

Anna University, Chennai CSI College of Engineering - 7106

Consolidated_Report

13.faculty

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	309985
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	M.ESTRUCTURAL ENGINEERING
Name of the faculty member	DR. MERCY SHANTHI SAMUEL JOHNSON R
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	103 A, ANGEL GARDEN, KARUNYA NAGAR
Line 2	COIMBATORE - 641114
District	COIMBATORE
Telephone number	-
Mobile number	+91 - 7339012615
Email	PRINCIPAL@CSICE.EDU.IN
Gender	FEMALE
Community	BC
PAN Number	ALCPS2437C
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-44724023394
Date of Birth	12-05-1969
Age	55
I. Particulars of Educational Qualification : (only complete	d)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name the Univers y	Grades	Class obtained	Certificat e
U.G.	B.E.	CIVIL ENGINEE RING	1990	P S G COLLEGE OF TECHNOL OGY (AUTONO MOUS)	BHARAT IYAR UNIVER TY	FIDST	FIRST CLASS	
P.G.	M.E.	STRUCTU RAL ENGINEE RING	1997	P S G COLLEGE OF TECHNOL OGY (AUTONO MOUS)	BHARAT IYAR UNIVER TY	FIDCT	FIRST CLASS	
PH.D.	PH.D.	CIVIL ENGINEE RING	2006	OTHERS - BHARATH IYAR UNIVERSI TY	BHARAT IYAR UNIVER TY	v		Parameters Parame
OTHERS - MBA	OTHERS - MBA	OTHERS - EXCUTIVE MANAGE MENT	2015	OTHERS - BHARATH IYAR UNIVERSI TY	BHARAT IYAR UNIVER TY	FIDCT	FIRST CLASS	
* Upload Sc	anned copy o	of Original De						
I.a. Additic Score : File :	onal Qualific	c ation :- NO	CATION					
II. Title of	Ph.D. Thesi	S						

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Loining Data	Relieving Date / Current Date for Presently	Experience		
Name of the Conege	Designation	Joining Date	Working Institutions	Years	Months	Days
OTHERS - KARUNYA INSTITUTE OF TECHNLOGY AND SCIENCES	OTHERS - LECTURER	19-02-1996	13-01-2001	4	10	24
CSI COLLEGE OF ENGINEERING	PROFESSOR	15-03-2024	03-12-2024	0	8	20
OTHERS - CHRIST THE KING INSTITUTE OF TECHNLOGY	OTHERS - LECTURER	14-06-1995	16-02-1996	0	8	3
OTHERS - KARUNYA UNIVERSITY	ASSISTANT PROFESSOR	08-08-2006	30-06-2008	1	10	24
OTHERS - KARUNYA INSTITUTE OF TECHNLOGY AND SCIENCES	ASSOCIATE PROFESSOR	01-07-2008	30-06-2021	12	11	31
OTHERS - KARUNYA INSTITUTE OF TECHNOLOGY AND SCIENCES	OTHERS - SENIOR LECTURER	01-02-2001	07-08-2006	5	6	7
			Total	26	8	25

V. Industrial Experience :

Name of the Organisation Desi	Designation	Nature of Laining Data		Relieving Date	Experience		
	Designation	Work	Joining Date	Kellevilig Date	Years	Months	Days
DESIGN FORUM	DESIGN ENGINEER	DESIGN	01-11-1990	01-12-1991	1	1	1
		Total	1	1	1		

VI. C.O.E. Appointment Experience :

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

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

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

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Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	300485
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	M.EMANUFACTURING ENGINEERING
Name of the faculty member	DR. FAIZUR RAHMAN
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	15C CHINNAMMAL LAYOUT COOPERATIVE COLONY
Line 2	METTUPALAYAM 641301
District	COIMBATORE
Telephone number	-
Mobile number	+91 - 9500247883
Email	FAIZURMECH@GMAIL.COM
Gender	MALE
Community	OTHERS - BCM
PAN Number	AAZPF2957J
Passport Number	
Faculty code given by C.O.E.	7106041
Faculty code given by A.I.C.T.E.	1-3743582023
Date of Birth	14-08-1983
Age	41
I. Particulars of Educational Qualification : (on	ly completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	MECHANI CAL ENGINEE RING	2005	KARPAGA M COLLEGE OF ENGINEE RING (AUTONO MOUS)	ANNA UNIVERSI TY	74.5	FIRST CLASS	
P.G.	M.E.	COMPUTE R INTEGRAT ED MANUFA CTURING	2009	P S G COLLEGE OF TECHNOL OGY (AUTONO MOUS)	ANNA UNIVERSI TY	8.51	DISTINCT ION	
PH.D.	PH.D.	MECHANI CAL ENGINEE RING	2015	P S G COLLEGE OF TECHNOL OGY (AUTONO MOUS)	ANNA UNIVERSI TY	8		
		of Original De c ation :- NO			CATION			
	Ph.D. Thesi							
III. Faculty	y in which P	h.D. was aw	arded					
IV. Acaden (<mark>Start fro</mark> i	nic Experier m the Curre	nce : nt working]	Experienc	e)*				

Name of t	he C		Dec	ignation	Ioinin	a Data	Relieving Date / Current Date for Presently	Experience		
name or				Designation Joining Date		Working Institutions	Years	Months	Days	
CSI COLLEG ENGINEERI			ASSIST PROFE		13-12-20)11	20-11-2024	12	11	8
SREE SAKTH ENGINEERI (AUTONOM)	NG CO	OLLEGE	ASSIST PROFE		10-06-20	011	30-11-2011	0	5	21
CHRIST THE ENGINEERI			ASSIST PROFE		02-02-20)11	23-05-2011	0	3	22
SRI ESHWAI OF ENGINE (AUTONOM)	ERINO		ASSIS PROFE		01-07-20	01-07-2009 31-01-20		1	6	31
					Total	15	3	24		
V. Industrial	Expe	rience :								
Name of the		D .		Nature of				Experience		e
Organisat	ion	Design	ation	Work		g Date	Date Relieving Date		Months	Days
DSM SOFTW PVT LIMITE		JUNIOR EXECUT		CADCAM	23-07-20	005	31-10-2005	0	3	9
RANSAR INDUSTRIES LIMITED UN COIMBATOF	IIT	ENGINE TRAINE		CADCAM	02-02-2006		17-05-2007	1	3	16
							Total	1	6	27
VI. C.O.E. A _I Capacity at v					e conduc	t of Exm	ination during th	ne last y	ear	
AUR (No. of days)	Ν	Squad Iember . of days		xternal Exa (Practica (No. of day 1	l)	(No.	ll Evaluation of scripts aluated)	Re-Evaluation (No. of scripts Evaluated)		
it is certified	that a	ll the info	rmation	provided ar	e true to	the best o	of my knowledge.			
Signature of	the I									

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	310273
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-MATHEMATICS
Name of the faculty member	DR. THIAGARAJ H B
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	4/28 A, HALADA, LOVEDALE POST
Line 2	OOTY -643003
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9442348090
Email	HBTHIAGUSAGU@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	ACOPT8567D
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-511787315
Date of Birth	01-03-1974
Age	50
I. Particulars of Educational Qualification :	(only completed)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.SC.	OTHERS - MATHEM ATICS	1994	OTHERS - GOVT ARTS COLLEGE OOTY	BHARATH IYAR UNIVERSI TY	56.6	SECOND CLASS	A second
P.G.	M.SC.	OTHERS - MATHEM ATICS	1997	OTHERS - SRI AVVM PUSHPAM COLLEGE	BHARATH IDASAN UNIVERSI TY	67	FIRST CLASS	
PH.D.	PH.D.	MATHEM ATICS	2015	ANNA UNIVESIT Y REGIONA L CAMPUS, COIMBAT ORE	ANNA UNIVERSI TY	Y		
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - MATHEM ATICS	2007	OTHERS - MADURAI KAMARAJ UNIVERSI TY	MADURAI KAMARAJ UNIVERSI TY	52	SECOND CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

File:

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently	Experience						
	Designation	Johning Date	Working Institutions	Years	Months	Days				
CSI COLLEGE OF ENGINEERING	ASSOCIATE PROFESSOR	14-09-1998	04-12-2024	26	2	21				
Total 26 2 22										
V. Industrial Experience :										

Name of th	e Destauration	Nature of	Tainin	- Data	Daliasin - Data	Experience		e
Organisatio	Designation	Work	Joining Date Relieving 1	Relieving Date	Years	Months	Days	
	ppointment Expe which service is a		conduct	t of Exmi	nation during the	e last ye	ar	
AUR (No. of days)	Squad Member (No. of days)	External Exan (Practical (No. of day)	(No.	l Evaluation of scripts aluated)	(No.	Evaluatior of scripts aluated)	-
	-							
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is certified	that all the inform	ation provided are	e true to t	the best o	f my knowledge.			
is certified	that all the inform	ation provided are	e true to t	the best o	f my knowledge.			
is certified			e true to t	the best o	f my knowledge.			
		ation provided are	e true to t	the best o	f my knowledge.			

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	303200
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.EMECHANICAL ENGINEERING
Name of the faculty member	DR. JOSHUA GNANA SEKARAN J
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	1/1, KAMARAJAR NAGAR, 2ND CROSS , CHINNATHIRUPATHI
Line 2	SALEM -636007
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9894647447
Email	VIJOLINEJOSHUA1@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AEPPJ2822L
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-7885894737
Date of Birth	17-02-1970
Age	54
I. Particulars of Educational Qualification : (only con	npleted)

Category	Name of the Degree	Specializa tion	Year of Passing	Name o the Collego	t	me of he ⁄ersity	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtaine		ificat e
U.G.	B.E.	MECHANI CAL ENGINEER ING	1991	TAMILNA U COLLEG OF ENGINE ING	E BHA YAR UNIV	RATHI VERSI	61	SECONI CLASS		A set of the set of th
P.G.	OTHERS - MS	OTHERS - TECHNOL OGICAL OPERATIO NS	1996	OTHERS BIRLA INSTITU E OF TECHNO OGY PILANI	T INST E OF	TITUT T HNOL	66	FIRST CLASS	Ryon the Terranovskeine Socialise Gen 1	A Carang, G. Star as how eventure to the overview to t
PH.D.	PH.D.	MECHANI CAL ENGINEER ING	2019	ADHIYAN AAN COLLEG OF ENGINE ING (AUTON(MOUS)	E ANN ER UNIV TY	A VERSI	Y			
I.a. Additi Score : File :	canned copy o onal Qualific	ation :- NO A			FICATION	1				
III. Facult	y in which Pl	h.D. was awa	rded							
	nic Experien m the Curre		xperience	;)*						
Namo	of the Colleg	a Das	ignation	Ioin	ing Date	/ C ı	ieving Date urrent Date r Presently		xperience	9
TAULE	or the coney		ignation	J011	my Date		Working stitutions	Years	Months	Days
OTHERS - POLYTEC	CSI HNIC COLLEG	GE OTHER	S - HOD	17-07	-1992	01-0)8-2019	27	0	16
CSI COLL ENGINEE		ASSOCI PROFES		02-08	-2019	25-1	1-2024	5	3	24

Name of the	Decignation	Nature of Work	Joining Date	Relieving Date	E	xperience	,
Organisation	Designation	Nature of work	Joining Date	Kelleving Date	Years	Months	Days
CSI SOLAR POWER RESEARCH CENTRE SALEM	PROJECT OFFICER	RESEARCH AND DEVELOPMENT	17-07-1992	16-07-1999	6	11	31
				Total	7	0	0

VI. C.O.E. Appointment Experience :

Capacity at w	which service is e	xtended for the conduct	of Exmination during tl	he last year
AUR	Squad	External Examiner	Central Evaluation	Re-Evaluation
(No. of	Member	(Practical)	(No. of scripts	(No. of scripts
days)	(No. of days)	(No. of days)	Evaluated)	Evaluated)

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



Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	306982
Name of the Department	ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the Degree & Course	B.EELECTRICAL AND ELECTRONICS ENGINEERING
Name of the faculty member	MR. SOMASUNDRAM I
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	6/8, MUTTINADU , ATHIGARATTI
Line 2	COONOOR - 643203
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9786092346
Email	SOMIYAPPAN@YAHOO.COM
Gender	MALE
Community	BC
PAN Number	FBHPS6827L
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-4686614090
Date of Birth	11-11-1986
Age	38
I. Particulars of Educational Qualification : (only complete	d)

Category	Name of the Degree	Specializ ation	Year of Passing	Name o the College		ame of the iversit y	% of Marks Grades obtaine / Ph.D. Awarde (Y/N)	d Clas obtain		tificat e
U.G.	B.E.	ELECTRIC AL AND ELECTRO NICS ENGINEE RING	2008	CSI COLLEG OF ENGINE RING	UN	NA IVERSI	61	FIRST CLASS		
P.G.	M.E.	POWER ELECTRO NICS AND DRIVES	2013	BANNAR AMMAN INSTITU E OF TECHNC OGY (AUTON(MOUS)	T AN DL UN TY	NA IVERSI	8.5	FIRST CLASS		
* Upload Sc	anned copy o	f Original De	earee Certi	ficate.						
-		-			IFICAT					
Score : File :	onal Qualific		ADDITION	AL QUAL	ΓΙζΑΙ	ION				
II. Title of	Ph.D. Thesis	5								
III. Faculty	in which Pl	ı.D. was aw	arded							
	nic Experien <mark>n the Curre</mark> i		Experienc	e)*						
						/ Cu	eving Dat rrent Dat	e E	Experience	e
Name of	the College	Desig	nation	Joinin	g Date	V	Presently Vorking stitutions	Vears	Months	Days
CSI COLLE ENGINEEE		ASSISTA PROFESS		08-01-2	018	28-12	1-2024	6	10	21
							Tot	al 6	10	26
V. Industri	al Experienc	ce :								
Name of	the	Na	ature of						xperienc	e
Organisat	ion Design	ation	Work	Joinin	g Date	Reli	eving Dat	Years	Months	Days
	Appointmen t which serv			e conduc	t of Fv	minatio	n during	the last v	ear	
AUR (No. of days)	Squa Memb (No. of d	d Ex er	ternal Exa (Practica (No. of da	miner al)	Cent (N	ral Eval o. of sci Evaluate	uation ripts	Re-l (No.	Evaluation of script aluated)	

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



Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	307010
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECHARTIFICIAL INTELLIGENCE AND DATA SCIENCE
Name of the faculty member	MRS. SOFINA T
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	III/565 4, LOWER CRUZ PET, BOYSCOMPANY
Line 2	COONOOR - 643231
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 6379325021
Email	SOFINANAFE@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	JCPPS4394F
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-44721718656
Date of Birth	22-01-1992
Age	32
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	ELECTRO NICS AND COMMUN ICATION ENGINEE RING	2014	CSI COLLEGE OF ENGINEE RING	ANNA UNIVERSI TY	7.2	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

File:

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

IV. Academic Experience :

(Start from the Current working Experience) \ast

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently	Е	xperience	<u>,</u>
Name of the Coneye	Designation	Johning Date	Working Institutions	Years	Months	Days
CSI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	16-08-2024	28-11-2024	0	3	13
			Total	0	3	14

V. Industrial Experience :

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

VI. C.O.E. Appointment Experience :

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

days)(No. of days)Evaluated)Evaluated)
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It is certified that all the information provided are true to the best of my knowledge.



Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	307037
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.EELECTRONICS AND COMMUNICATION ENGINEERING
Name of the faculty member	MRS. RINISHA PREM PRIYA
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	8/181 F2, JUBLIEE CORNER, KETTI
Line 2	OOTY - 643215
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9786723964
Email	RINISHAPRIYA.RP@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	EULPR6231M
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-44724012094
Date of Birth	22-03-1996
Age	28
I. Particulars of Educational Qualification : (only	completed)

Category	Name of the Degree		cializa ion	Year of Passing	Name o the College	the	e	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		tificat e
U.G.	B.E.	NICS COM CATI	INEE	2017	CSI COLLEG OF ENGINE RING	UNIVE	RSI	6.89	FIRST CLASS		
P.G.	M.E.	VLSI DESI		2019	SNS COLLEG OF TECHNC OGY (AUTON(MOUS)	OL ANNA UNIVE TY		9.2	DISTINC ON		An increase in the second seco
Upload S	canned copy	of Orig	inal Deg	gree Certific	cate.						
	Ph.D. Thes	is									
III. Facult IV. Acader (Start fro	y in which F mic Experier <mark>m the Curre</mark>	h.D. w nce : ent wo	rking E	xperience		ing Date	/ Cu	ieving Date prent Date		xperienc	e
III. Facult IV. Acader (Start fro	y in which F mic Experier	h.D. w nce : ent wo	rking E			ing Date	/ Cu for			Experienc Months	e Days
III. Facult IV. Acader (Start fro	y in which F mic Experien m the Curre of the Colleg EGE OF	Ph.D. w nce : ent wor	rking E	gnation			/ Cu for V In	irrent Date Presently Working	E	-	
III. Facult V. Acader Start fro Name of CSI COLL	y in which F mic Experien m the Curre of the Colleg EGE OF	Ph.D. w nce : ent wor	rking E Desi	gnation	Joini		/ Cu for V In	Irrent Date Presently Working stitutions	Years 0	Months	Days
III. Facult V. Acader (Start fro Name of CSI COLL ENGINEE	y in which F mic Experien m the Curre of the Colleg EGE OF	e A	rking E Desi	gnation	Joini		/ Cu for V In	Presently Working stitutions	Years 0	- Months	Days
III. Facult V. Acader (Start fro Name of CSI COLL ENGINEE V. Industr	y in which F mic Experien m the Curre of the Colleg EGE OF RING ial Experien	e A P CCE :	Desi SSISTA ROFES:	gnation NT SOR	Join	2024	/ Cu for 1 28-1	Presently Working stitutions 1-2024 Total	Years 0 1 0	- Months	Days 9 12
III. Facult V. Acader Start fro Name of CSI COLL ENGINEE	y in which F mic Experien m the Curre of the Colleg EGE OF RING ial Experien the Docim	e A P CCE :	Desi SSISTA ROFES:	gnation	Join		/ Cu for 1 28-1	Presently Working stitutions	Years 0 1 0	Months 6 6	Days 9 12
II. Facult V. Acader Start fro Name of CSI COLL ENGINEE V. Industr Name of Organisa /I. C.O.E.	y in which F mic Experien m the Curre of the Colleg EGE OF RING ial Experien the tion Design	e A ce : nation t Expe	Desi	gnation NT SOR re of Work	Joini 20-05-	2024 ing Date	/ Cu for V In 28-1	ieving Date	Years 0 1 0 Years	Months 6 6 Cxperienc Months	Days 9 12 e
II. Facult V. Acader Start fro Name of CSI COLL ENGINEE V. Industr Name of Organisa /I. C.O.E.	y in which F mic Experien m the Curre of the Colleg EGE OF RING ial Experien the tion Design	e A P ce : nation	rking E Desi SSISTA ROFES Natu erience extend	gnation NT SOR re of Work	Joini 20-05-	2024 ing Date	/ Cu for In 28-1 Reli	rrrent Date Presently Working stitutions 1-2024 Total ieving Date during the	Years 0 1 0 E Years Last yea	Months 6 6 Cxperienc Months	9 12 e Days

PJ. Signature of the Faculty :

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	307073
Name of the Department	ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the Degree & Course	B.EELECTRICAL AND ELECTRONICS ENGINEERING
Name of the faculty member	MS. LAKSHMI PRIYA G
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	10/256 D3, NANDHA COLONY,JEGATHALA ROAD, ARUVANKADU
Line 2	COONOOR - 643202
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9488971704
Email	LAKSHMIVINOD2210@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BAQPL7800N
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-44724497326
Date of Birth	22-09-1993
Age	31
I. Particulars of Educational Qualification : (only completed)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	ELECTRIC AL AND ELECTRO NICS ENGINEE RING	2015	TEJAA SHAKTHI INSTITUT E OF TECHNOL OGY FOR WOMEN	ANNA UNIVERSI TY	73	FIRST CLASS	
P.G.	M.E.	POWER ELECTRO NICS AND DRIVES	2017	CSI COLLEGE OF ENGINEE RING	ANNA UNIVERSI TY	78	FIRST CLASS	And Balancerry and State

* Upload Scanned copy of Original Degree Certificate.

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

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

IV. Academic Experience :

(Start from the Current working Experience) *

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently	Experience		
Name of the Conege	Designation	Joining Date	Working Institutions	Years	Months	Days
CSI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	10-08-2022	28-11-2024	2	3	19
CHRIST THE KING ENGINEERING COLLEGE	ASSISTANT PROFESSOR	02-01-2019	11-03-2020	1	2	10
		-	Total	3	5	1

V. Industrial Experience :

Name of the	Decignation	Nature of Work	Joining Data	Deligning Date	E	xperience	Ð
Organisation	Designation	Nature of work	Joining Date	Kelleving Date	Years	Months	Days

VI. C.O.E. Appointment Experience :

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

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

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

Prilth Signature of the Faculty :

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	308291
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.ECOMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MRS. MITHRA ANAND
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	4/253, JEGATHALA VILLAGE AND POST
Line 2	ARUVANKADU COONOOR - 643202
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 8072424061
Email	MITHRAANAND22@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BVKPM7656N
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-44152954299
Date of Birth	17-05-1993
Age	31
I. Particulars of Educational Qualification : (only completed)

Name of the Degree	Specializ ation	Year of Passing	Name of the College	th Univ	ne ersit	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)			ificat e
B.E.	R SCIENCE AND ENGINEE	2014	SENGUNT HAR COLLEGE OF ENGINEE RING			7.3	FIRST CLASS		And and a second s
M.E.	R SCIENCE AND ENGINEE	2016	CSI COLLEGE OF ENGINEE RING			7.6	FIRST CLASS	And Thermore and the second se	The second
		-		CATIO	 N				
Ph.D. Thesis									
y in which Ph	.D. was aw	arded							
		Experience	e)*						
the College	Desir	mation	Ioining	/ Current Date		rrent Date	Е	xperience	
		jiiutioii	Jonnig			Vorking	Years	Months	Days
EGE OF RING			01-02-202	4 28-11-2024		0	9	28	
						Total	0	9	2
ial Experienc	e :								
the	Ni	ature of		. .			E	xperience	,
tion	ITIAN I		Joining	Date	Relie	eving Date	Years	Months	Days
Appointment			1.	f Evmi	inatio	n during th	o last w	nor	
	Capacity at which service is extended for the conductAURSquadExternal Examiner(No. ofMember(Practical)days)(No. of days)(No. of days)								
	the Degree B.E. M.E. M.E. anned copy of onal Qualification ph.D. Thesis y in which Ph nic Experience the College EGE OF RING	the DegreeSpecializ ationthe DegreeCOMPUTE R SCIENCE AND ENGINEE RINGB.E.COMPUTE R SCIENCE AND ENGINEE RINGM.E.COMPUTE R SCIENCE AND ENGINEE RINGanned copy of Original Do Original Do Onal Qualification :- NOPh.D. Thesis y in which Ph.D. was aw nic Experience : m the Current workingThe CollegeDesignationEGE OF RINGASSISTA PROFESSal Experience : the DesignationName 	the DegreeSpecializ ationYear of Passingb.e.COMPUTE R SCIENCE AND ENGINEE RING2014b.e.COMPUTE R SCIENCE AND ENGINEE RING2016m.e.COMPUTE R SCIENCE AND ENGINEE RING2016canned copy of Original Degree Certif Original Qualification :- NO ADDITION.Ph.D. Thesis y in which Ph.D. was awardedrate copy of Original Degree Certif Designationfic Experience : m the Current working Experiencef the CollegeDesignationEGE OF RINGASSISTANT PROFESSORal Experience : the DesignationNature of	the DegreeSpecializ ationYear of Passingthe CollegeB.E.COMPUTE R SCIENCE AND ENGINEE RING2014SENGUNT HAR COLLEGE OF ENGINEE RINGM.E.COMPUTE R SCIENCE AND ENGINEE RING2016CSI COLLEGE OF ENGINEE RINGM.E.COMPUTE R SCIENCE AND ENGINEE RING2016CSI COLLEGE OF ENGINEE RINGanned copy of Original Degree Certificate.onal Qualification :- NO ADDITIONAL QUALIFIPh.D. Thesisy in which Ph.D. was awardednic Experience : m the Current working Experience) *E the CollegeDesignationJoining IEGE OF RINGASSISTANT PROFESSOR01-02-202- 01-02-202-al Experience : the DesignationNature of Ioining I	Name of the DegreeSpecializ ationYear of PassingName of the Collegeth Univ Univ YB.E.COMPUTE R SCIENCE AND ENGINEE RING2014SENGUNT HAR COLLEGE OF ENGINEE RINGANNA UNIV TYM.E.COMPUTE R SCIENCE AND ENGINEE RING2016CSI COLLEGE OF ENGINEE RINGANNA UNIV TYM.E.COMPUTE R SCIENCE AND ENGINEE RING2016CSI COLLEGE OF ENGINEE RINGANNA UNIV TYanned copy of Original Degree Certificate.On ADDITIONAL QUALIFICATIONPh.D. Thesisyin which Ph.D. was awardedInit Experience : mithe Current working Experience) *F the CollegeDesignationJoining DateGege of RINGASSISTANT PROFESSOR01-02-2024al Experience : the DesignationNature ofLigning Date	the DegreeSpecializ ationYear of Passingthe Collegethe Universit yB.E.COMPUTE R SCIENCE AND ENGINEE RING2014SENGUNT HAR COLLEGE OF ENGINEE RINGANNA UNIVERSI TYM.E.COMPUTE R SCIENCE AND ENGINEE RING2016SENGUNT HAR COLLEGE OF ENGINEE RINGANNA UNIVERSI TYM.E.COMPUTE R SCIENCE AND ENGINEE RING2016CSI COLLEGE OF ENGINEE RINGANNA UNIVERSI TYanned copy of Original Degree Certificate.OF ENGINEE RINGJoining DateRelia for YPh.D. Thesisyin the Current working Experience) *Image: Complex of the complex	Name of the DegreeSpecializ ationYear of PassingName of the collegeName of the universityMarks / Grades oblained /Ph.D. Awarded (V/N)B.E.COMPUTE R SCIENCE AND ENGINEE RING2014SENGUNT HAR COLLEGE OF ENGINEE RINGANNA UNIVERSI TY7.3M.E.COMPUTE R SCIENCE AND ENGINEE RING2016CSI COLLEGE OF ENGINEE RINGANNA UNIVERSI TY7.6M.E.COMPUTE R SCIENCE AND ENGINEE RING2016CSI COLLEGE OF ENGINEE RINGANNA UNIVERSI TY7.6Ph.D. Thesis2016CSI COLLEGE OF ENGINEE RINGCSI COLLEGE OF ENGINEE RINGANNA UNIVERSI TY7.6Ph.D. ThesisImage: Selection :- NO ADDITIONAL QUALIFICATIONInte Current vorking Experience :-Image: Selection :- NOInte Current vorking Experience :-Inte Current vorking Experience :-Inte Current vorking Experience :-Inte CollegeDesignationJoining Date// Current Date for Presently Working InstitutionsEGE OFASSISTANT POFESSORGGE OFASSISTANT POFESSORGGE OFASSISTANT POFESSORInte current vorkingInte current vorkingInte current vorkingInte current vorkingInte current vorkingInte current vorkingInte curr	Name of the Degree Specializ ation Year of Passing Name of the College Name of the Universit y Marks / Grades (V/N) Class obtained (V/N) B.E. COMPUTE AND ENGINEE RING 2014 SENGUNT HAR COLLEGE OF ENGINEE RING ANNA UNIVERSI TY 7.3 FIRST CLASS M.E. COMPUTE RING 2016 CSI COLLEGE OF ENGINEE RING ANNA UNIVERSI TY 7.6 FIRST CLASS M.E. COMPUTE RING 2016 CSI COLLEGE OF ENGINEE RING ANNA UNIVERSI 7.6 FIRST CLASS Table SCIENCE AND ENGINEE RING 2016 CSI COLLEGE OF ENGINEE RING ANNA UNIVERSI 7.6 FIRST CLASS Table SCIENCE AND ENGINEE 2016 CSI COLLEGE OF ENGINEE RING ANNA UNIVERSI 7.6 FIRST CLASS Table SCIENCE AND ENGINEE 2016 SI COLLEGE OF ENGINE SI COLLEGE OF RING ANNA UNIVERSI 7.6 FIRST CLASS The College Designation Joining Date Relieving Date E The College Designation Joining Date Relieving Date E Table SCIENCE ASSISTANT PROFESSOR Joining	Name of the Degree Specializ ation Year of Passing Name of the College Name of the University Marks / Grades (Vh) Class obtained /Ph.D. Awarded (Vh) Class obtained /Ph.D. Awarded Cert B.E. COMPUTE R SCIENCE AND ENGINEE 2014 SENGUNT HAR COLLEGE OF ENGINEE ANNA UNIVERSI TY 7.3 FIRST CLASS Image: Cert Image: College Image: Cert Image: Cert Image: College Image: Cert Image: College Image: Cert Image:



Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	307136
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-PHYSICS
Name of the faculty member	MR. AJAY KUMAR M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	145/1, THEETUKAL, MULLIKORAI POST
Line 2	OOTY - 643004
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9123518979
Email	MAGESHAJAYKUMAR@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	НСНРМ1565А
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-44724191454
Date of Birth	15-04-2002
Age	22
I. Particulars of Educational Qualification : (only co	npleted)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name the Univer	sity	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtaine	ed Certi	ficate	
U.G.	B.SC.	OTHERS - PHYSICS	2019	OTHERS - GOVERNM ENT ARTS COLLEGE OOTY			82.6	DISTINC ON	TI		
P.G.	M.SC.	OTHERS - PHYSICS	2024	OTHERS - GOVERNM ENT ARTS COLLEGE OOTY			87.7	DISTINC ON	TI		
* Upload Sc	anned copy o	f Original Deg	gree Certifi	cate.							
I.a. Additio Score : File :	onal Qualific	ation :- NO A	ADDITIONA	L QUALIFI	CATION						
II. Title of	Ph.D. Thesis	3									
III. Faculty	v in which Ph	n.D. was awa	rded								
	nic Experience n the Currer		xperience) *							
						Relieving D / Current D		irrent Date		perience	
Name o	f the College	e Des	signation	Joini	Joining Date		Presently Vorking stitutions		Months	Days	
CSI COLLE ENGINEEF		ASSISTA PROFES		15-10-2	2024	024 28-11-2024		0	1	14	
							Tota	il 0	1	14	
V. Industri	al Experienc	e:									
Name of t	he								xperienc	e	
Organisat	Llocian	ation Natu	ire of Wor	k Joini	ng Date	Reli	eving Dat	e Years	Months	Days	
	Appointment			conduct o	f F i	ion di		la at man			
AUR (No. of days)	(No. of Member (Practical)				Central (No. o	Evalu	ation pts	Re-E (No.	valuation of scripts aluated)		
	is certified that all the information provided are true to the best of my knowledge.										

