGINEERING COLLEGE	ASSISTANT PROFESSOR	29-08-2022	20-09-2023	1	0	23
ANNA UNIVERSITY REGIONAL CAMPUS, TIRUNELVELI	OTHERS - TEACHING FACULTY	15-02-2021	30-12-2021	0	10	13
Total				2	11	21

V. Industrial Experience :

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

VI. C.O.E. Appointment Experience :

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

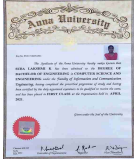

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)

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

Signature of the Faculty :



Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	283882
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. SUBALAKSHMI K
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	17, EAST STREET, KALUNGADI,KALAKAD
Line 2	TIRUNELVELI - 627501
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9940786774
Email	SUBA20031999@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	KQXPK7149P
Passport Number	
Faculty code given by C.O.E.	9523331
Faculty code given by A.I.C.T.E.	1-43813576701
Date of Birth	20-03-1999
Age	25
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	COMPUTER SCIENCE AND ENGINEERING	2021	SCAD COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.81	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2023	SCAD COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	8.31	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	09-01-2024	11-11-2024	0	10	3
Total				0	10	8

V. Industrial Experience :

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

VI. C.O.E. Appointment Experience :

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



AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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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 that reads "K. Subalashmi". The signature is written in a cursive style with a large initial 'K'.

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	284045
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECH.-INFORMATION TECHNOLOGY
Name of the faculty member	MRS. SALINI THANGIAH
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	15/17 R, VALLANAR NAGAR, PANAGUDI
Line 2	TIRUNELVELI - 627109
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 7598165960
Email	SALINI14R@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	GNWPS8261J
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-7712380167
Date of Birth	14-02-1985
Age	39
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	COMPUTER SCIENCE AND ENGINEERING	2006	PET ENGINEERING COLLEGE	ANNA UNIVERSITY	74	FIRST CLASS	
P.G.	M.TECH.	OTHERS - COMPUTER AND INFORMATION TECHNOLOGY	2014	OTHERS - MS UNIVERSITY	MANOMANIAM SUNDARAR UNIVERSITY	80	DISTINCTION	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	03-06-2014	11-11-2024	10	5	9
Total				10	5	11

V. Industrial Experience :

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

VI. C.O.E. Appointment Experience :

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



AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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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 be 'Sahy', is positioned to the right of the text 'Signature of the Faculty :'. The signature is written in a cursive style with a prominent loop at the beginning.

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	285194
Name of the Department	STRUCTURAL ENGINEERING
Name of the Degree & Course	M.E.-STRUCTURAL ENGINEERING
Name of the faculty member	MRS. THENMOZHI R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	496,MALAIYADIPATTI,RAJAPALAYAM
Line 2	VIRUDHUNAGAR - 626110
District	VIRUDHUNAGAR
Telephone number	-
Mobile number	+91 - 9843979756
Email	CIVILLYDIATHENMOZHI@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	AIXPT5585C
Passport Number	
Faculty code given by C.O.E.	0
Faculty code given by A.I.C.T.E.	1-44721993012
Date of Birth	26-04-1989
Age	35
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	CIVIL ENGINEERING	2010	SRI VENKATESWARA COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	Y	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2014	R.V.S. COLLEGE OF ENGINEERING	ANNA UNIVERSITY	Y	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

IV. Academic Experience :

(Start from the Current working Experience) *

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
NADAR SARASWATHI COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	26-03-2015	20-03-2021	5	11	26
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	25-03-2021	11-11-2024	3	7	18
Total				9	7	18

V. Industrial Experience :

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

VI. C.O.E. Appointment Experience :


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



AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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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 that reads "R. Thennadi". The signature is written in a cursive style with a clear, legible font.

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	285303
Name of the Department	MASTER OF BUSINESS ADMINISTRATION
Name of the Degree & Course	M.B.A.-MASTER OF BUSINESS ADMINISTRATION
Name of the faculty member	MR. S ARUN PRASADH
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	4,SNV NAGAR, NORTH HIGHGROUND, MAHARAJANAGAR
Line 2	TIRUNELVELI - 627011
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9791947736
Email	ARUNPRASADH80@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	FRHPS3794C
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-44730524934
Date of Birth	11-08-1998
Age	26
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	CIVIL ENGINEERING	2020	PSN COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	77.23	FIRST CLASS	
P.G.	M.B.A.	OTHERS - HUMAN RESOURCE AND OPERATIONS MANAGEMENT	2022	PSN COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	82.80	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	15-07-2024	11-11-2024	0	3	28
Total				0	3	29

