
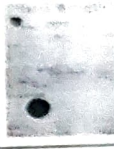
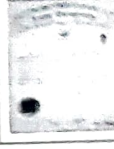


Name of the College	9222 - THENI KAMMAVAR SANGAM COLLEGE OF TECHNOLOGY
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	DR. ARUNPRASAD V
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	32, SAKTHI KAMAKSHI BHAVANAM
Line 2	CHAIRMAN RATHINAM NAGAR
District	THENI
Telephone number	-
Mobile number	+91 - 9994441078
Email	ARUN_PRASAD78@YAHOO.CO.IN
Gender	MALE
Community	MBC
PAN Number	AHVPA1616N
Passport Number	
Aadhar Number	972331573637
Faculty code given by C.O.E.	9222001
Faculty code given by A.I.C.T.E.	1476703233
Date of Birth	05-04-1979
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	2000	OTHERS - THE INDIAN ENGINEERING	MANOMANIAM SUNDARAN UNIVERSITY	63.1	FIRST CLASS	
P.G.	M.E.	OTHERS - THERMAL POWER ENGINEERING	2002	OTHERS - ANNAMALAI UNIVERSITY	ANNAMALAI UNIVERSITY	7.71	FIRST CLASS	
PH.D.	PH.D.	MECHANICAL ENGINEERING	2018	OTHERS - ANNA UNIVERSITY	ANNA UNIVERSITY	Y		

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

EXPERIMENTAL STUDIES ON THERMOSYPHON SOLAR WATER HEATING SYSTEM FITTED WITH SCREW TAPE INSERTS

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
SETHU INSTITUTE OF TECHNOLOGY (AUTONOMOUS)	ASSISTANT PROFESSOR	23-06-2004	31-03-2008	3	9	8
THENI KAMMAVAR SANGAM COLLEGE OF TECHNOLOGY	ASSISTANT PROFESSOR	09-05-2008	28-02-2018	9	9	23
BHARATH NIKETAN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	01-12-2002	22-06-2004	1	6	22
THENI KAMMAVAR SANGAM COLLEGE OF TECHNOLOGY	ASSOCIATE PROFESSOR	01-03-2018	13-02-2024	5	11	13
Total				21	1	8

V. Industrial Experience :

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

VI. C.O.E. Appointment Experience :


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



AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
		4	300	

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



Signature of the Faculty :

Name of the College	9222 - THENI KAMMAVAR SANGAM COLLEGE OF TECHNOLOGY
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. KARTHI M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3-1/133, PAGAVATHI AMMAN KOVIL NORTH STREET
Line 2	AUNDIPATTI-625513
District	THENI
Telephone number	-
Mobile number	+91 - 9994220505
Email	KARTHICADCAM@GMAIL.COM
Gender	MALE
Community	MBC
PAN Number	CGUPK8263K
Passport Number	
Aadhar Number	545335910941
Faculty code given by C.O.E.	9222041
Faculty code given by A.I.C.T.E.	1476703239
Date of Birth	03-06-1981
Age	43
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	2002	SETHU INSTITUTE OF TECHNOLOGY (AUTONOMOUS)	MADURAI KAMARAJ UNIVERSITY	67.4	FIRST CLASS	
P.G.	M.E.	CAD/CAM	2004	OTHERS - AK COLLEGE OF TECHNOLOGY	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
THENI KAMMAVAR SANGAM COLLEGE OF TECHNOLOGY	ASSISTANT PROFESSOR	27-06-2008	13-02-2024	15	7	17
BHARATH NIKETAN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	01-05-2006	31-05-2008	2	0	31
Total				17	8	21

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
ESQUIRE ENGG SOLUTIONS	CAD ENGINEER	DESIGN	18-01-2005	28-04-2006	1	3	11
Total					1	3	12

VI. C.O.E. Appointment Experience :

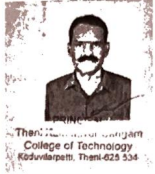
Capacity at which service is extended for the conduct of Exmination during the last year



AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
10		2	300	

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



Signature of the Faculty :