Signature of the Faculty :

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	307249
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.EELECTRONICS AND COMMUNICATION ENGINEERING
Name of the faculty member	DR. KOMATHY VANITHA K
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3/543 K K NAGAR, HUBATHALLAI
Line 2	COONOOR - 643202
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 6380483276
Email	VANITHA.KKV@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	АҮРРК0944А
Passport Number	
Faculty code given by C.O.E.	7106105
Faculty code given by A.I.C.T.E.	1-507353221
Date of Birth	03-03-1977
Age	47
I. Particulars of Educational Qualification : (only complete	d)

Category	Name of the Degree	Specializ ation	z Year of Passing	Name of the College	tł Univ	ne of ne versit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Clas: obtain		tificat e
U.G.	B.E.	ELECTRO NICS ANI COMMUN ICATION ENGINEE RING	0 ¹ 1998	TAMILNA DU COLLEGE OF ENGINEE RING	BHAF IYAR UNIV TY		64	FIRST CLASS		т сталат турк бай Салара Салара на такатаката такатаката такатаката такатаката таката такатакатаката
P.G.	M.TECH.	OTHERS MICRO ELECTRO NICS ANI VLSI DESIGN	2006	INDIAN INSTITUT E OF TECHNOL OGY(IIT) - MADRAS	INDIA INST E OF TECH OGY MADI	ITUT INOL	7.2	FIRST CLASS	500 Part Can 500 500 4 00 4 00	the second
PH.D.	PH.D.	OTHERS INFORMA TION ANI COMMUN ICATION	2024	ANNA UNIVESIT Y REGIONA L CAMPUS, COIMBAT ORE	ANNA UNIV TY		Y			
Score : File :	onal Qualific Ph.D. Thesi		O ADDITION	IAL QUALIFI	CATIO	N				
	y in which P		warded							
	m the Curre		J Experienc	e)*						
Name of the College		Des	Designation		Joining Date		Relieving Date / Current Date for Presently Working Institutions		Experience	
									Months	Days
CSI COLLEGE OF ENGINEERING			ASSISTANT PROFESSOR		14-06-1999		28-11-2024		5	15
							Total	25	5	17
7. Industri	ial Experien	ce :		-						
Name of the Organisation Designat		ation	ntion Nature of Work	Joining Date		Relieving Date		E Years		<u> </u>
									Months	Days

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

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	305195
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECHINFORMATION TECHNOLOGY
Name of the faculty member	MR. RAMAKRISHNAN A S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	244 E2 VETERINARY HOSPITAL ROAD
Line 2	OOTY -643001
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9629841409
Email	RAMMSIVARAJ@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AWAPR8607A
Passport Number	
Faculty code given by C.O.E.	7106582
Faculty code given by A.I.C.T.E.	1-44153081894
Date of Birth	11-12-1984
Age	40
I. Particulars of Educational Qualification : (on	ly completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name o the College	t Uni	ne of he versit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Clas obtain		ificat e	
U.G.	B.TECH.	INFORMA TION TECHNOL OGY	2007	BANNAR AMMAN INSTITUT E OF TECHNO OGY (AUTONO MOUS)	r ANN UNI TY	A VERSI	67	FIRST CLASS	en e		
P.G.	M.E.	COMPUTE R SCIENCE AND ENGINEE RING	2015	CSI COLLEGI OF ENGINEI RING	UNI	A VERSI	77	FIRST CLASS			
-	anned copy o										
I.a. Additic Score : File :	onal Qualific	a tion :- NO	ADDITION	IAL QUALI	FICATIO	DN					
II. Title of Ph.D. Thesis											
III. Faculty	III. Faculty in which Ph.D. was awarded										
	nic Experien n the Curre		Experienc	e)*							
Name of the College			Designation		Joining Date		Relieving Date / Current Date for Presently Working Institutions		Experience		
		Desig							Months	Days	
CSI COLLEGE OF ENGINEERING			SSISTANT ROFESSOR		12-10-2022		26-11-2024		1	15	
							Total		1	15	
V. Industri	al Experien	c e :									
Name of the Organisation		ation	ion Nature of Work		Joining Date		Relieving Date		Experience		
									Months	Days	
	Appointmen t which serv			e conduc	t of Exn	inatio	n durina tl	ne last v	ear		
AUR (No. of days)	UR Squad External Exam o. of Member (Practical			nminer al)	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.

NX
Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	299046
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECHINFORMATION TECHNOLOGY
Name of the faculty member	MRS. BANU PRIYA A
Regular Or Adjunct	Regular
Image	A CONTRACTOR OF
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	18, NARAYANASAMY LANE, VP STREET
Line 2	COONOOR 643102
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 7418841908
Email	VSBANUPRIYAME@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	ARIPB7254J
Passport Number	
Faculty code given by C.O.E.	7106084
Faculty code given by A.I.C.T.E.	1-496542191
Date of Birth	27-06-1987
Age	37
I. Particulars of Educational Qualification : (o	only completed)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Nam th Univ	ie ersit	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		tificat e
U.G.	B.TECH.	INFORMA TION TECHNOL OGY	2008	MAHARAJ A ENGINEE RING COLLEGE	ANNA UNIV TY		80.2	FIRST CLASS		
P.G.	M.E.	COMPUTE R SCIENCE AND ENGINEE RING	2015	GNANAM ANI COLLEGE OF TECHNOL OGY (AUTONO MOUS)	ANNA UNIV TY		8.2	FIRST CLASS	A second se	Antirerative An
* Upload Sc	anned copy c	of Original De	egree Certi	ficate.						
File : II. Title of III. Faculty	Ph.D. Thesis									
IV. Acaden (<mark>Start fro</mark> i	nic Experien m the Curre	ce : nt working	Experienc			/ Cu	eving Date	E		e
IV. Acaden (<mark>Start fro</mark> i	nic Experien	ce : nt working		e)* Joining	Date	/ Cu for W		E Years	Experience Months	e Days
IV. Acaden (<mark>Start fro</mark> i	nic Experien m the Curren f the College EGE OF	ce : nt working	Experience gnation			/ Cu for W Ins	rrent Date Presently Vorking		-	
V. Academ (Start from Name of CSI COLLI	nic Experien m the Curren f the College EGE OF	ce : nt working Desig	Experience gnation	Joining		/ Cu for W Ins	rrent Date Presently Vorking stitutions	Years 15	Months	Days
V. Academ (Start from Name of CSI COLLI ENGINEE	nic Experien m the Curren f the College EGE OF	ce : nt working Design ASSISTA PROFES	Experience gnation	Joining		/ Cu for W Ins	rrent Date Presently Vorking stitutions	Years 15	Months	Days 19
V. Academ (Start from Name of CSI COLLI ENGINEE V. Industri	nic Experien m the Curren f the College EGE OF RING	ce : Design ASSISTA PROFEST ce :	Experience gnation NT SOR	Joining 01-12-200	08	/ Cu: for W Ins 19-11	rrent Date Presently Vorking stitutions 1-2024 Total	Years 15 15	Months	Days 19 24
V. Academ Start from Name of CSI COLLI ENGINEE	nic Experien m the Curren f the College EGE OF RING ial Experience the Design	ce : Design ASSISTA PROFEST ce :	Experience gnation	Joining	08	/ Cu: for W Ins 19-11	rrent Date Presently Vorking stitutions	Years 15 15	Months 11 11	Days 19 24
V. Academ Start from Name of CSI COLLI ENGINEE	nic Experien m the Curren f the College EGE OF RING ial Experience the Design	ce : Designation ASSISTA PROFEST ce : ation	Experience gnation NT SOR ature of Work e :	Joining 01-12-200	08 Date	/ Cu: for W Ins 19-11	rrent Date Presently Vorking stitutions 1-2024 Total eving Date	Years 15 15 15 Years Years	Months 11 11 L Cxperience Months	Days 19 24

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



Signature of the Faculty :

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	299137
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECHINFORMATION TECHNOLOGY
Name of the faculty member	MRS. JAYALAKSHMI J
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	12/318A, SHANTHOOR, KETTI
Line 2	COONOOR - 643215
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9489580355
Email	JAYAMAHESHJAYA@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	AJGPJ8310D
Passport Number	
Faculty code given by C.O.E.	7106094
Faculty code given by A.I.C.T.E.	1-496542199
Date of Birth	02-05-1982
Age	42
I. Particulars of Educational Qualification : (o	only completed)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Nam th Unive	e	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		ificat e
U.G.	B.TECH.	INFORMA TION TECHNOL OGY	2004	SUN COLLEGE OF ENGINEE RING AND TECHNOL OGY	MANC NIAM SUND AR UNIVE TY	ARN	64.75	FIRST CLASS		
P.G.	M.E.	COMPUTE R SCIENCE AND ENGINEE RING	2014	ANNA UNIVESIT Y REGIONAL CAMPUS, COIMBAT ORE	ANNA UNIVI TY		6.7	FIRST CLASS		
Score : File : II. Title of III. Faculty IV. Academ	Ph.D. Thesis y in which Pl nic Experien	h.D. was awa	arded		CATION					
Nome	f the Celler		•	Inimira	/ Curre		eving Date rrent Date	E	xperience	9
Name (of the Colleg	je Desi	ignation	Joining	Date	V	Presently Vorking stitutions	Years	Months	Days
CSI COLLI ENGINEEI		ASSIST PROFE		06-08-200	17	19-1	1-2024	17	3	14
COLLEGE ENGEINEI	OTHERS - NEHRU COLLEGE OF ENGEINEERING AND RESEARCH CENTRE		05-09-200	5	17-0	7-2007	1	10	13	
							Total	19	1	28
V. Industri	al Experien	ce :				1				
Name of Organisat		ation Natu	re of Worl	k Joining	Date	Reli	eving Date		xperience Months	
5								Years	Months	Days

	pointment Expension which service is e		t of Exmination during th	e last year
AUR (No. of days) 7	Squad Member (No. of days)	External Examiner (Practical) (No. of days) 3	Central Evaluation (No. of scripts Evaluated) 500	Re-Evaluation (No. of scripts Evaluated) 150
It is certified	that all the informa	ation provided are true to	the best of my knowledge.	
	5	Jongoli		
Signature of	the Faculty :			

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	299213
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECHINFORMATION TECHNOLOGY
Name of the faculty member	MR. THIAGARAJAN G
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	11/59,SHANTHOOR, KETTI
Line 2	COONOOR - 643215
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 7010369804
Email	THIAGARAJAN@CSICE.EDU.IN
Gender	MALE
Community	BC
PAN Number	AFMPT2331L
Passport Number	
Faculty code given by C.O.E.	7106092
Faculty code given by A.I.C.T.E.	1-480750667
Date of Birth	03-06-1984
Age	40
I. Particulars of Educational Qualification : (on	lly completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.TECH.	INFORMA TION TECHNOL OGY	2005	CSI COLLEGE OF ENGINEE RING	ANNA UNIVERSI TY	64	FIRST CLASS	
P.G.	M.E.	COMPUTE R SCIENCE AND ENGINEE RING	2014	ANNA UNIVESIT Y REGIONA L CAMPUS, COIMBAT ORE	ANNA UNIVERSI TY	7.5	FIRST CLASS	
_		of Original De c ation :- NO	-		CATION			

Score : File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently	Experience			
	Designation	Johning Date	Working Institutions	Years	Months	Days	
CSI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	117-10-2005 10		14	2	21	
CSI COLLEGE OF ENGINEERING	ASSOCIATE PROFESSOR	07-01-2020	19-11-2024	4	10	13	
	Total	19	1	5			
V. Industrial Experience :							
				i			

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

	ppointment Expe which service is o		t of Exmination during	the last year
AUR (No. of days)	Squad Member (No. of days) 1	External Examiner (Practical) (No. of days) 5	Central Evaluation (No. of scripts Evaluated) 500	Re-Evaluation (No. of scripts Evaluated) 50
It is certified	that all the inform	ation provided are true to	the best of my knowledge.	
	bi	TYP		
Signature of	the Faculty :			

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	299583
Name of the Department	ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the Degree & Course	B.EELECTRICAL AND ELECTRONICS ENGINEERING
Name of the faculty member	MRS. PRIYA V
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	113/74, PERIYAR NAGAR, FINGER POST
Line 2	OOTY - 643006
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9789309524
Email	PRIYAVENU0409@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	CDFPP6434D
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-1507852968
Date of Birth	04-09-1987
Age	37
I. Particulars of Educational Qualification : (only o	completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name o the College	I tl Univ	ne of ne versit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Clas obtain		ificat e
U.G.	B.E.	ELECTRIC AL AND ELECTRO NICS ENGINEE RING	2010	CSI COLLEG OF ENGINE RING	UNIV	A ′ERSI	60	FIRST CLASS		
P.G.	M.E.	EMBEDDE D SYSTEM TECHNOL OGIES	2012	SRIRAM ENGINEI RING COLLEGI		A 'ERSI	7.4	FIRST CLASS		
' Upload Sc	anned copy o	f Original D	egree Certi	ficate.						
I.a. Additic Score : File :	onal Qualific	ation :- NO	ADDITION	IAL QUAL	FICATIO	N				
I. Title of	Ph.D. Thesis	5								
III. Faculty	in which P	h.D. was aw	arded							
	nic Experien n the Curren		Experienc	e)*						
						/ Cu	eving Date rrent Date	E	xperience	9
Name of	the College	Desig	JNATION	Joinin	g Date	N	Presently /orking titutions	Years	Months	Days
CSI COLLE ENGINEEE		ASSISTA PROFES		18-07-20	18-07-2012		19-11-2024		4	2
							Total	12	4	4
V. Industri	al Experienc	ce :								
Name of	the Design	N	ature of	Talas	D-+-	D - 14		E	xperience	e
Organisat	ion Design	ation	Work	Joinin	g Date	Relle	eving Date	Years	Months	Days
	Appointmen t which serv			o conduc	t of Even	inatia	n during +1	10 loct	oar	
AUR (No. of days) 14	Squa Memb (No. of d	d Ex er	ternal Exa (Practica (No. of da 4	miner al)	Centra (No.		uation ripts	Re-H (No.	ear Evaluation of script aluated)	



Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	299641
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECHARTIFICIAL INTELLIGENCE AND DATA SCIENCE
Name of the faculty member	MR. BILDASS SANTHOSAM I
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	11/55, UPPER MISSION COMPOUND SHANTOOR
Line 2	KETTI, OOTY - 643215
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9677949918
Email	BILDASS@CSICE.EDU.IN
Gender	MALE
Community	BC
PAN Number	ASSPB7386A
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-803597703
Date of Birth	31-12-1983
Age	41
I. Particulars of Educational Qualification : (on	ly completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	th	ersit	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		ificat e
U.G.	B.E.	ELECTRO NICS AND COMMUN ICATION ENGINEE RING	2007	JAYARAJ ANNAPAO KIAM CSI COLLEGE OF ENGINEE RING	ANNA UNIV TY		7.1	SECON CLASS		
P.G.		INFORMA TION TECHNOL OGY	2011	OTHERS KARUNY UNIVERS TY	A KARU	JNYA	7.6	FIRST CLASS		An unit of the second s
[•] Upload Sc	canned copy of	f Original De	egree Certi	ficate.						
I.a. Additic Score : File :	onal Qualific	a tion :- NO	ADDITION	AL QUALI	FICATIO	N				
I. Title of	Ph.D. Thesis									
III. Faculty	y in which Ph	.D. was aw	arded							
	nic Experience m the Curren		Experienc	e)*						
						/ Cu	eving Date rrent Date	Е	xperience	e
Name of	the College	Desig	nation	Joining	j Date	N	Presently /orking titutions	Years	Months	Days
CSI COLLI ENGINEEI		ASSISTA PROFESS		01-06-20	11	19-11	-2024	13	5	19
				01-06-20	11	19-11	-2024 Total		5 5	19 21
ENGINEEI		PROFESS		01-06-20	11	19-11				
ENGINEEI	RING al Experienc	PROFESS					Total	13		21
ENGINEEI V. Industri	al Experienc	PROFESS	SOR	01-06-20				13	5	21
ENGINEEI /. Industri Name of t Organisat /I. C.O.E. /	al Experienc	PROFESS	ature of Work	Joining	j Date	Relie	Total	13 E Years	5 xperience Months	21



Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	300141
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.EMECHANICAL ENGINEERING
Name of the faculty member	MR. NIJESH D
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	26 K3, UPSTAIRS PORTION, STATE BANK LANE
Line 2	OOTY -643001
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9751428774
Email	NIJESH.D@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	ANSPN9999C
Passport Number	
Faculty code given by C.O.E.	7106112
Faculty code given by A.I.C.T.E.	1-2192402444
Date of Birth	10-01-1990
Age	34
I. Particulars of Educational Qualification : (on	ly completed)

U.G. B.I P.G. M. * Upload Scann I.a. Additional Score : File : II. Title of Ph. III. Faculty in IV. Academic (Start from t	E. ned copy o	ation :- NO	-		ANNA UNIV TY ANNA UNIV TY	A ERSI	7.25	FIRST CLASS		
* Upload Scann I.a. Additional Score : File : II. Title of Ph. III. Faculty in IV. Academic	ned copy o I Qualific	f Original De ation :- NO	egree Certi	HAN COLLEGE OF ENGINEE RING AND TECHNOL OGY(AUT ONOMOU S)	UNIV TY	ERSI	7.6			
I.a. Additional Score : File : II. Title of Ph. III. Faculty in IV. Academic	l Qualific	ation :- NO	-		CATIO	N				
	which Pl	h.D. was aw	varded							
			Experienc	e) *						
Name of the	College	Desig	Ination	Joining	Date	/ Cur	eving Date rrent Date Presently	E	xperience)
Nume of the	concyc	Desig	jiiution	Jonnigh	Duit	W	orking titutions	Years	Months	Days
CSI COLLEGE ENGINEERIN		ASSISTA PROFESS		03-06-2013	3	20-11	-2024	11	5	18
							Total	11	5	20
V. Industrial I	Experienc	ce :								
Name of the Organisation	Design	Na						1	xperience	

AUR (No. of days) 2	Squad Member (No. of days)	External Examiner (Practical) (No. of days) 3	Central Evaluation (No. of scripts Evaluated) 200	Re-Evaluation (No. of scripts Evaluated)
is certified	that all the inform	ation provided are true to	the best of my knowledge.	