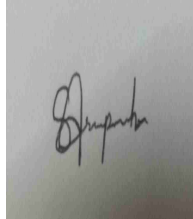
V. Industrial Experience :

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 Exmination during the last year**



AUR (No. of 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	9523 - PSN ENGINEERING COLLEGE
Faculty ID	285411
Name of the Department	AUTOMOBILE ENGINEERING
Name of the Degree & Course	B.E.-AUTOMOBILE ENGINEERING
Name of the faculty member	MR. PRAVINKUMAR M I
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	43/8, MUPPUDATHI AMMAN KOVIL 3RD STREET, PULIYANGUDI
Line 2	TENKASI - 627855
District	TENKASI
Telephone number	-
Mobile number	+91 - 8870791678
Email	PRAVINVELVEL@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	CWTPP1282L
Passport Number	
Faculty code given by C.O.E.	9523322
Faculty code given by A.I.C.T.E.	1-43725726341
Date of Birth	20-07-1998
Age	26
I. Particulars of Educational Qualification : (only completed)	

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

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	13-09-2023	11-11-2024	1	1	29
Total				1	1	29

V. Industrial Experience :

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


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



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

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

Signature of the Faculty :



Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	286682
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL AND AUTOMATION ENGINEERING
Name of the faculty member	MS. PARVATHI SELVARAJ
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	5/70 EAST STREET, ERACHI
Line 2	THOOTHUKUDI - 628720
District	THOOTHUKUDI
Telephone number	-
Mobile number	+91 - 9514916818
Email	JOYPARU95@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	CDWPP1274J
Passport Number	
Faculty code given by C.O.E.	9523194
Faculty code given by A.I.C.T.E.	1-4524261393
Date of Birth	14-05-1995
Age	29
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	2016	OTHERS - CHANDY COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	6.87	FIRST CLASS	
P.G.	M.E.	ENGINEERING DESIGN	2018	GOVERNMENT COLLEGE OF ENGINEERING TIRUNELVELI	ANNA UNIVERSITY	7.05	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	13-06-2018	12-11-2024	6	4	30
Total				6	4	2

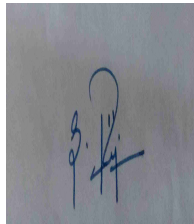
V. Industrial Experience :

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



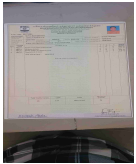
VI. C.O.E. Appointment Experience :**Capacity at which service is extended for the conduct of Exmination during the last year**

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

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	286874
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-MATHEMATICS
Name of the faculty member	MRS. JOSELIN ABISHA SUJIN
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	17/22-B,ALUVILAI, KANDANVILAI POST
Line 2	KANIYAKUMARI - 629810
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9385828995
Email	ABIJOSLIN95@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	CWYPJ6781M
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-447274599354
Date of Birth	08-08-1995
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.SC.	OTHERS - MATHEMATICS	2016	OTHERS - ST JEROMES COLLEGE OF ARTS AND SCIENCE	MANOMANIAM SUNDARAN UNIVERSITY	72	FIRST CLASS	
P.G.	M.SC.	OTHERS - MATHEMATICS	2018	OTHERS - ST JEROMES COLLEGE OF ARTS AND SCIENCE	MANOMANIAM SUNDARAN UNIVERSITY	74	FIRST CLASS	
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - MATHMATICS	2019	OTHERS - ANNAI VELANKANNI COLLEGE OF ARTS AND SCIENCE	MANOMANIAM SUNDARAN UNIVERSITY	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
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	22-07-2024	12-11-2024	0	3	22
OTHERS - APJM MATRIC HIGHER SECONDARY SCHOOL	ASSISTANT PROFESSOR	06-01-2020	24-02-2023	3	1	19
Total				3	5	13

V. Industrial Experience :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	287475
Name of the Department	COMPUTER SCIENCE AND ENGINEERING
Name of the Degree & Course	M.E.-COMPUTER SCIENCE AND ENGINEERING(WITH SPECIALIZATION IN NETWORKS)
Name of the faculty member	MRS. JELIN D
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	2/38, CHURCH WEST STREET, ATHICHAPERI
Line 2	TIRUNELVELI - 627502
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 7299556034
Email	JELINPRASANNA90@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	ATUPJ7604E
Passport Number	
Faculty code given by C.O.E.	0
Faculty code given by A.I.C.T.E.	1-43413316701
Date of Birth	18-09-1990
Age	34
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	COMPUTER SCIENCE AND ENGINEERING	2011	KINGS ENGINEERING COLLEGE	ANNA UNIVERSITY	68	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2017	PSN ENGINEERING COLLEGE	ANNA UNIVERSITY	7.72	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	09-01-2020	12-11-2024	4	10	4
Total				4	10	9