Name of the College	9222 - THENI KAMMAVAR SANGAM COLLEGE OF TECHNOLOGY
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. PANDI S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	23-B, NETHAJI ROAD,
Line 2	NRT NAGAR, THENI
District	THENI
Telephone number	-
Mobile number	+91 - 9047875292
Email	PANDI1VIJAY@GMAIL.COM
Gender	MALE
Community	MBC
PAN Number	ALBPP0987B
Passport Number	
Aadhar Number	667158570033
Faculty code given by C.O.E.	9222046
Faculty code given by A.I.C.T.E.	1476877645
Date of Birth	04-05-1966
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	1989	R V S COLLEGE OF ENGINEERING AND TECHNOLOGY	MADURAI KAMARAJ UNIVERSITY	60.66	FIRST CLASS	
P.G.	M.E.	THERMAL ENGINEERING	2013	ANNA UNIVERSITY REGIONAL CAMPUS, TIRUCHIRAPPALLI	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
THENI KAMMAVAR SANGAM COLLEGE OF TECHNOLOGY	ASSISTANT PROFESSOR	14-08-2008	13-02-2024	15	5	31
BHARATH NIKETAN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	01-08-2007	13-08-2008	1	0	13
Total				16	6	16

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
HOBEL FLEXIBLES INC	ENGINEER PRODUCTION	PRODUCTION OF FLEXIBLE HOSES	13-11-2002	09-05-2006	3	5	27
FAIR RADIATORS PVT LTD	PPC ENGINEER	ASSEMBLY OF AUTOMOBILE RADIATORS	03-11-1990	03-07-1994	3	11	28
ULTRA FILTER PVT LTD	PRODUCTION PLANNING ENGINEER	ASSEMBLY OF AIR FILTERS	03-10-1994	09-10-2000	6	6	1
Total					13	11	0

VI. C.O.E. Appointment Experience :

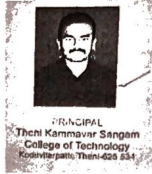
Capacity at which service is extended for the conduct of Exmination during the last year

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
		2	350	




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



Signature of the Faculty :

Name of the College	9222 - THENI KAMMAVAR SANGAM COLLEGE OF TECHNOLOGY
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	DR. PANDIARAJAN P
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	2-6-2, PTR CHANNEL STREET,
Line 2	CHINNAMUNOOR- 625515
District	THENI
Telephone number	-
Mobile number	+91 - 9894947873
Email	PANDI1427@YAHOO.COM
Gender	MALE
Community	BC
PAN Number	BQVPP3402R
Passport Number	
Aadhar Number	677978494971
Faculty code given by C.O.E.	9222030
Faculty code given by A.I.C.T.E.	1478421303
Date of Birth	03-06-1986
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	2007	SACS MA V M M ENGINEERING COLLEGE	ANNA UNIVERSITY	69	FIRST CLASS	
P.G.	M.E.	CAD/CAM	2010	OTHERS - RAJA COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	76	FIRST CLASS	
PH.D.	PH.D.	MECHANICAL ENGINEERING	2019	COLLEGE OF ENGINEERING GUINDY	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

EVALUATION OF PROPERTIES ON ARISTIDA HYSTRIX NATURAL LEAF FIBER AND ITS 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
THENI KAMMAVAR SANGAM COLLEGE OF TECHNOLOGY	ASSOCIATE PROFESSOR	03-07-2019	13-02-2024	4	7	11
THENI KAMMAVAR SANGAM COLLEGE OF TECHNOLOGY	ASSISTANT PROFESSOR	02-06-2010	02-07-2019	9	1	1
Total				13	8	16

V. Industrial Experience :

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

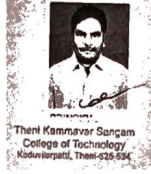
VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of Exmination during the last year