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	300168
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.EMECHANICAL ENGINEERING
Name of the faculty member	MR. RAJESH JAIPAUL S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	12/250, KOMBUKORAI SHANTHOOR
Line 2	KETTI POST - 643215
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9843059865
Email	JAIMECH08@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BUVPR4201G
Passport Number	
Faculty code given by C.O.E.	7106031
Faculty code given by A.I.C.T.E.	1-1498679380
Date of Birth	13-08-1985
Age	39
I. Particulars of Educational Qualification : (or	ly completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Nam th Univ y	ersit	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Clas: obtain		ificat e
U.G.	B.E.	MECHANI CAL ENGINEE RING	2008	CSI COLLEGE OF ENGINEE RING	ANNA UNIV TY		68	SECON CLASS	D B	
P.G.	M.E.	CAD/CAM	2013	SRI KRISHNA COLLEGE OF ENGINEE RING AND TECHNOL OGY (AUTONO MOUS)	ANNA UNIV TY		7.07	FIRST CLASS		
Score : File : II. Title of	onal Qualific Ph.D. Thesi y in which P	S		IAL QUALIFI	CATIO	N				
Score : File : II. Title of III. Facult IV. Acader	Ph.D. Thesi	s h.D. was aw Ice :	rarded		CATIO	N				
Score : File : II. Title of III. Facult IV. Acader (Start fro	Ph.D. Thesi y in which P nic Experien m the Curre	s h.D. was aw ice : nt working	arded Experienc	e)*		Relie / Cu	eving Date rrent Date	E	xperience	2
Score : File : II. Title of III. Facult IV. Acader (Start fro	Ph.D. Thesi y in which P nic Experien	s h.D. was aw ice : nt working	rarded			Relia / Cur for W		E Years	xperience	e Days
Score : File : II. Title of III. Facult IV. Acader (Start fro	Ph.D. Thesi y in which P nic Experien m the Curre f the College EGE OF	s h.D. was aw ice : nt working	rarded Experienc gnation	e)*	Date	Relia / Cun for W Ins	rrent Date Presently /orking		-	
Score : File : II. Title of III. Facult IV. Acader (Start fro Name of CSI COLL	Ph.D. Thesi y in which P nic Experien m the Curre f the College EGE OF	s h.D. was aw ice : nt working Desig	rarded Experienc gnation	e)*	Date	Relia / Cun for W Ins	rrent Date Presently /orking titutions	Years 10	Months	Days
Score : File : II. Title of III. Facult IV. Acader (Start fro Name of CSI COLL ENGINEE	Ph.D. Thesi y in which P nic Experien m the Curre f the College EGE OF	s h.D. was aw ice : nt working Desig ASSISTA PROFESS	rarded Experienc gnation	e)*	Date	Relia / Cun for W Ins	rrent Date Presently /orking titutions -2024	Years 10	Months	Days

	pointment Expe which service is a		t of Exmination during t	the last year
AUR (No. of days) 1	Squad Member (No. of days)	External Examiner (Practical) (No. of days) 2	Central Evaluation (No. of scripts Evaluated) 200	Re-Evaluation (No. of scripts Evaluated) 50
It is certified	that all the inform	ation provided are true to	the best of my knowledge.	
Signature of	the Faculty :	Contraction		

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	300198
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.EMECHANICAL ENGINEERING
Name of the faculty member	MR. PRADAB R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	10/211, KAMMANDU VILLAGE, KETTI POST
Line 2	OOTY - 643215
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 7904585898
Email	PRADAB@CSICE.EDU.IN
Gender	MALE
Community	BC
PAN Number	BHOPP8412R
Passport Number	
Faculty code given by C.O.E.	7106033
Faculty code given by A.I.C.T.E.	1-496073003
Date of Birth	13-06-1981
Age	43
I. Particulars of Educational Qualification : (on	ly completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	MECHANI CAL ENGINEE RING	2002	CSI COLLEGE OF ENGINEE RING	BHARATH IYAR UNIVERSI TY	75.3	FIRST CLASS	A second
P.G.	M.E.	MANUFA CTURING ENGINEE RING	2014	OTHERS - KARPAGA M ACADEMY OF HIGHER EDUCATI ON	OTHERS - KARPAGA M ACADEMY OF HIGHER EDUCATI ON	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	Designation	Joining Date	Relieving Date / Current Date for Presently	E	Experience		
College	Designation	Joining Date	Working Institutions	Years	Months	Days	
CSI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	25-08-2008	20-11-2024	16	2	27	
CSI COLLEGE OF ENGINEERING	1 125-08-2003 12		24-08-2008	4	11	31	
			Total	21	2	29	
V. Industrial Experi	ence :						

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

AUR (No. of days)Squad Member (No. of days)External Examiner (Practical) (No. of days)			Central Evaluation (No. of scripts Evaluated) 300	Re-Evaluation (No. of scripts Evaluated)				
It is certified	that all the inform	ation provided are true to	the best of my knowledge.					
Signature of the Faculty :								

Name of the College	7106 - CSI COLLEGE OF ENGINEERING		
Faculty ID	300399		
Name of the Department	MECHANICAL ENGINEERING		
Name of the Degree & Course	B.EMECHANICAL ENGINEERING		
Name of the faculty member	DR. DHANRAJ G		
Regular Or Adjunct	Regular		
Image			
Present Designation	ASSISTANT PROFESSOR		
Residential Address Line 1	88A 20A JOTHI ILLAM ASIR COMPOUND		
Line 2	COONOOR 643101		
District	NILGIRIS		
Telephone number	-		
Mobile number	+91 - 9443075767		
Email	DHANRAJGURU77@GMAIL.COM		
Gender	MALE		
Community	BC		
PAN Number	AQYPD8099G		
Passport Number			
Faculty code given by C.O.E.	7106036		
Faculty code given by A.I.C.T.E.	1-496527679		
Date of Birth	19-02-1977		
Age	47		
I. Particulars of Educational Qualification : (only con	npleted)		

Category	Name of the Degree	Specia oi		Year of Passing	Name of Colleg		Name of th University	bohtainod		Class btained	l Cert	ificate
U.G.	B.E.	MECHA L ENGIN NG		1998 COLLEGE		E OF	BHARATHIY AR UNIVERSITY	64.5	FIR	ST CLA	SSS	
P.G.	M.TECH.	OTHER THERM ENGIN NG	IAL	2008	NATION INSTITU OF TECHNC Y,TIRUC APPALLI	TE LOG HIR	NATIONAL INSTITUTE OF TECHNOLOO Y,TIRUCHIR APPALLI		DIS N	TINCTI	TROPA	Hit of Extensions
PH.D.	PH.D.	MECHA L ENGIN NG		2018	SRI KRISHNA COLLEG ENGINE NG AND TECHNC Y (AUTON US)	E OF ERI LOG	ANNA UNIVERSITY	74				
III. Faculty IV. Academ (Start fror	Ph.D. Thesis 7 in which Ph.I nic Experience n the Current	: working	ı Exper	ience) *				Relieving D / Current D	ate	E	xperienc	e
Nam	e of the Colleg	le		Designati	on	Joining Date		for Presently Working Institutions		Years	Months	Days
CSI COLLE ENGINEEF			ASSIS	TANT PRO	FESSOR	05-0	6-2008	20-11-2024		16	5	16
V. Industri	al Experience	<u> </u>						T	otal	16	5	18
Name of t	the									E	xperienc	e
Organisat	I Hoeimati	ion	Nat	ure of Wo	ork	Joi	ning Date	Relieving D	ate	Years	Months	Days
	Appointment E t which service Squad Me	e is exte	nded fo	or the con ternal Exa (Practic	aminer	xmin	ation during Central Eva (No. of s	aluation			valuation	
AUR (No. of da				(No. of da			(No. of S Evalua 100	ted)	(No	. of scri	ipts Eval 100	iated)
lt is certifie	is certified that all the information provided are true to the best of my knowledge.							9.				



Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	300513
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.EMECHANICAL ENGINEERING
Name of the faculty member	DR. RAJESH KANA S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	4/1, MILIDHANE POST, KOTAGIRI
Line 2	643217
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 8136895455
Email	RAJESHMJ.BE@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AZWPS1879C
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-1470984652
Date of Birth	21-11-1972
Age	52
I. Particulars of Educational Qualification : (on	ly completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	MECHANI CAL ENGINEE RING	1994	OTHERS - KARUNYA INSTITUT E OF TECHNOL OGY	BHARATH IYAR UNIVERSI TY	67	FIRST CLASS	
P.G.	M.E.	THERMAL ENGINEE RING	2008	SONA COLLEGE OF TECHNOL OGY (AUTONO MOUS)	ANNA UNIVERSI TY	87	DISTINCT ION	
PH.D.	PH.D.	MECHANI CAL ENGINEE RING	2021	OTHERS - NIT CALICUT	OTHERS - NIT CALICUT	Y		

* Upload Scanned copy of Original Degree Certificate.

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

File:

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

IV. Academic Experience :

(Start from the Current working Experience) *

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently	Experience			
Name of the Conege	Designation	Johning Date	Working Institutions	Years	Months	Days	
CSI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	01-10-2021	20-11-2024	3	1	20	
CSI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	01-07-2000	25-05-2011	10	10	25	
KPR INSTITUTE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ASSISTANT PROFESSOR	01-06-2012	24-06-2013	1	0	24	
			Total	15	1	9	
V. Industrial Experience :	V. Industrial Experience :						

Name of the	Decignation	Nature of	Joining Data	Relieving	Experience		è
Organisation	Designation	Work	Joining Date	Date	Years	Months	Days
NEEDLE INDUSTRIES KETTI	PURCHASE OFFICER	MATERIAL MANAGEMEN T	12-10-1994	12-09-1997	2	11	1
PONNI SUGARS ERODE	MATERIAL INCHARGE	MATERIAL MANAGEMEN T	01-10-1997	15-06-2000	2	8	15
	•	-		Total	5	7	18

VI. C.O.E. Appointment Experience :

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

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

Signature of the Faculty :

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	300540
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.EMECHANICAL ENGINEERING
Name of the faculty member	DR. MANOJ PRABHAKAR B S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1/127 BEARHATTY VILLAGE
Line 2	COONOOR 643231
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9751128730
Email	MANOJPRABHAKARBS@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BBGPM1900D
Passport Number	
Faculty code given by C.O.E.	7106078
Faculty code given by A.I.C.T.E.	1-4681944684
Date of Birth	03-06-1987
Age	37
I. Particulars of Educational Qualification : (only o	completed)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name the Univers		% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtaine	ed Certi	ficate
U.G.	B.E.	MECHANI CAL ENGINEER ING	2009	CSI COLLEGE OF ENGINEER ING	ANNA UNIVEF TY	RSI	70	FIRST CLASS		
P.G.	M.E.	ENGINEER ING DESIGN	2013	ADHIYAMA AN COLLEGE OF ENGINEER ING (AUTONO MOUS)	ANNA	RSI	92	DISTINC ON	TI	
PH.D.	PH.D.	MECHANI CAL ENGINEER ING	2022	SNS COLLEGE OF TECHNOL OGY (AUTONO MOUS)	ANNA UNIVEF TY	RSI	Y			
* Upload Sc	canned copy of	f Original Deg	ree Certifi	cate.						
I.a. Additio Score : File :	onal Qualifica	ation :- NO A	DDITIONA	L QUALIFIC	ATION					
II. Title of	Ph.D. Thesis	3								
III. Faculty	y in which Ph	n.D. was awa	rded							
	nic Experience m <mark>the Curre</mark> n		xperience) *						
Norma			•	Tainin	Dete	/ C ı	ieving Date urrent Date	e E	xperience	e
Name	of the College	e Des	signation	Joinir	ng Date	1	r Presently Working stitutions	Years	Months	Days
CSI COLLI ENGINEE		ASSISTA PROFES		03-06-2	013	20-1	1-2024	11	5	18
				ł			Tota	l 11	5	20
V. Industri	ial Experienc	e :								
Name of		ation Natu	re of Wor	k Ioinir	ng Date	Rol	ieving Dat	E	xperience	e
Organisat	tion				ig Dute	ACI		Years	Months	Days

Capacity at v		tended for the conduct of External Examiner	of Exmination during the Central Evaluation	last year Re-Evaluation
(No. of days) 5	Squad Member (No. of days)	(Practical) (No. of days) 1	(No. of scripts Evaluated) 200	(No. of scripts Evaluated)
It is certified	that all the informat	tion provided are true to th	e best of my knowledge.	
	X	for		
Signature of	the Faculty :			

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	300639
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.EELECTRONICS AND COMMUNICATION ENGINEERING
Name of the faculty member	MRS. JINCY J
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	19A/37 REX COTTAGE, SAMAYAPURAM
Line 2	COONOOR - 643101
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9487538020
Email	JINCY587CRTJWEL@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	AOEPJ8091E
Passport Number	
Faculty code given by C.O.E.	7106119
Faculty code given by A.I.C.T.E.	1-507706991
Date of Birth	05-01-1987
Age	37
I. Particulars of Educational Qualification : (only completed)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name the Unive	е	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		ificat e
U.G.	B.E.	ELECTRO NIC INSTRUM ENTATION AND CONTROL ENGINEE RING	2008	OTHERS - KARUNYA UNIVERSI TY	KARUI	NYA	79.5	FIRST CLASS		Victoria de la construcción de l
P.G.	M.TECH.	OTHERS - EMBEDDE D SYSTEM	2010	OTHERS - KARUNYA UNIVERSI TY	KARUI	NYA	89	DISTINO ON		WING AND
Upload So	canned copy o	f Original De	gree Certif	icate.						
Score : File : I. Title of	Ph.D. Thesis	5								
V. Acaden	y in which Pl nic Experien <mark>m the Curre</mark> i	ce :		•) *						
V. Acaden (<mark>Start fro</mark>	nic Experien	ce : nt working I			g Date	/ Cu for	eving Date presently Presently		xperience	e
V. Acaden (<mark>Start fro</mark>	nic Experien m the Curre	ce : nt working I	Experience		ng Date	/ Cu for	rrent Date		xperience Months	
V. Acaden Start from	nic Experien m the Curren f the College EGE OF	ce : nt working I	Experience Ignation			/ Cu for V In	rrent Date Presently Vorking	E	-	
V. Academ Start from Name o	nic Experien m the Curren f the College EGE OF	ce : nt working F Desi	Experience Ignation	Joinin		/ Cu for V In	rrent Date Presently Vorking stitutions	Years	Months	Days
V. Academ Start from Name o CSI COLLI ENGINEE	nic Experien m the Curren f the College EGE OF	ce : nt working I Desi ASSISTA PROFES	Experience Ignation	Joinin		/ Cu for V In	Presently Vorking stitutions	Years	- Months	Days 28
V. Academ Start from Name o CSI COLLI ENGINEE	nic Experien m the Curren f the College EGE OF RING ial Experience	ce : nt working I Desi ASSISTA PROFES	Experience Egnation	Joinin 24-05-2	010	/ Cu for In: 20-1	rrent Date Presently Vorking stitutions 1-2024 Total	Years 14 14 14	- Months	Days 28 0
V. Academ Start from Name o CSI COLLI ENGINEE	nic Experien m the Curren f the College EGE OF RING ial Experience the Design	ce : nt working I Desi ASSISTA PROFES	Experience Ignation	Joinin 24-05-2		/ Cu for In: 20-1	Presently Vorking stitutions	Years 14 14 14	- Months 5 5	Days 28 0
V. Academ Start from Name o CSI COLLI ENGINEE	nic Experien m the Curren f the College EGE OF RING ial Experience the Design	ce : ation Nature	Experience Egnation ANT SOR ure of Worl e :	Joinin 24-05-2 k Joinin	010 ng Date	/ Cu for In: 20-1	Presently Vorking stitutions 1-2024 Total	Years 14 14 14 Years	5 5 xperience Months	Days 28 0