V. Industrial Experience :

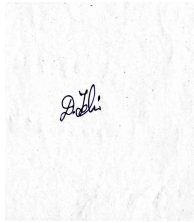
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

VI. C.O.E. Appointment Experience :

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



AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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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	9523 - PSN ENGINEERING COLLEGE
Faculty ID	289354
Name of the Department	MASTER OF BUSINESS ADMINISTRATION
Name of the Degree & Course	M.B.A.-MASTER OF BUSINESS ADMINISTRATION
Name of the faculty member	MRS. SELVANATHIYA L
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	18, SUBASH CHANDRA BOSE PURAM, KALAKAD
Line 2	TIRUNELVELI - 627501
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9597777847
Email	LSELVANATHIYAINIT@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	DYAPS4186L
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-44734447274
Date of Birth	15-03-1989
Age	35
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.SC.	OTHERS - INFORMATION TECHNOLOGY	2010	OTHERS - RATHNAM COLLEGE OF ARTS AND SCIENCE	BHARATHIYAR UNIVERSITY	73.6	FIRST CLASS	
P.G.	M.B.A.	HUMAN RESOURCE DEVELOPMENT AND MANAGEMENT	2012	OTHERS - BHARATHIYAR UNIVERSITY	BHARATHIYAR UNIVERSITY	55.4	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
OTHERS - ST JOSEPH MATRIC HIGHER SECONDARY SCHOOL	OTHERS - PG ASSISTANT COMPUTER SCIENCE	13-09-2017	05-05-2023	5	7	23
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	03-07-2024	13-11-2024	0	4	11
Total				6	0	4

V. Industrial Experience :

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


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

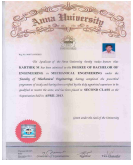

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of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



Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	289482
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL AND AUTOMATION ENGINEERING
Name of the faculty member	MR. KARTHIK M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	8/190, ALWAR NADAR STREET, KURUMBALAPERI, KUKLASEKARAPATINAM POST
Line 2	TENKASI - 627806
District	TENKASI
Telephone number	-
Mobile number	+91 - 9994652233
Email	ENFIELDKARTHIK@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	GTSPK2802K
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-43420557301
Date of Birth	30-12-1988
Age	36
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	2013	SARDAR RAJA COLLEGE OF ENGINEERING	ANNA UNIVERSITY	60	SECOND CLASS	
P.G.	M.E.	MANUFACTURING ENGINEERING	2015	SARDAR RAJA COLLEGE OF ENGINEERING	ANNA UNIVERSITY	6.63	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
OTHERS - MARIAM POLYTECHNIC COLLEGE	OTHERS - LECTURER	05-03-2012	30-03-2015	3	0	26
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	01-04-2022	13-11-2024	2	7	13
Total				5	8	12

V. Industrial Experience :

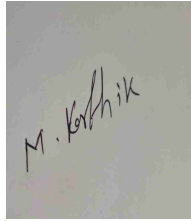
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

VI. C.O.E. Appointment Experience :


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



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

A rectangular box containing a handwritten signature in black ink. The signature appears to be "M. K. Kishik".

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	289960
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL AND AUTOMATION ENGINEERING
Name of the faculty member	MRS. RAAGAVI R B
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	6/8, 2ND STREET, BALAJI AVENUE, THACHANALLUR
Line 2	TIRUNELVELI - 627358
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9488748441
Email	RAAGAVI1994@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BSMPR8083H
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-43427699922
Date of Birth	22-11-1994
Age	30
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	2016	SRI VIDYA COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	82	FIRST CLASS	
P.G.	M.E.	ENGINEERING DESIGN	2018	GOVERNMENT COLLEGE OF ENGINEERING TIRUNELVELI	ANNA UNIVERSITY	83.08	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	05-12-2022	13-11-2024	1	11	9
Total				1	11	14

V. Industrial Experience :

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


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



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

A square box containing a handwritten signature in black ink that reads "R. B. Rappan".