AUR (No. of days) 5	Squad Member (No. of days)	External Examiner (Practical) (No. of days) 2	Central Evaluation (No. of scripts Evaluated) 175	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	9222 - THENI KAMMAVAR SANGAM COLLEGE OF TECHNOLOGY
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. JEYAKANTH S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	S.RENGANATHAPURAM
Line 2	AUNDIPATTI
District	THENI
Telephone number	-
Mobile number	+91 - 8608600760
Email	JEYAKANTHMECH02@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AUSPJ9266B
Passport Number	
Aadhar Number	849160588876
Faculty code given by C.O.E.	9222025
Faculty code given by A.I.C.T.E.	1478283850
Date of Birth	20-05-1984
Age	40
I. Particulars of Educational Qualification : (only completed)	

Date Of Generation 19-02-2024 12:02:04 Page 34 / 241

PRINCIPAL
Theni Kammavar Sangam
College of Technology
Koduvilarpatti, Theni-625 534

Category	Name of the Degree	Specialization	Year of Passing	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	ER PERUMAL MANIMEKALAI COLLEGE OF ENGINEERING	ANNA UNIVERSITY	67	FIRST CLASS	
P.G.	M.E.	CAD/CAM	2009	RAJALAKSHMI ENGINEERING COLLEGE (AUTONOMOUS)	ANNA UNIVERSITY	71	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

IV. Academic Experience :

(Start from the Current working Experience) *

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
THENI KAMMAVAR SANGAM COLLEGE OF TECHNOLOGY	ASSISTANT PROFESSOR	03-06-2010	13-02-2024	13	8	11
Total				13	8	15

V. Industrial Experience :

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

VI. C.O.E. Appointment Experience :

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




AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
		2	175	

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. S. S.', written in a cursive style.

Signature of the Faculty :

Name of the College	9222 - THENI KAMMAVAR SANGAM COLLEGE OF TECHNOLOGY
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	DR. SOMASUNDARAM K
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	49A, ANDAVAR KOVIL STREET
Line 2	VEERAPANDI
District	THENI
Telephone number	-
Mobile number	+91 - 9894336439
Email	SUNDARSUBI@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BMYP88884F
Passport Number	
Aadhar Number	755287115199
Faculty code given by C.O.E.	9222039
Faculty code given by A.I.C.T.E.	11489510760
Date of Birth	28-04-1981
Age	43
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	2009	GOVERNMENT COLLEGE OF ENGINEERING SALEM (AUTONOMOUS)	ANNA UNIVERSITY	67	FIRST CLASS	
P.G.	M.E.	CAD/CAM	2011	OTHERS - RAJA COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	8.37	FIRST CLASS	
PH.D.	PH.D.	MECHANICAL ENGINEERING	2019	COLLEGE OF ENGINEERING GUINDY	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

SCHEDULING OPTIMIZATION OF IDENTICAL PARALLEL MACHINE PROBLEMS USING METAHEURISTICS

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
NADAR SARASWATHI COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	25-06-2012	30-11-2012	0	5	6
R V S COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	10-06-2011	21-06-2012	1	0	12
THENI KAMMAVAR SANGAM COLLEGE OF TECHNOLOGY	ASSOCIATE PROFESSOR	09-04-2019	13-02-2024	4	10	5
THENI KAMMAVAR SANGAM COLLEGE OF TECHNOLOGY	ASSISTANT PROFESSOR	06-12-2012	08-04-2019	6	4	3
Total				12	7	0

V. Industrial Experience :

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

VI. C.O.E. Appointment Experience :




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

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
12		2	300	

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



Signature of the Faculty :

Category	Name of the Degree	Specialization	Year of Passing	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	ODAIYAPPA COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	69	FIRST CLASS	
P.G.	M.E.	MANUFACTURING ENGINEERING	2013	SACS MAVM ENGINEERING COLLEGE	ANNA UNIVERSITY	8.32	FIRST CLASS	
PH.D.	PH.D.	MECHANICAL ENGINEERING	2021	THENI KAMMAVAR SANGAM COLLEGE OF TECHNOLOGY	ANNA UNIVERSITY	FIRST		