	Bart
Signature of the Faculty :	
Name of the College	7106 - CSI COLLEGE OF ENGINEERING
---	--
Faculty ID	300655
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.EELECTRONICS AND COMMUNICATION ENGINEERING
Name of the faculty member	MRS. ANGELINE FELICIA M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1/1, KAMARAJ NAGAR 2ND CROSS, CHINNA THIRUPATHI
Line 2	SALEM - 636008
District	SALEM
Telephone number	-
Mobile number	+91 - 9940965402
Email	ANGELINEVIJOLINE@GMAIL.COM
Gender	FEMALE
Community	OC
PAN Number	AFDPA4010L
Passport Number	
Faculty code given by C.O.E.	7106177
Faculty code given by A.I.C.T.E.	1-12317368167
Date of Birth	28-10-1970
Age	54
I. Particulars of Educational Qualification :	(only completed)

Category	Name of the Degree	Specializat ion	izat Year of Passing Colle		he	e the		% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained		Certificate	
U.G.	B.E.	ELECTRON ICS AND COMMUNI CATION ENGINEER ING	1992	OTHERS PERIYAH MANIAM AI 092 COLLEG OF TECHNO OGY FOI WOMEN		M BHARATH DASAN UNIVERS Y		69.3	FIRST CLASS		And the second s	
P.G.	M.E.	COMMUNI CATION SYSTEMS	ENDR NEER LEGE ONO S)	ANNA UNIVER Y	SIT	7.8	FIRST CLASS					
III. Faculty IV. Acaden (Start from	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) * Relieving Date / Current Date Experience											
	of the Colleg		signation		Joinin	ig Date		r Presently Working nstitutions	Voar	s M	onths	Days
CSI COLLE ENGINEEE		ASSIST PROFES			17-03-2	021	20-	11-2024	3	8		4
V Ind	al Ermandaria							Tot	al 3	8		8
Name of t	7. Industrial Experience : Name of the Organisation Designation Nature of Work				Joinin	ng Date	Re	lieving Dat	e Year		erience onths	
		t Experience		condu	ict of F	yminatio	n di	uring the l	ast vear			
AUR (No. of days)	Squad M (No. of c	ember Ex	ternal Ex (Practic (No. of d	amine :al)	n	Central I (No. of	ation during the la ral Evaluation o. of scripts Evaluated)		st year Re-Evaluation (No. of scripts Evaluated)			



Name of the College	7106 - CSI COLLEGE OF ENGINEERING				
Faculty ID	300802				
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING				
Name of the Degree & Course	M.ECOMPUTER SCIENCE AND ENGINEERING				
Name of the faculty member	MRS. RUTH SAMUEL				
Regular Or Adjunct	Regular				
Image					
Present Designation	ASSISTANT PROFESSOR				
Residential Address Line 1	337/70, MISSIONARY HILLS, STONE HOUSE POST				
Line 2	OOTY - 643002				
District	NILGIRIS				
Telephone number	-				
Mobile number	+91 - 8056426842				
Email	RUTHSAM92@GMAIL.COM				
Gender	FEMALE				
Community	BC				
PAN Number	DTXPR1146D				
Passport Number					
Faculty code given by C.O.E.	7106198				
Faculty code given by A.I.C.T.E.	1-4686614154				
Date of Birth	11-07-1992				
Age	32				
I. Particulars of Educational Qualification : (only complete	ed)				

Category	Name of the Degree	Specializ ation	Year of Passing	Name o the College	tl tl	ne of ne versit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Clas obtain		tificat e
U.G.	B.E.	COMPUTE R SCIENCE AND ENGINEE RING	2014	NEHRU INSTITUT E OF ENGINEE RING AN TECHNO OGY (AUTONO MOUS)	E ANNA D UNIV L TY		87	DISTIN ION	CT	
P.G.	M.E.	COMPUTE R SCIENCE AND ENGINEE RING	2016	CSI COLLEGE OF ENGINEE RING	UNIV		87	DISTIN ION	CT	Anticersity (Construction)
III. Faculty IV. Acaden	Ph.D. Thesis 7 in which Ph nic Experienc n the Currer	n.D. was aw		e)*						
Name of	the College	Desig	nation	Joining	r Date	/ Cu	eving Date rrent Date Presently			e
Nume of	the concyc	Desig	inution	Jonni	J Dutt	W	orking titutions	Years	Months	Days
CSI COLLE ENGINEEI		ASSISTA PROFESS		03-01-20	20	21-11	-2024	4	10	19
							Total	4	10	24
/. Industri	al Experienc	e :								
Name of	ame of the p Nature of the p.					Dali	uning Data	E	xperience	e
Organisat	ion Designa		Work	Joinin	j Date	Nelle	eving Date	Years	Months	Days
	Appointment t which servi			e conduct	of Exm	inatio	n during tl	ne last y	ear	
AUR (No. of days)	Squad Membe (No. of d	l Ex er	(Practical) (No				uation ripts	Re-H (No.	Evaluation of script aluated)	

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	300884
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECHINFORMATION TECHNOLOGY
Name of the faculty member	MRS. ANITHA K
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	7/179 G3, NEAR GOVERNMENT SCHOOL, YELLANALLI
Line 2	COONOOR - 643243
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9943082983
Email	ANITHA.KCSICE@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BJPPK1151D
Passport Number	
Faculty code given by C.O.E.	7106009
Faculty code given by A.I.C.T.E.	1-494095531
Date of Birth	11-04-1987
Age	37
I. Particulars of Educational Qualification : (or	lly completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	the Univer		% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		ificat e
U.G.	B.E.	COMPUTE R SCIENCE AND ENGINEE RING	2008	CSI COLLEGE OF ENGINEE RING	ANNA UNIV TY		70	FIRST CLASS		
P.G.	M.E.	COMPUTE R SCIENCE AND ENGINEE RING	2015	CSI COLLEGE OF ENGINEE RING	ANNA UNIV TY		72	FIRST CLASS		Here experience of the second se
* Upload Sc	canned copy o	f Original I	egree Certi	ificate.						
I.a. Additic Score : File :	onal Qualific	ation :- NO) ADDITION	IAL QUALIFI	CATIO	N				
II. Title of	Ph.D. Thesis	5								
III. Faculty	y in which P	h.D. was av	warded							
	nic Experien m the Curre		Experienc	:e)*						
						Relieving Date / Current Date		Experience		e
Name of	f the College	e Des	ignation	Joining Date		for Presently Working Institutions		Years	Months	Days
AL-AMEEN ENGINEEI COLLEGE (AUTONOI	RING	ASSIST PROFE		21-09-2023	L	29-05	5-2023	1	8	9
CSI COLLI ENGINEEI		ASSIST PROFE		16-03-2020)	13-09	9-2021	1	5	29
CSI COLLI ENGINEEI		ASSIST PROFE		09-06-2008	3	28-06	5-2019	11	0	20
CSI COLLI ENGINEEI			ASSISTANT PROFESSOR 01-06-2023		3	21-11	-2024	1	5	21
							Total	15	8	23
V. Industri	ial Experienc	ce :								
Name of	I Hocian	ation	lature of	Ioining	Dato	Poli	wing Date	E	xperience	e
Organisat	tion	alivii	Work	Joining	Joining Date		Relieving Date		Months	Days

	pointment Expe which service is o		t of Exmination during t	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) 150	Re-Evaluation (No. of scripts Evaluated) 60			
It is certified	that all the inform	ation provided are true to	the best of my knowledge.				
Signature of	the Faculty :	t					

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	301365
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.EMECHANICAL ENGINEERING
Name of the faculty member	MR. BENJAMIN S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	105/A, DUNMERE CAMPUS, FERNHILL
Line 2	OOTY - 643004
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9442646970
Email	BENJAMINSAMUELDEV@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BYEPB0312B
Passport Number	
Faculty code given by C.O.E.	7106166
Faculty code given by A.I.C.T.E.	1-4681944852
Date of Birth	25-03-1993
Age	31
I. Particulars of Educational Qualification :	(only completed)

Category	egory the Degree ion Descing the		Nam th Coll	ie	the		% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	obtained		d ^{Certi}	Certificate			
U.G.	B.E	. A	AECHANIC L ENGINEER NG	2014	CSI COLLI OF ENGIN ING		ANNA UNIVER Y	SIT	65		IRST LASS	The second	A series of the	
P.G.	M.E	E. (CAD/CAM	2017	M.P.NACHI MUTHU M.JAGANA THAN ENGINEER ING COLLEGE		ANNA UNIVERSIT				IRST LASS			
Upload Sc	canne	ed copy of C	riginal Deg	ree Certifio	cate.									
I .a. Additio Score : File :	onal	Qualificat	i on :- NO Al	DDITIONA	L QUAI	LIFICA	TION							
II. Title of	Ph.I). Thesis												
III. Faculty	y in v	which Ph.I). was awar	ded										
IV. Acaden (Start from	nic E <mark>m th</mark>	xperience e Current	: working Ex	perience) *									
							Relieving I / Current I			ent Date Ex		xperienc	xperience	
Name	of th	e College	De	signation	n Joini		_		or Presently Working Institutions		Years	Months	Days	
CSI COLLI ENGINEEI			ASSIST. PROFES		2	24-10-2	2017	21-11-2024			7	0	29	
								1	То	tal	7	0	29	
V. Industri	ial E	xperience	:											
Name of	tha										E	xperienc	e	
Organisat		Designati	on Natı	are of Wo	rk	Joini	ng Date	Re	lieving Da	te	Years	Months		
			xperience		condu	ot of I	Tyminatia	n du	ring the l	aat			•	
	t 117h	nun servict	; 15 EXIEIIUE	ended for the conduct of External Examiner (Practical) (No. of days) 3			Central Evaluation (No. of scripts Evaluated)			asi	year			



Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	301412
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.EMECHANICAL ENGINEERING
Name of the faculty member	DR. SIVAKUMAR NANJAPPAN
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	82/67, APPLE BY ROAD
Line 2	COONOOR - 643102
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 7708161575
Email	NLSIVAMECH@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	EAZPS9019E
Passport Number	
Faculty code given by C.O.E.	7106047
Faculty code given by A.I.C.T.E.	1-506104585
Date of Birth	14-05-1987
Age	37
I. Particulars of Educational Qualification : (on	ly completed)

Category	Name of the Degree	Specializ ation	Year of Passing	f Name of the Grade g College y Award		% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		tificat e	
U.G.	B.E.	MECHANI CAL ENGINEE RING	2009	ERODE SENGUNT HAR ENGINEE RING COLLEGE (AUTONO MOUS)	ANNA UNIV TY		79	DISTIN ION	CT	
P.G.	M.E.	ENGINEE RING DESIGN	2011	ANNA UNIVESIT Y REGIONA L CAMPUS, COIMBAT ORE	ANNA UNIV TY			DISTIN ION	CT	
PH.D.	PH.D.	MECHANI CAL ENGINEE RING	2023	ANNA UNIVESIT Y REGIONA L CAMPUS, COIMBAT ORE	ANNA UNIV TY		Y			
I.a. Addition Score : File :	anned copy c onal Qualific Ph.D. Thesi	cation :- NO	<u> </u>	ificate. JAL QUALIFI	CATIO	N				
	in which P		arded							
	nic Experien n the Curre		Experienc	e)*						
Name of						/ Cu	eving Date rrent Date Presently	Experience		
	the College	Desig	nation	Joining 1	Jait	for Presently Working Institutions		Years	Months	Days
CSI COLLE ENGINEEI		ASSISTA PROFESS		01-06-2011		21-11	-2024	13	5	21
							Total	13	5	23

V. Industrial Experience :

Name of th	e Designation	Nature of	Loinin	g Date	Relieving Date	E	xperience	e		
Organisatio	n Designation	Work			Keneving Date	Years	Years Months D			
	pointment Expe which service is (e conduct	t of Exmi	ination during tl	ne last y	ear			
Capacity at which service is extended for the conduct of Exmination during the last yearAUR (No. of days)Squad Member (No. of days)External Examiner (Practical) (No. of days)Central Evaluation 										
It is certified	that all the inform	ation provided ar	re true to	the best o	f my knowledge.					
		fmt								
Signature of	the Faculty :									

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	301638
Name of the Department	ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the Degree & Course	B.EELECTRICAL AND ELECTRONICS ENGINEERING
Name of the faculty member	MRS. DEEPA K
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	13/277, STAFF QUARTERS, THE LAIDLAW MEMORIAL SCHOOL
Line 2	KETTI -643215
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9489646936
Email	DEEPDANI5577@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BZJPD8666E
Passport Number	
Faculty code given by C.O.E.	7106169
Faculty code given by A.I.C.T.E.	1-9611535982
Date of Birth	17-08-1980
Age	44
I. Particulars of Educational Qualification : (only	completed)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	ELECTRIC AL AND ELECTRO NICS ENGINEE RING	2002	CSI COLLEGE OF ENGINEE RING	BHARATHI DASAN UNIVERSI TY	78	DISTINCTI ON	wight rate of the second secon
P.G.	M.E.	POWER ELECTRO NICS AND DRIVES	2019	CSI COLLEGE OF ENGINEE RING	ANNA UNIVERSI TY	86	DISTINCTI ON	
* Upload Sc	anned copy c	of Original De	gree Certi	ficate.				
I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION Score : File :								
II. Title of	Ph.D. Thesi	S						
III. Faculty	in which P	h.D. was awa	arded					

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

Name of the College	Name of the College Designation		Relieving Date / Current Date for Presently	Experience			
Name of the College	Designation	Joining Date	Working Institutions	Years	Months	Days	
CSI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	03-01-2020	22-11-2024	4	10	20	
			Total	4	10	25	

V. Industrial Experience :

Name of the Designation	Nature of Monte		Relieving	Experience			
Organisation	nisation Designation Work	Joining Date	Date	Years	Months	Days	
NEEDLE INDUSTRIES PVT LTD	ENGINEER MAINTANENC E	ELECTRICAL MAINTANENC E	10-08-2004	27-07-2017	12	11	18
				Total	12	11	22

VI. C.O.E. Appointment Experience : Capacity at which service is extended for the conduct of Exmination during the last year								
AUR (No. of days) 5	Squad Member (No. of days)	External Examiner (Practical) (No. of days) 3	Central Evaluation (No. of scripts Evaluated) 100	Re-Evaluation (No. of scripts Evaluated)				
It is certified t	that all the informa	ation provided are true to t	he best of my knowledge.					
Kaf.								
Signature of	the Faculty :							

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	302887
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.ECIVIL ENGINEERING
Name of the faculty member	MRS. GEETHAKUMARI D
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3/221, MANJUTHALA VILLAGE, ARUVANKADU
Line 2	COONOOR -643202
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9655435781
Email	OOTYGEETA@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BGRPG9564P
Passport Number	
Faculty code given by C.O.E.	7106021
Faculty code given by A.I.C.T.E.	1-799002497
Date of Birth	28-05-1986
Age	38
I. Particulars of Educational Qualification : (on	ly completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name o the College	univ	ne of he versit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	l Clas obtain		ificat e
U.G.	B.E.	CIVIL ENGINEE RING	2009	M.P.NAC IMUTHU M.JAGAN THAN ENGINE RING COLLEG	ANN UNIV E TY	A /ERSI	78	FIRST CLASS		
P.G.	M.E.	STRUCTU RAL ENGINEE RING	2012	M.P.NAC IMUTHU M.JAGAN THAN ENGINE RING COLLEG	IA ANN UNIV E TY	A /ERSI	8.48	FIRST CLASS		
* Upload Sc	anned copy o	f Original D	egree Certi	ficate.						
I.a. Additic Score : File :	onal Qualific	ation :- NO	ADDITION	IAL QUAL	IFICATIC	N				
II. Title of	Ph.D. Thesis	5								
III. Faculty	in which P	h.D. was aw	arded							
	nic Experien n the Curre		Experienc	e)*						
						Relieving Date / Current Date		e Experience		e
	the College	Desig	JNATION	Joinin	g Date	M	for Presently Working Institutions		Months	Days
CSI COLLE ENGINEEE		ASSISTA PROFES		15-02-2	012	25-11	1-2024	12	9	11
							Tota	il 12	9	15
V. Industri	al Experienc	ce :								
Name of t	L Llocian	ation N	ion Nature of Joining Date			Reli	eving Dat		xperience	e
Organisat	ion		Work Joining Date					Years	Months	Days
	Appointmen t which serv			e conduc	t of Exm	inatio	n during	the last v	ear	
AUR (No. of days)	Squa Memb (No. of d	d Ex er	xtended for the conduct External Examiner (Practical) (No. of days) 2		t of Exmination Central Evalu (No. of scri Evaluated 100		uation ripts	Re-l (No.	Evaluation of script aluated) 50	