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	289150
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.TECH.-AGRICULTURAL ENGINEERING
Name of the faculty member	MR. ARIVALAGAN P
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	5/618 B, KRISHNA NAGAR, K.R NAGAR POST, KOVILPATTI.
Line 2	THOOTHUKUDI - 628503
District	THOOTHUKUDI
Telephone number	-
Mobile number	+91 - 8012338439
Email	BABUMUTHUKUMAR@GMAIL.COM
Gender	MALE
Community	MBC
PAN Number	CAIPA4602G
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-447317720665
Date of Birth	30-08-1991
Age	33
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	CIVIL ENGINEERING	2014	CMS COLLEGE OF ENGINEERING	ANNA UNIVERSITY	65.8	SECOND CLASS	
P.G.	M.E.	ENVIRONMENTAL ENGINEERING	2017	ANNA UNIVERSITY REGIONAL CAMPUS, TIRUNELVELI	ANNA UNIVERSITY	75.03	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	28-10-2024	13-11-2024	0	0	17
Total				0	0	17

V. Industrial Experience :

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

VI. C.O.E. Appointment Experience :


Capacity at which service is extended for the conduct of 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 be 'A. P.', written diagonally across a light-colored rectangular background.

Signature of the Faculty :

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	289594
Name of the Department	AUTOMOBILE ENGINEERING
Name of the Degree & Course	B.E.-AUTOMOBILE ENGINEERING
Name of the faculty member	MR. ANANTHAN L
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1/67C, THANGAMMAN KOVIL STREET, ANDIPATTI POST
Line 2	TENKASI - 627851
District	TENKASI
Telephone number	-
Mobile number	+91 - 9786121664
Email	ANANTHANMECH02@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AMZPA8676P
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-43386696533
Date of Birth	09-05-1987
Age	37
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	2009	SARDAR RAJA COLLEGE OF ENGINEERING	ANNA UNIVERSITY	74	FIRST CLASS	
P.G.	M.E.	MANUFACTURING ENGINEERING	2014	SARDAR RAJA COLLEGE OF ENGINEERING	ANNA UNIVERSITY	7.8	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

IV. Academic Experience :

(Start from the Current working Experience) *

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	19-12-2019	13-11-2024	4	10	26
OTHERS - MARIAM POLYTECHNIC COLLEGE	OTHERS - SENIOR LECTURER	06-04-2010	14-11-2014	4	7	9
Total				9	6	8

V. Industrial Experience :

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

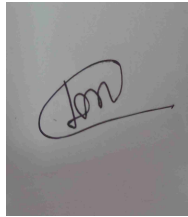
VI. C.O.E. Appointment Experience :


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




AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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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 be 'Jm', is written on a light-colored surface. The signature is enclosed within a rectangular box.

Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	291142
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-MATHEMATICS
Name of the faculty member	MRS. JEEVIDHA A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	5,EAST STREET , RETTANAI POST, TINDIVANAM
Line 2	VILLUPURAM,604306
District	VILLUPURAM
Telephone number	-
Mobile number	+91 - 8220211118
Email	JEEVIDHA1985@GMAIL.COM
Gender	FEMALE
Community	MBC
PAN Number	AZNPJ5056D
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-9315814151
Date of Birth	25-09-1985
Age	39
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.SC.	OTHERS - MATHEMATICS	2006	OTHERS - SARADHA GANGADHARAN ARTS AND SCIENCE COLLEGE	PONDICHERRY UNIVERSITY	76	FIRST CLASS	
P.G.	M.SC.	OTHERS - MATHEMATICS	2009	OTHERS - SARADHA GANGADHARAN ARTS AND SCIENCE COLLEGE	PONDICHERRY UNIVERSITY	79.30	FIRST CLASS	
OTHERS - MPHIL	OTHERS - MPHIL	OTHERS - MATHEMATICS	2011	OTHERS - PRIST UNIVERSITY	PONDICHERRY UNIVERSITY	86	DISTINCTION	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	20-01-2020	13-11-2024	4	9	25
Total				4	9	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 :



Name of the College	9523 - PSN ENGINEERING COLLEGE
Faculty ID	292603
Name of the Department	AUTOMOBILE ENGINEERING
Name of the Degree & Course	B.E.-AUTOMOBILE ENGINEERING
Name of the faculty member	MR. SANKAR KRISHNAN
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1/883, GURU NAGAR 6TH STREET, SUTHAMALLI.
Line 2	TIREUNELVELI - 627604
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 9488286985
Email	KSANKAR66@YAHOO.COM
Gender	MALE
Community	OC
PAN Number	EABPS2346A
Passport Number	
Faculty code given by C.O.E.	9523282
Faculty code given by A.I.C.T.E.	1-11301186433
Date of Birth	10-12-1967
Age	57
I. Particulars of Educational Qualification : (only completed)	

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

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	01-12-2021	14-11-2024	2	11	14
Total				2	11	19

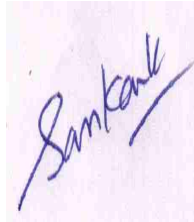
V. Industrial Experience :

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

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

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



Signature of the Faculty :