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

PROCESSING AND REALIZATION ON THE PROPERTIES OF ALUMINIUM ALLOY METAL MATRIX 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
ODAIYAPPA COLLEGE OF ENGINEERING AND TECHNOLOGY	OTHERS - LECTURER	20-07-2010	29-12-2010	0	5	10
THENI KAMMAVAR SANGAM COLLEGE OF TECHNOLOGY	OTHERS - LECTURER	05-01-2011	25-08-2011	0	7	21
THENI KAMMAVAR SANGAM COLLEGE OF TECHNOLOGY	ASSISTANT PROFESSOR	03-07-2013	13-02-2024	10	7	11
Total				11	8	16

V. Industrial Experience :

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

VI. C.O.E. Appointment Experience :

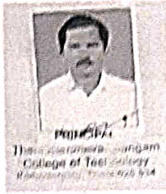
Capacity at which service is extended for the conduct of Exmination during the last year

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
		2	325	

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





Signature of the Faculty :

Name of the College	9222 - THENI KAMMAVAR SANGAM COLLEGE OF TECHNOLOGY
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. ANANTHAKUMAR P
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	15/W10, LANE 2, SS PURAM
Line 2	BODI
District	THENI
Telephone number	-
Mobile number	+91 - 9489782558
Email	ANANTHPROFESSION@YAHOO.CO.IN
Gender	MALE
Community	BC
PAN Number	AMUPA1011D
Passport Number	R0979143
Aadhar Number	783091513597
Faculty code given by C.O.E.	9222031
Faculty code given by A.I.C.T.E.	11541749983
Date of Birth	25-05-1982
Age	42
I. Particulars of Educational Qualification : (only completed)	

Date Of Generation 19-02-2024 12:02:04 Page 25 / 241


PRINCIPAL
Theni Kammavar Sangam
College of Technology
Koduvilarpatti, Theni-625 534

Category	Name of the Degree	Specialization	Year of Passing	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	PSNA COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	MADURAI KAMARAJ UNIVERSITY	72.88	FIRST CLASS	
P.G.	M.E.	MANUFACTURING ENGINEERING	2013	SACS MAVM ENGINEERING COLLEGE	ANNA UNIVERSITY	8.34	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
THENI KAMMAVAR SANGAM COLLEGE OF TECHNOLOGY	ASSISTANT PROFESSOR	03-07-2013	13-02-2024	10	7	11
Total				10	7	14

V. Industrial Experience :

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

VI. C.O.E. Appointment Experience :


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



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

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

P. Ananthakumari

Signature of the Faculty :

Name of the College	9222 - THENI KAMMAVAR SANGAM COLLEGE OF TECHNOLOGY
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. SURENDRAKUMAR G
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	2/943, EB COLONY
Line 2	BATLAGUNDU
District	DINDIGUL
Telephone number	-
Mobile number	+91 - 9489814517
Email	SURENDRKUMARG83@GMAIL.COM
Gender	MALE
Community	MBC
PAN Number	FBWPS2327Q
Passport Number	
Aadhar Number	388682538566
Faculty code given by C.O.E.	9222141
Faculty code given by A.I.C.T.E.	12303736294
Date of Birth	23-04-1983
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.	MECHANICAL ENGINEERING	2009	ERODE SENGUNTHAR ENGINEERING COLLEGE (AUTONOMOUS)	ANNA UNIVERSITY	69	FIRST CLASS	
P.G.	M.E.	MANUFACTURING ENGINEERING	2014	UNIVERSITY COLLEGE OF ENGINEERING, TIRUCHIRAPPALLI	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
KODAIKANAL INSTITUTE OF TECHNOLOGY	ASSISTANT PROFESSOR	31-07-2012	16-06-2014	1	10	17
SRJ SUBRAMANYA COLLEGE OF ENGINEERING AND TECHNOLOGY	OTHERS - LECTURER	24-02-2010	28-07-2012	2	5	4
THENI KAMMAVAR SANGAM COLLEGE OF TECHNOLOGY	ASSISTANT PROFESSOR	23-06-2014	13-02-2024	9	7	21
Total				13	11	18