Gthb.P

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	302899
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.ECIVIL ENGINEERING
Name of the faculty member	MR. GOKULRAM H
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1/127, GOKULA ILLAM,AKONI VILLAGE, KALLATTY POST
Line 2	OOTY - 643005
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9047476393
Email	GOKULRAM77@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BCWPG0065N
Passport Number	
Faculty code given by C.O.E.	7106085
Faculty code given by A.I.C.T.E.	1-2192030094
Date of Birth	04-05-1989
Age	35
I. Particulars of Educational Qualification : (on	ly completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	CIVIL ENGINEE RING	2010	SRI RAMAKRI SHNA INSTITUT E OF TECHNOL OGY (AUTONO MOUS)	ANNA UNIVERSI TY	70	FIRST CLASS	
P.G.	M.E.	STRUCTU RAL ENGINEE RING	2013	SRI KRISHNA COLLEGE OF TECHNOL OGY (AUTONO MOUS)	ANNA UNIVERSI TY	8.13	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		n Joining Date	Relieving Date / Current Date for Presently	Experience			
Name of the Coney	Name of the College Designation		Working Institutions	Years	Months	Days	
CSI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	03-06-2013	25-11-2024	11	5	23	
			Total	11	5	25	
V. Industrial Experier	ce :						
Name of the Designation Nature of Mark Joining Dat			Relieving Date	Experience			
Organisation	Work	on Work Joining Date		Years	Months	Days	

VI. C.O.E. Appointment Experience : Capacity at which service is extended for the conduct of Exmination during the last year							
AUR (No. of days) 1	Squad Member (No. of days)	External Examiner (Practical) (No. of days) 2	Central Evaluation (No. of scripts Evaluated) 103	Re-Evaluation (No. of scripts Evaluated)			
It is certified	that all the inform	ation provided are true to	the best of my knowledge.				
H. Locklorm							
Signature of	the Faculty :						

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	303282
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-CHEMISTRY
Name of the faculty member	MS. ARTHI R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	306/296, MISSIONARY HILLS
Line 2	OOTY- 643002
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 8940869488
Email	ARTHIPADMA470@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	AXRPA0132H
Passport Number	
Faculty code given by C.O.E.	7106131
Faculty code given by A.I.C.T.E.	1-509747491
Date of Birth	18-12-1986
Age	38
I. Particulars of Educational Qualification :	(only completed)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.SC.	OTHERS - CHEMIST RY	2007	OTHERS - GOVERN MENT ARTS COLLEGE OOTY	BHARATH IYAR UNIVERSI TY	89.6	DISTINCTI ON	And the second s
P.G.	M.SC.	OTHERS - CHEMIST RY	2009	OTHERS - GOVERN MENT ARTS COLLEGE OOTY	BHARATH IYAR UNIVERSI TY	79	FIRST CLASS	
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - CHEMIST RY	2016	OTHERS - SRI RAMAKRI SHNA MISSION VIDYALA	BHARATH IYAR UNIVERSI TY	Y	FIRST CLASS	

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

File :

II. Title of Ph.D. Thesis	
III. Faculty in which Ph.D. was awarded	

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

Name of the College	Decignation	Designation Joining Date		Relieving Date / Current Date for Presently	Experience		
Name of the College	Designation			Working Institutions		Months	Days
CSI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR 23-02-2011 2		25-11-2024	13	9	3	
				Total	13	9	7
V. Industrial Experience	:						
Name of the Designat	Nature of	Ioining	Data	Relieving Date	Experience		
Organisation	Work	Joining Date			Years	Months	Days

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

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	303321
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-MATHEMATICS
Name of the faculty member	MRS. GEETHA R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	36/119-B4, KERBEN VILLAGE, NIHUNG POST
Line 2	KOTAGIRI -643217
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9994948186
Email	GEETHAJOGARAJ@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	AOTPG4655G
Passport Number	
Faculty code given by C.O.E.	7106122
Faculty code given by A.I.C.T.E.	1-508766939
Date of Birth	29-05-1975
Age	49
I. Particulars of Educational Qualification : (o	only completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.SC.	OTHERS - MATHEM ATICS	1995	OTHERS - PROVIDE NCE COLLEGE FOR WOMEN COONOO R	BHARATH IYAR UNIVERSI TY	60.28	FIRST CLASS	An and a set of the se
P.G.	M.SC.	OTHERS - MATHEM ATICS	1997	OTHERS - BHARATH IYAR UNIVERSI TY	BHARATH IYAR UNIVERSI TY	60	FIRST CLASS	Image: State of the s
* Upload Sc	anned copy o	of Original De	egree Certi	ficate.		-		
I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION Score : File :								
II. Title of	Ph.D. Thesi	S						
III. Faculty	y in which P	h.D. was aw	arded					
IV. Acaden	nic Experier	nce :						

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

Name of the College	Designation	Joining Date	/ Current Date -		xperience	erience	
Name of the Coneye	Designation	Joining Date	Working Institutions	Years	Months	Days	
CSI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	11-10-2006	25-11-2024	18	1	15	
	Total				1	15	

V. Industrial Experience :

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

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

AUR (No. of days) (Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated) 255	Re-Evaluation (No. of scripts Evaluated) 50	
---------------------------	----------------------------------	---	--	--	--

R lipetha

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	303340
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-PHYSICS
Name of the faculty member	MR. SUNIL R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	168/4, SORAIGUNDU VILLAGE, LOVEDALE POST
Line 2	OOTY -643003
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9626515319
Email	SUNILSORAI@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	DVPPS9492P
Passport Number	
Faculty code given by C.O.E.	7106178
Faculty code given by A.I.C.T.E.	1-44715927214
Date of Birth	13-04-1976
Age	48
I. Particulars of Educational Qualification : (on	lly completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.SC.	OTHERS - PHYSICS	1997	OTHERS - GOVERNE MENT ARTS COLLEGE OOTY	BHARATH IYAR UNIVERSI TY	52	SECOND CLASS	
P.G.	M.SC.	OTHERS - PHYSICS	2013	OTHERS - MANONM ANIYAM SUNDRAN AR UNIVERIS TY	MANOMA NIAM SUNDARN AR UNIVERSI TY	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	E	xperience	,
Name of the Coneye	Designation	Johning Date	Working Institutions	Years	Months	Days
CSI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	08-12-2014	25-11-2024	9	11	18
			Total	9	11	23

V. Industrial Experience :

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

VI. C.O.E. Appointment Experience :

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

	AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days) 3	Central Evaluation (No. of scripts Evaluated) 100	Re-Evaluation (No. of scripts Evaluated) 25	
--	-------------------------	----------------------------------	--	--	---	--

١ NP.

Signature of the Faculty :

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	303388
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.EGENERAL ENGINEERING
Name of the faculty member	MR. SARAVANA KUMAR G
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	137 F/48, ELK HILL ROAD, BOMBAY CASTLE
Line 2	OOTY -643001
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9751026166
Email	SARAVANAJOHEE@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BOOPG7517R
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-2191992653
Date of Birth	01-01-1982
Age	42
I. Particulars of Educational Qualification : (only con	npleted)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name of the Universi y	Grades	Class obtained	Certificat e
U.G.	B.TECH.	OTHERS - MECHANI CAL ENGINEE RING	2008	OTHERS - SRM UNIVERSI TY	OTHERS SRM UNIVERS TY	74	FIRST CLASS	
P.G.	M.TECH.	REMOTE SENSING AND GIS	2010	OTHERS - BHARATH IYAR UNIVERSI TY	BHARATH IYAR UNIVERS TY	5 14	FIRST CLASS	
I.a. Additic Score : File :								
	Ph.D. Thesi	-	J - J					
III. Faculty in which Ph.D. was awarded								
	nic Experien m the Curre	ice : nt working l	Experienc	e)*				
Name of the College Designation Joining			/ (lieving Date Current Date or Presently		rience		

Name of the College	Decignation	Joining Date for Presently				
Name of the College	Designation	Joining Date	Working Institutions	Years	Months	Days
CSI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	17-03-2014	25-11-2024	10	8	9
			Total	10	8	13

V. Industrial Experience :

Name of the	Decignation	Nature of Laining Data Reliaving Data	Experience		,		
Organisation	Designation	Work	Joining Date	Relieving Date	Years	Months	Days
DEFENCE RESEARCH AND DEVELOPMENT ORGANISATION	SENIOR RESEARCH FELLOW	RESEARCH	23-05-2011	30-09-2013	2	4	9
	Total						

VI. C.O.E. Appointment Experience : Capacity at which service is extended for the conduct of Exmination during the last year									
AUR (No. of days)Squad Member 									
It is certified	that all the inform	ation provided are true to	the best of my knowledge.						
Signature of the Faculty :									
Name of the College	7106 - CSI COLLEGE OF ENGINEERING								
---	---								
Faculty ID	303400								
Name of the Department	CIVIL ENGINEERING								
Name of the Degree & Course	B.ECIVIL ENGINEERING								
Name of the faculty member	DR. KARTHICK B								
Regular Or Adjunct	Regular								
Image									
Present Designation	ASSISTANT PROFESSOR								
Residential Address Line 1	5/126 C, SHOLUR HOSAHATTY, SHOLUR VILLAGE AND POST								
Line 2	OOTY - 643005								
District	NILGIRIS								
Telephone number	-								
Mobile number	+91 - 9443101860								
Email	BKARTHIOOTY14@GMAIL.COM								
Gender	MALE								
Community	BC								
PAN Number	AKEPB9457C								
Passport Number									
Faculty code given by C.O.E.									
Faculty code given by A.I.C.T.E.	1-492512981								
Date of Birth	14-02-1978								
Age	46								
I. Particulars of Educational Qualification :	(only completed)								

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	CIVIL ENGINEE RING	2001	KUMARAG URU COLLEGE OF TECHNOL OGY (AUTONO MOUS)	BHARATH IYAR UNIVERSI TY	59	SECOND CLASS	
P.G.	M.E.	STRUCTU RAL ENGINEE RING	2009	SRI KRISHNA COLLEGE OF TECHNOL OGY (AUTONO MOUS)	ANNA UNIVERSI TY	8.41	FIRST CLASS	
PH.D.	PH.D.	STRUCTU RAL ENGINEE RING	2021	COIMBAT ORE INSTITUT E OF TECHNOL OGY (AUTONO MOUS)	ANNA UNIVERSI TY	Y		
* Upload Sc	canned copy o	of Original De	gree Certi	ficate.				
I.a. Additic Score : File :	onal Qualific	cation :- NO	ADDITION	IAL QUALIFI	CATION			
II. Title of	Ph.D. Thesi	S						
III. Faculty	y in which P	h.D. was awa	arded					
IV. Acaden (Start from	nic Experien m the Curre	ice : nt working l	Experienc	e)*				

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently			
Name of the College Designation		Johning Date	Working Institutions	Years	Months	Days
CSI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	11-12-2009	25-11-2024	14	11	15
		•	Total	14	11	20
V. Industrial Experience	:					

Name of the	Designation Nature		Joining Date		Daliarin - Data	Experience				
Organisation	Designation	Work		ig Date	g Date Relieving Date		Months	Days		
AKARA CONSULTANCY	PROJECT ENGINEER	PLANNING AND ESTIMATION	01-06-2001		15-08-2007	6	2	15		
	Total						2	15		
	Member No. of days)	(Practical (No. of day	ys)	Eva	of scripts aluated)		of script: aluated)	5		
Signature of th	5	is certified that all the information provided are true to the best of my knowledge.								

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	303438
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.EGENERAL ENGINEERING
Name of the faculty member	MR. NAVEEN KUMAR S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	7/261 A, DHANALAKSHMI NILAYAM, YELLANALLI POST
Line 2	OOTY - 643243
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9080910959
Email	NAVEENSWEETY123@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	APQPN4648L
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-801739768
Date of Birth	20-05-1985
Age	39
I. Particulars of Educational Qualification : (only co	mpleted)

Category	Name of the Degree	Specializa tion	Year of Passing	Name o the College	the	;	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtaine	I I OTTI	ficate
U.G.	B.E.	CIVIL ENGINEER ING	2008	KUMARA URU COLLEGH OF TECHNO OGY (AUTONO MOUS)	E ANNA L UNIVEL TY	RSI	70	FIRST CLASS		
P.G.	M.E.	OTHERS - WATER RESOURC ES AND ENVIRON MENTAL ENGINEER ING	2015	OTHERS KARPAGA M UNIVERS TY	A KARPA M	GA	7.21	FIRST CLASS		
III. Faculty IV. Acaden (Start from	nic Experien	n.D. was awa ce : nt working E			ing Date	/ Ca	ieving Date urrent Date r Presently	, Ľ	Experience	e
		ACCICT	A N T-TT				Working stitutions	Years	Months	Days
CSI COLLE ENGINEEE		ASSISTA PROFES		01-06	-2011	25-1	11-2024	13	5	25
							Tota	l 13	5	27
V. Industri	al Experienc	ce :						_		
Name of		ation Natu	ire of Woi	rk Join	ing Date	Rel	ieving Date	e E	Experience	e
Organisat								Years	Months	Days
VI. C.O.E. Appointment Experience : Capacity at which service is extended for the conduct of AUR Squad External Examiner (No. of Member (Practical) days) (No. of days) (No. of days)					of Exmination during t Central Evaluation (No. of scripts Evaluated)		uation ripts	Re-E (No.	Evaluation of scripts aluated)	

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



Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	303551
Name of the Department	ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the Degree & Course	B.EELECTRICAL AND ELECTRONICS ENGINEERING
Name of the faculty member	MR. SANKAR P
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	2/230 I 5, MANICKAL MATTAM, MANJOOR, KUNDHA BRIDGE POST
Line 2	MANJOOR - 643219
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9677364588
Email	PATELSANKAR@YAHOO.CO.IN
Gender	MALE
Community	BC
PAN Number	BRVPS5317R
Passport Number	
Faculty code given by C.O.E.	7106052
Faculty code given by A.I.C.T.E.	1-493030131
Date of Birth	11-05-1977
Age	47
I. Particulars of Educational Qualification : (only o	completed)

Category	Name of the Degree	Speciali ation	z Year of Passing	Name of the College	tl Univ	ne of ne versit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		tificat e
U.G.	B.E.	ELECTRI AL AND ELECTRO NICS ENGINEI RING	2000	OTHERS KARUNYA INSTITUT E OF TECHNO OGY	A BHAH Γ IYAR UNIV		60	SECON CLASS		And solution spatial Sector States Sector States
P.G.	M.E.	POWER ELECTRO NICS AN DRIVES	1 /1106	OTHERS KARUNYA INSTITUT E OF TECHNO OGY	A KARU F DEEN	JNYA	74	FIRST CLASS		HTTPL P TOOLST HE ROHD AL DENSITY IF STATES ALCONG IF STA
Upload Sc	anned copy o	of Original	Degree Certi	ficate.						
core : ïle :										
. Title of	Ph.D. Thesi	S								
	Ph.D. Thesi y in which P		awarded							
II. Faculty V. Acaden	y in which P nic Experier	h.D. was a	awarded og Experienc	e)*						
II. Faculty V. Acaden	y in which P nic Experier	h.D. was a		e)*			eving Date rrent Date	E	xperienc	e
II. Faculty V. Acaden Start from	y in which P nic Experier	h.D. was a nce : nt workin		e)* Joining	g Date	/ Cur for W	-	E Years	xperience Months	
II. Faculty V. Acaden Start froi	y in which P nic Experier n the Curre the College EGE OF	h.D. was a nce : nt workin	g Experienc signation FANT			/ Cur for W Ins	rrent Date Presently /orking		-	
II. Faculty V. Acaden Start from Name of CSI COLLI	y in which P nic Experier n the Curre the College EGE OF	h.D. was a nce : nt workin Des ASSIST	g Experienc signation FANT	Joining		/ Cur for W Ins	rrent Date Presently /orking titutions	Years 18	Months	Day
II. Faculty V. Acaden Start from Name of CSI COLLI ENGINEE	y in which P nic Experier n the Curre the College EGE OF	h.D. was a nce : nt workin Des ASSIST PROFE	g Experienc signation FANT	Joining		/ Cur for W Ins	rrent Date Presently /orking titutions -2024	Years 18	- Months 6	Days 6
II. Faculty V. Acaden Start from Name of CSI COLLI ENGINEE	y in which P nic Experier in the Curre the College EGE OF RING	h.D. was a nce : nt workin Des ASSIST PROFE	g Experienc signation FANT	Joining 20-05-20	006	/ Cui for W Ins 25-11	rrent Date Presently /orking titutions 2024 Total	Years 18 18	- Months 6	Days 6 9
II. Faculty V. Acaden Start from Name of CSI COLLI ENGINEE	y in which P nic Experien n the Curre the College EGE OF RING al Experien the Design	h.D. was a nce : nt workin Des ASSIST PROFE	g Experienc signation	Joining	006	/ Cui for W Ins 25-11	rrent Date Presently /orking titutions -2024	Years 18 18	Months 6 6	Days 6 9
II. Faculty V. Acaden Start from Name of CSI COLLI ENGINEE	y in which P nic Experien in the Curre the College EGE OF RING al Experien the ion Design	h.D. was a nce : nt workin Des ASSIST PROFE	ig Experiences signation	Joining 20-05-20	006 g Date	/ Cun for X Ins 25-11	rrent Date Presently /orking titutions 2024 Total eving Date	Years 18 18 18 E Years	Months 6 6 xperience Months	Days 6 9