V. Industrial Experience :

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

VI. C.O.E. Appointment Experience :


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



AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days) 2	Central Evaluation (No. of scripts Evaluated) 300	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	9222 - THENI KAMMAVAR SANGAM COLLEGE OF TECHNOLOGY
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. SAKTHIVEL R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	195/A, MARIAMMAN KOVIL STREET
Line 2	ARANMANAIPUTHUR
District	THENI
Telephone number	-
Mobile number	+91 - 9629116804
Email	SAKTHIVELBE077@GMAIL.COM
Gender	MALE
Community	MBC
PAN Number	CILPS7203K
Passport Number	
Aadhar Number	729694634152
Faculty code given by C.O.E.	9222134
Faculty code given by A.I.C.T.E.	12303693869
Date of Birth	26-10-1987
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.	AUTOMOBILE ENGINEERING	2012	OTHERS - KARPAGAM UNIVERSITY	OTHERS - KARPAGAM UNIVERSITY	81.12	FIRST CLASS	
P.G.	M.E.	THERMAL ENGINEERING	2014	JAYAM COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.55	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
THENI KAMMAVAR SANGAM COLLEGE OF TECHNOLOGY	ASSISTANT PROFESSOR	24-06-2014	13-02-2024	9	7	20
Total				9	7	23

V. Industrial Experience :

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


VI. C.O.E. Appointment Experience :
Capacity at which service is extended for the conduct of 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)
5			125	

I hereby certify that all the information provided are true to the best of my knowledge.

M. S. Thiruv.

Signature of the Faculty :

Name of the College	9222 - THENI KAMMAVAR SANGAM COLLEGE OF TECHNOLOGY
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. SURESH P
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1/146B SS PURAM
Line 2	AUNDIPATTI
District	THENI
Telephone number	-
Mobile number	+91 - 9003593185
Email	SURESHCALM92@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	EUBPS1080P
Passport Number	
Aadhar Number	602785999865
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	3542048965
Date of Birth	07-03-1992
Age	32
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	2014	NADAR SARASWATHI COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	6.97	FIRST CLASS	
P.G.	M.E.	ENGINEERING DESIGN	2016	THENI KAMMAVAR SANGAM COLLEGE OF TECHNOLOGY	ANNA UNIVERSITY	7.89	FIRST CLASS	

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I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

IV. Academic Experience :

(Start from the Current working Experience) *

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
THENI KAMMAVAR SANGAM COLLEGE OF TECHNOLOGY	ASSISTANT PROFESSOR	30-03-2017	13-02-2024	6	10	15
Total				6	10	20

V. Industrial Experience :

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

VI. C.O.E. Appointment Experience :


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



AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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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	9222 - THENI KAMMAVAR SANGAM COLLEGE OF TECHNOLOGY
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.E.-MECHANICAL ENGINEERING
Name of the faculty member	MR. RAJKUMAR P
Regular Or Adjunct	Regular
Image	 <p>PRINCIPAL Theni Kammavar Sangam College of Technology Koduvilarpatti, Theni-625 534</p>
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	240/3, EAST STREET, ARANMANAIPUTHUR
Line 2	THENI-625531
District	THENI
Telephone number	-
Mobile number	+91 - 7339041086
Email	RAJKUMAR3105@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BVNPR0644A
Passport Number	
Aadhar Number	844841411961
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	74404490707
Date of Birth	31-05-1988
Age	36
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	MECHANICAL ENGINEERING	2009	THIAGARAJAR COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	6.78	SECOND CLASS	
P.G.	M.E.	THERMAL ENGINEERING	2014	GOVERNMENT COLLEGE OF ENGINEERING SALEM (AUTONOMOUS)	ANNA UNIVERSITY	7.63	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
THENI KAMMAVAR SANGAM COLLEGE OF TECHNOLOGY	ASSISTANT PROFESSOR	04-07-2018	13-02-2024	5	7	10
Total				5	7	13

V. Industrial Experience :


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

VI. C.O.E. Appointment Experience :

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

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



Signature of the Faculty :