	MA	
Signature of the Faculty :		

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	303722
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-CHEMISTRY
Name of the faculty member	DR. RAINA O
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	12/127, SHANTHOOR, KETTI
Line 2	OOTY -643215
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 7094058241
Email	RAINA2OLIVER@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BWNPR3913D
Passport Number	
Faculty code given by C.O.E.	7106188
Faculty code given by A.I.C.T.E.	1-44526335452
Date of Birth	12-07-1989
Age	35
I. Particulars of Educational Qualification : (on	ly completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Nam th Univ y	ne rersit	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Clas: obtain		ificat e	
U.G.	B.SC.	OTHERS - CHEMIST RY	2010	OTHERS - NIRMALA COLLEGE FOR WOMEN CBE	BHAF IYAR UNIV TY		62	FIRST CLASS			
P.G.	M.SC.	OTHERS - CHEMIST RY	2014	OTHERS - KONGUN ADU ARTS AND SCIENCE COLLEGE CBE	BHAF IYAR UNIV TY		74	FIRST CLASS			
PH.D.	PH.D.	OTHERS - HYDRZIN E CHEMIST RY	2019	OTHERS - KONGUN ADU ARTS AND SCIENCE COLLEGE CBE	BHAF IYAR UNIV TY		Y				
* Upload Sc	anned copy c	f Original De	egree Certi	ficate.							
I.a. Additic Score : File :	onal Qualific	ation :- NO	ADDITION	IAL QUALIFI	CATIO	N					
II. Title of	Ph.D. Thesi	5									
III. Faculty	in which P	h.D. was aw	arded								
	nic Experien n the Curre		Experienc	e)*							
						/ Cu	eving Date rrent Date	Е	xperience	nce	
Name of	f the Colleg	e Desig	gnation	Joining I	Date	N	Presently /orking titutions	Years	Months	Days	
SRI RAMA ENGINEEI (AUTONOI	RING COLLE	GE ASSIST		29-05-2019)	29-10)-2020	1	5	1	
CSI COLLE ENGINEEE		ASSIST. PROFES		01-06-2022	2	25-11	-2024	2	5	25	
						•	Total	3	10	1	
V. Industri	al Experien	ce :									

Name of th	Designation	Nature of	Joining Date		Relieving Date	Experience		
Organisatio	n	Work Joining Dute Reneving Du		Keneving Dute	Years Months		Days	
-	pointment Expe which service is		e conduc	t of Exm	ination during th	e last y	ear	
Capacity at which service is extended for the conduct of Exmination during the last yearAUR (No. of days)Squad Member 								
It is certified	that all the inform	ation provided ar	e true to	the best o	of my knowledge.			
		Ridy						
Signature of	the Faculty :							

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	303774
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-MATHEMATICS
Name of the faculty member	DR. PONMONI A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	660/3 TYPE1 QTRS, CORDITE FACTORY ESTATE, ARUVANKADU
Line 2	COONOOR -643202
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9750325828
Email	PONMONIRPJ@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BGBPA3077M
Passport Number	
Faculty code given by C.O.E.	71061129
Faculty code given by A.I.C.T.E.	1-1515734065
Date of Birth	05-07-1983
Age	41
I. Particulars of Educational Qualification : (only com	pleted)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.SC.	OTHERS - MATHEM ATICS	2003	OTHERS - KAMARAJ COLLEGE	MANOMA NIAM SUNDARN AR UNIVERSI TY	79	FIRST CLASS	
P.G.	M.SC.	OTHERS - MATHEM ATICS	2005	OTHERS - APC MAHALAK SHMI COLLEGE FOR WOMEN	MANOMA NIAM SUNDARN AR UNIVERSI TY	78.8	FIRST CLASS	
PH.D.	PH.D.	OTHERS - MATHEM ATICS	2018	OTHERS - VOC COLLEGE	MANOMA NIAM SUNDARN AR UNIVERSI TY	Y		
OTHERS - M.PHILL	OTHERS - MATHEM ATICS	OTHERS - MATHEM ATICS	2009	OTHERS - MANONM ANIYAM SUNDARN AR UNIVERSI TY	MANOMA NIAM SUNDARN AR UNIVERSI TY	76	FIRST CLASS	
* Upload Sc	canned copy of	of Original De	egree Certi	ficate.				
I.a. Additic Score : File :	onal Qualifi	c ation :- NO	ADDITION	IAL QUALIFI	CATION			
II. Title of	Ph.D. Thesi	S						

III. Faculty in which Ph.D. was awarded

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

Name of tl	ne College	Designation	Ioinin	g Date	Relieving Date / Current Date for Presently	E	Experience	
	le conege	Designation	John	g Date	Working Institutions	Years	Months	Days
CSI COLLEG ENGINEERII	-	ASSISTANT PROFESSOR	19-12-2	012	25-11-2024	11	11	7
OTHERS - BI CALDWELL (OTHERS - LECTURER	03-12-2	007	03-12-2012	5	0	1
					Total	16	11	13
V. Industrial	Experience	:						
Name of the	e Destarrat	Nature of	Talada	- Data	Relieving Date Experience	,		
Organisatio	n Designati	on Work	Joinin	g Date	Relieving Date	Years	Months	Days
VI. C.O.E. Ap Capacity at v		experience : is extended for the	e conduc	t of Exmi	ination during th	e last y	ear	
AUR (No. of days) 7	Squad Member (No. of day		l)	(No.	l Evaluation of scripts aluated) 200	(No.	Evaluation of scripts aluated) 50	-
It is certified t	hat all the inf	formation provided ar	re true to	the best c	of my knowledge.			
		(A porimonI)						

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	303853
Name of the Department	ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the Degree & Course	B.EELECTRICAL AND ELECTRONICS ENGINEERING
Name of the faculty member	MR. ISAAC A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3/220, LOURDHUPURAM, WELLINGTON, BARRACKS
Line 2	COONOOR -643231
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 8248327005
Email	ISAACAMIE85@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AELPI2759F
Passport Number	
Faculty code given by C.O.E.	7106179
Faculty code given by A.I.C.T.E.	1-44635765802
Date of Birth	17-03-1985
Age	39
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specia ation		Name of the College	tł Univ	ne of ne versit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Clas: obtain		tificat e
U.G.	OTHERS - AMIE	ELECTF NICS AI COMMU ICATIOI ENGINI RING	ND UN N 2015	OTHERS - THE INSTITUT ON OF ENGINEE RS INDIA	THE TI INST ON O ENGI	ITUTI)F INEE	71.3	FIRST CLASS		a d Support 15 (Bokk) and North To Soci 21 of the Industry 12 of the Industry 13 of the Industry 14
P.G.	M.E.	VLSI DESIGN	_N 2019	PPG INSTITUT E OF TECHNOI OGY	UNIV		76	FIRST CLASS		
_		_	al Degree Certi							
f .a. Additio Score : File :	onal Qualifi	cation :-	NO ADDITION	AL QUALI	FICATIO	N				
I. Title of	Ph.D. Thes	is								
	Ph.D. Thes		s awarded							
II. Faculty	y in which H nic Experie	Ph.D. was	s awarded ing Experienc	e)*				1		
III. Faculty V. Acaden Start from	y in which H nic Experie n the Curre	Ph.D. was nce : ent worki	ing Experienc		Date	/ Cui	eving Date rent Date Presently	E	xperience	e
III. Faculty V. Acaden Start from	y in which H nic Experie	Ph.D. was nce : ent worki		e)* Joining	J Date	/ Cur for W		E Years	xperience Months	
III. Faculty V. Acaden Start from	y in which H nic Experies n the Curre the College EGE OF	Ph.D. was nce : ent worki	ing Experienc			/ Cur for W Ins	rrent Date Presently Vorking		-	e Days 25
II. Faculty V. Acaden Start from Name of CSI COLLI	y in which H nic Experies n the Curre the College EGE OF	Ph.D. was nce : ent worki	ing Experienc esignation STANT	Joining		/ Cur for W Ins	rrent Date Presently Torking titutions	Years	Months	Days
III. Faculty V. Academ Start from Name of CSI COLLI ENGINEE	y in which H nic Experies n the Curre the College EGE OF	Ph.D. was nce : ent worki e Do ASSIS PROF	ing Experienc esignation STANT	Joining		/ Cur for W Ins	rent Date Presently Vorking titutions -2024	Years 3	2 Months	Days
II. Faculty V. Academ Start from Name of CSI COLLI ENGINEE	y in which H nic Experient in the Current the College EGE OF RING al Experient the Design	Ph.D. was nce : ent worki e Do ASSIS PROF	ing Experienc esignation STANT FESSOR Nature of	Joining 01-09-20	21	/ Cui for X Ins 25-11	rent Date Presently /orking titutions -2024 Total	Years 3 3	2 Months	Days 25 26
III. Faculty V. Academ Start from Name of CSI COLLI ENGINEE	y in which H nic Experient in the Current the College EGE OF RING al Experient the Design	Ph.D. was nce : ent worki e Do ASSIS PROF	ing Experienc esignation STANT FESSOR	Joining	21	/ Cui for X Ins 25-11	rent Date Presently Vorking titutions -2024	Years 3 3	Months 2 2 2	Days 25 26
II. Faculty V. Academ Start from Name of CSI COLLI ENGINEE V. Industri Name of Organisat	y in which H nic Experient in the Current the College EGE OF RING tal Experient the Design Appointment	Ph.D. was nce : ent worki e Do ASSIS PROF	ing Experienc esignation STANT FESSOR Nature of Work	Joining 01-09-20 Joining	21 J Date	/ Cun for X Ins 25-11	rent Date Presently /orking titutions -2024 Total eving Date	Years 3 3 E Years Years	Months 2 2 2 xperience Months	Days 25 26

A. Isaal Signature of the Faculty :

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	308154
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.ECOMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MRS. SUNANDA JENCY S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	12/176 C2, MISSION COMPUND KETTI
Line 2	OOTY -643215
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9487300418
Email	SUNANDAJENCY@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	MQOPS0516B
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-44149367642
Date of Birth	12-12-1995
Age	29
I. Particulars of Educational Qualification : (only compl	leted)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	tl Univ	ne of ne versit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Clas: obtain		tificat e
U.G.	B.E.	COMPUTE R SCIENCE AND ENGINEE RING	2017	CSI COLLEGE OF ENGINEE RING	UNIV		68	FIRST CLASS		
P.G.	M.E.	COMPUTE R SCIENCE AND ENGINEE RING	2019	CSI COLLEGE OF ENGINEE RING	UNIV		79	FIRST CLASS		
* Upload Sc	anned copy o	f Original I	Degree Certi	ficate.						
I.a. Additic Score : File :	onal Qualific	ation :- No	O ADDITION	AL QUALII	FICATIO	N				
I. Title of	Ph.D. Thesis	5								
III. Faculty	in which Pl	h.D. was a	warded							
	nic Experien n the Currei		Experienc	e)*						
Nome of	the College	Deci	anotion	Ioining	Data	/ Cu	eving Date rrent Date Presently	E	xperience	e
name or	the conege	Des	ignation	Joining	Date	N	Vorking titutions	Years	Months	Days
CSI COLLE ENGINEEE		ASSIST. PROFES		01-06-20	22	28-11	-2024	2	5	28
							Total	2	5	0
V. Industri	al Experienc	ce :								
Name of	the		Nature of					E	xperience	e
Organisat		ation	Work	Joining	Date	Relie	eving Date	Years	Months	Days
	Appointmen t which serv			e conduct	of Exm	inatio	n durina th	ne last v	ear	
AUR (No. of days)	Squad Memb (No. of d	d E er	xternal Exa (Practica (No. of da	miner al)	Centra (No.		uation ripts	Re-E (No.	Evaluation of script aluated)	
	(100 OF U		(-, -,				- V	uutou)	



Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	304239
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.ECIVIL ENGINEERING
Name of the faculty member	MR. NAWAZ SHERIEF M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	SHERIEF MANZIL,18, RAJAJI NAGAR
Line 2	COONOOR - 643102
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 7010736619
Email	NAWAZ.NS18@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BETPN7099J
Passport Number	
Faculty code given by C.O.E.	7106185
Faculty code given by A.I.C.T.E.	1-44120433605
Date of Birth	05-07-1997
Age	27
I. Particulars of Educational Qualification : (only co	mpleted)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	CIVIL ENGINEE RING	2018	AL- AMEEN ENGINEE RING COLLEGE (AUTONO MOUS)	ANNA UNIVERSI TY	6.47	SECOND CLASS	
P.G.	M.E.	STRUCTU RAL ENGINEE RING	2022	GOVERN MENT COLLEGE OF ENGINEE RING SALEM (AUTONO MOUS)	ANNA UNIVERSI TY	9.8	DISTINCT ION	

* Upload Scanned copy of Original Degree Certificate.

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

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently	Е	xperience	e
Name of the Conege	Designation		Working Institutions	Years	Months	Days
CSI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	29-06-2022	26-11-2024	2	4	28
			Total	2	4	0
V. Industrial Experience	:					

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

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
s certified	that all the inform	ation provided are true to	the best of my knowledge.	
		A		
	16	A MANYS		

Name of the College	7106 - CSI COLLEGE OF ENGINEERING				
Faculty ID	304367				
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING M.ECOMPUTER SCIENCE AND ENGINEERING				
Name of the Degree & Course					
Name of the faculty member	MRS. ARUNA C				
Regular Or Adjunct	Regular				
Image					
Present Designation	ASSISTANT PROFESSOR				
Residential Address Line 1	4/1, MILIDHANE POST, NEDUGULA				
Line 2	KOTAGIRI - 643217				
District	NILGIRIS				
Telephone number	-				
Mobile number	+91 - 9486639009				
Email	ARUNA.RAJESH02@GMAIL.COM				
Gender	FEMALE				
Community	BC				
PAN Number	BPQPA0140F				
Passport Number					
Faculty code given by C.O.E.	7106159				
Faculty code given by A.I.C.T.E.	1-3246812547				
Date of Birth	24-06-1980				
Age	44				
I. Particulars of Educational Qualification : (only comp	leted)				

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Nam th Unive y	e ersit	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		ificat e	
U.G.	B.TECH.	INFORMA TION TECHNOL OGY	2013	CSI COLLEGE OF ENGINEE RING	ANNA UNIVI TY		70	FIRST CLASS		A constraint of the second of	
P.G.	M.E.	COMPUTE R SCIENCE AND ENGINEE RING	2015	CSI COLLEGE OF ENGINEE RING	ANNA UNIVI TY		70	FIRST CLASS			
[*] Upload Sc	anned copy o	f Original De	egree Certif	ficate.							
I.a. Additic Score : File :	onal Qualific	ation :- NO	ADDITION	AL QUALIFI	CATION	N					
(I. Title of	Ph.D. Thesis	5									
III. Faculty	y in which P	ı.D. was aw	arded								
	nic Experien n the Curre		Experience	e)*							
					Relieving Date / Current Date		rrent Date	E	xperience	ience	
Name of	the College	Desig	nation	Joining	Date	W	Presently Vorking titutions	Years	Months	Days	
		ASSISTA	NT						-		
CSI COLLE ENGINEEE		PROFESS		02-11-201	5	26-11	-2024	9	0	25	
				02-11-201	5	26-11	-2024 Total		0	25 25	
ENGINEEI		PROFESS		02-11-201	5	26-11					
ENGINEEI V. Industri	RING al Experience	PROFESS	SOR	02-11-201	5	26-11		9	0	25	
ENGINEEI	al Experience	PROFESS		02-11-201				9		25	
ENGINEER V. Industri Name of t Organisat VI. C.O.E. 4	RING al Experience the ion Design Appointmen	PROFESS ce : ation Na t Experienc	ature of Work	Joining	Date	Relie	Total eving Date	9 E Years	0 xperience Months	25	
ENGINEER V. Industri Name of t Organisat VI. C.O.E. 4	RING al Experience the ion Design	PROFESS ation Na t Experienc ice is extend d Ex er	ature of Work	Joining	Date <u>f Exmi</u> Central (No.	Relia	Total eving Date n during th uation ripts	9 E Years e last ye Re-E (No.	0 xperience Months	25 Days	



Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	304423
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.ECOMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MRS. SARANYA R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	272, BROOK LANDS,
Line 2	COONOOR -643101
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 8668070405
Email	SARANYACSICE@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	EHOPS4736Q
Passport Number	
Faculty code given by C.O.E.	7106180
Faculty code given by A.I.C.T.E.	1-44151454618
Date of Birth	16-06-1993
Age	31
I. Particulars of Educational Qualification : (on	ly completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	th	ersit	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		tificat e
U.G.	B.E.	COMPUTE R SCIENCE AND ENGINEE RING	2014	CSI COLLEGE OF ENGINEE RING	ANNA UNIV TY		72	FIRST CLASS		
P.G.	M.E.	COMPUTE R SCIENCE AND ENGINEE RING	2016	CSI COLLEGE OF ENGINEE RING	ANNA UNIV TY		76	FIRST CLASS		
. a. Additio core : file :	onal Qualific	ation :- NO	ADDITION	AL QUALIF	ICATIO	N				
I. Title of II. Faculty V. Academ	Ph.D. Thesis y in which Pl nic Experien	h.D. was aw ce :		<u> </u>						
I. Title of II. Faculty V. Acaden <mark>Start fro</mark>	y in which P	h.D. was aw ce : nt working		e)*	Date	/ Cur for	eving Date rrent Date Presently /orking		xperience	
I. Title of II. Faculty V. Academ Start from Name of CSI COLL	y in which Pl nic Experien m the Currer f the College EGE OF	h.D. was aw ce : nt working Desig	Experienc gnation			/ Cur for W Ins	rrent Date Presently	E Years 2	xperienc Months 6	
I. Title of II. Faculty V. Academ Start from Name of CSI COLL	y in which Pl nic Experien m the Currer f the College EGE OF	h.D. was aw ce : <mark>nt working</mark> Desig	Experienc gnation	Joining		/ Cur for W Ins	rrent Date Presently Vorking titutions	Years 2	Months	Days
I. Title of II. Faculty V. Academ Start from Name of CSI COLLI ENGINEE	y in which Pl nic Experien m the Currer f the College EGE OF	h.D. was aw ce : nt working Desig ASSISTA PROFES	Experienc gnation	Joining		/ Cur for W Ins	rrent Date Presently Vorking titutions -2024	Years 2	Months	Days
I. Title of II. Faculty V. Academ Start from Name of CSI COLLI ENGINEE	y in which Pl nic Experien m the Curren E the College EGE OF RING ial Experience	h.D. was aw ce : nt working Desig ASSISTA PROFES	Experienc gnation	Joining 24-05-202	2	/ Cui for W Ins 26-11	rrent Date Presently /orking titutions -2024 Total	Years 2 2	Months	Days 3 6
I. Title of II. Faculty V. Academ Start from Name of CSI COLLI ENGINEE	y in which Pl nic Experien m the Curren f the College EGE OF RING ial Experience the Docign	h.D. was aw ce : nt working Desig ASSISTA PROFES	Experienc gnation	Joining	2	/ Cui for W Ins 26-11	rrent Date Presently Vorking titutions -2024	Years 2 2	Months 6 6	Days 3 6

K32= 0	
Signature of the Faculty :	

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	304489
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.ECOMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MS. KEERTHI T
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	196, YELLANALLI, OLD ARUVANKADU ROAD
Line 2	OOTY - 643243
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 8524080211
Email	IHTREEK18@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	CLBPT0905P
Passport Number	
Faculty code given by C.O.E.	7106199
Faculty code given by A.I.C.T.E.	1-44189816504
Date of Birth	02-01-1998
Age	26
I. Particulars of Educational Qualification : (on	ly completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	tl Univ	ne of ne versit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		ificat e
U.G.	B.TECH.	INFORMA TION TECHNOL OGY	2020	CSI COLLEGE OF ENGINEE RING		A ′ERSI	6.93	FIRST CLASS		
P.G.	M.E.	COMPUTE R SCIENCE AND ENGINEE RING	2022	CSI COLLEGE OF ENGINEE RING		A /ERSI	8.83	FIRST CLASS		
' Upload Sc	anned copy of	f Original De	egree Certi	ficate.						
I .a. Additio Score : File :	onal Qualifica	ation :- NO	ADDITION	AL QUALII	FICATIO	N				
I. Title of	Ph.D. Thesis	5								
II. Faculty	v in which Ph	n.D. was aw	arded							
	nic Experience n the Curren		Experienc	e)*						
N		Desir		T - • •	Data	/ Cu	eving Date rrent Date	E	xperience	9
Name of	the College	Desig	nation	Joining	Date	M	Presently /orking titutions	Years	Months	Days
CSI COLLE ENGINEEF		ASSISTA PROFESS		20-09-20	23	26-11	-2024	1	2	7
							Total	1	2	8
V. Industri	al Experienc	e :								
Name of t	the	Ná	ature of					E	xperience	e
Organisat		ation	Work	Joining	Date	Relie	eving Date	Years	Months	Days
	Appointment t which servi			e conduct	of Exm	inatio	n durina th	ne last v	ear	
AUR (No. of days)	Squad Membe (No. of d	l Ex er	ternal Exa (Practica (No. of da	miner al)	Centra (No.		uation ripts	Re-E (No.	Evaluation of script aluated)	



Name of the College	7106 - CSI COLLEGE OF ENGINEERING				
Faculty ID	308237				
Name of the Department	INFORMATION TECHNOLOGY				
Name of the Degree & Course	B.TECHINFORMATION TECHNOLOGY				
Name of the faculty member	MR. JEYASEELAN K				
Regular Or Adjunct	Regular				
Image					
Present Designation	ASSISTANT PROFESSOR				
Residential Address Line 1	5/177- ANNAI ILLAM VIJAYATHA COLONY				
Line 2	DINDIGUL -624001				
District	DINDIGUL				
Telephone number	-				
Mobile number	+91 - 9994375454				
Email	JCLANME@GMAIL.COM				
Gender	MALE				
Community	BC				
PAN Number	ATJPJ0563F				
Passport Number					
Faculty code given by C.O.E.					
Faculty code given by A.I.C.T.E.	1-1515454445				
Date of Birth	05-04-1987				
Age	37				
I. Particulars of Educational Qualification : (only complete	ed)				

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.TECH.	INFORMA TION TECHNOL OGY	2009	KURINJI COLLEGE OF ENGINEE RING AND TECHNOL OGY	ANNA UNIVERSI TY	65	FIRST CLASS	
P.G.	M.E.	COMPUTE R SCIENCE AND ENGINEE RING	2012	OTHERS - KARPAGA M UNIVERSI TY	OTHERS - KARPAGA M UNIVERSI TY	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	Experience		
Name of the coneye	Designation	Johning Date	Working Institutions	Years	Months	Days
CSI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	05-04-2023	28-11-2024	1	7	24
			Total	1	7	27

V. Industrial Experience :

Name of the	Decignation	Nature of	Joining Date	Relieving Date	xperience)
Organisation	Designation	Work	Joining Date		Months	Days

VI. C.O.E. Appointment Experience :

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

	AUR (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.


Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	304760
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.ECOMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MRS. DIVYA V
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	141, PRADIVI, VIJAYANAGARAM GARDENS, NEAR ROSE GARDEN
Line 2	OOTY -643001
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9488486163
Email	DIVYA.VICTOR52@YAHOO.COM
Gender	FEMALE
Community	BC
PAN Number	CUIPD4200R
Passport Number	
Faculty code given by C.O.E.	7106211
Faculty code given by A.I.C.T.E.	1-44183723926
Date of Birth	13-03-1989
Age	35
I. Particulars of Educational Qualification : (only	completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	tł Univ	ne of ne versit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Clas: obtain		ificat e
U.G.	B TECH	INFORMA TION TECHNOL OGY	2010	CSI COLLEGE OF ENGINEE RING	UNIV	A 'ERSI	73	FIRST CLASS		A construction of the second s
P.G.	M.E.	COMPUTE R SCIENCE AND ENGINEE RING	2014	CSI COLLEGE OF ENGINEE RING	UNIV	A ′ERSI	79.9	FIRST CLASS	A state of the sta	
[«] Upload Sc	anned copy o	f Original De	egree Certi	ficate.						
I.a. Additic Score : File :	onal Qualific	ation :- NO	ADDITION	AL QUALI	FICATIO	N				
I. Title of	Ph.D. Thesis	;								
III. Faculty	y in which Pł	n.D. was aw	arded							
	nic Experience n the Currer		Experienc	e)*						
						/ Cu	eving Date rrent Date	E	xperience	e
Name of	the College	Desig	nation	Joining	j Date	for Presently Working Institutions		Years	Months	Days
CSI COLLI ENGINEEI		ASSISTA PROFESS		05-08-20	24	26-11	-2024	0	3	22
							Total	0	3	23
V. Industri	al Experienc	e :								
Name of	the	N	ature of					E	xperience	
Organisat		ation	Work	Joining	r Date	Relie	eving Date	Years	Months	Days
	Appointment t which servi			a conduct	of Fym	inatio	n during +k	na laet v	oar	
Japacity d	Squad		ternal Exa	miner	Centra	l Eval	uation	Re-E	Evaluation	
AUR (No. of days)	Member (No. of d	er	(Practica (No. of da			of scı aluate			of script aluated)	5

191 a Signature of the Faculty :

Name of the College	7106 - CSI COLLEGE OF ENGINEERING				
Faculty ID	308188				
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING				
Name of the Degree & Course	B.ECOMPUTER SCIENCE AND ENGINEERING				
Name of the faculty member	MRS. FIRTHOUSE HANEEF				
Regular Or Adjunct	Regular				
Image					
Present Designation	ASSISTANT PROFESSOR				
Residential Address Line 1	100C KAPPINI GOWDER LANE, BURMA CELL				
Line 2	OOTY - 643001				
District	NILGIRIS				
Telephone number	-				
Mobile number	+91 - 9344641203				
Email	FIRTHOUSEHANEEF@GMAIL.COM				
Gender	FEMALE				
Community	BC				
PAN Number	AIPPF5949L				
Passport Number					
Faculty code given by C.O.E.					
Faculty code given by A.I.C.T.E.	1-44725790054				
Date of Birth	20-11-1999				
Age	25				
I. Particulars of Educational Qualification : (only compl	eted)				

Category	Name of the Degree	Specializa tion	a Year of Passing	Name of the College	Name the Unive	e	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		ificat e
U.G.	B.E.	COMPUTE R SCIENCE AND ENGINEE RING	2021	CSI COLLEGE OF ENGINEE RING	ANNA UNIVE TY	ERSI	70	FIRST CLASS	The second secon	A ANALY ANALY
P.G.	M.E.	COMPUTE R SCIENCE AND ENGINEE RING	2023	CSI COLLEGE OF ENGINEE RING	ANNA UNIVE TY	RSI	70	FIRST CLASS		
	Ph.D. Thesis	6								
V. Acaden	y in which Pl nic Experien <mark>m the Curre</mark> i	ce :) *		Reli	eving Date	, _E	vnoriona	
IV. Acaden (<mark>Start fro</mark>	nic Experien	ce : 1t working			g Date	/ Cu for V	rrent Date Presently Vorking	H	xperience Months	
IV. Acaden (<mark>Start fro</mark>	nic Experien m the Currer f the College EGE OF	ce : 1t working	Experience signation		_	/ Cu for V Ins	rrent Date Presently		-	
V. Academ Start from Name o	nic Experien m the Currer f the College EGE OF	ce : it working De: ASSIST	Experience signation	Joinin	_	/ Cu for V Ins	rrent Date Presently Vorking stitutions	Years	Months	Days
V. Academ Start from Name o CSI COLLI ENGINEE	nic Experien m the Currer f the College EGE OF	ce : t working De: ASSIST PROFE	Experience signation	Joinin	_	/ Cu for V Ins	rrent Date Presently Vorking stitutions 1-2024	Years	- Months	Days 28
V. Academ Start from Name o CSI COLLI ENGINEE	nic Experien m the Curren f the College EGE OF RING ial Experienc	ce : t working De: ASSIST PROFE	Experience signation ANT SSOR	Joinin 01-11-20	024	/ Cu for V Ins 28-1	rrent Date Presently Vorking stitutions 1-2024 Tota	Years 0 1 0	- Months	Days 28 28
V. Academ Start from Name o CSI COLLI ENGINEE	nic Experien m the Currer f the College EGE OF RING ial Experience the Dociment	ce : t working De: ASSIST PROFE	Experience signation	Joinin 01-11-20	_	/ Cu for V Ins 28-1	rrent Date Presently Vorking stitutions 1-2024	Years 0 1 0	Months 0 0	Days 28 28
V. Academ Start from Name o CSI COLLI ENGINEE	nic Experien m the Currer f the College EGE OF RING ial Experience the Dociment	ce : t working De: ASSIST PROFE ce : ation Nat	Experience signation ANT SSOR ure of Work	Joinin 01-11-20	024 g Date	/ Cu for V Ins 28-1	eving Date	Years Years 0 1 0 Years Years	Months 0 0 Cxperience Months	Days 28 28



Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	304889
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.ECOMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	DR. NISHA PRIYA P
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	10/326 A2, BALAJI NAGAR, ARUVANKADU
Line 2	COONOOR - 643202
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9943706755
Email	NISHA@CSICE.EDU.IN
Gender	FEMALE
Community	BC
PAN Number	AIQPN2045L
Passport Number	
Faculty code given by C.O.E.	7106010
Faculty code given by A.I.C.T.E.	1-493838370
Date of Birth	18-03-1986
Age	38
I. Particulars of Educational Qualification : (onl	y completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name o the College	r th Univ	ne of ne rersit	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		ificat e
U.G.	B.E.	COMPUTE R SCIENCE AND ENGINEE RING	2007	CSI COLLEGH OF ENGINEH RING	UNIV		69	FIRST CLASS		
P.G.	M.E.	COMPUTE R SCIENCE AND ENGINEE RING	2016	CSI COLLEGH OF ENGINEH RING	UNIV		78	FIRST CLASS		
[•] Upload Sc	canned copy o	f Original De	egree Certi	ficate.						
. a. Additio Score : File :	onal Qualific	ation :- NO	ADDITION	AL QUALI	FICATIO	N				
I. Title of	Ph.D. Thesis	6								
II. Faculty	y in which Pl	ı.D. was aw	rarded							
	nic Experien m the Currer		Experienc	e)*						
						/ Cu	eving Date rrent Date	E	xperience	9
Name of	the College	Desig	J nation	Joinin	g Date	for	Presently		· · · · · · · · · · · · · · · · · · ·	-
							orking/ titutions	Years	Months	Days
CSI COLLI ENGINEE		ASSISTA PROFESS		03-09-20)07	Ins		Years 17	Months	Days 24
CSI COLLI				03-09-20)07	Ins	titutions			
CSI COLLI ENGINEE		PROFESS		03-09-20)07	Ins	titutions -2024	17	2	24
CSI COLLI ENGINEE	RING al Experienc	PROFESS				Ins 26-11	titutions -2024 Total	17 17	2	24 25
CSI COLLI ENGINEEI V. Industri	al Experienc	PROFESS	SOR	03-09-20		Ins 26-11	titutions -2024	17 17	2	24 25
CSI COLLI ENGINEE V. Industri Name of Organisat	al Experienc	PROFESS ation Na t Experience	ature of Work	Joining	g Date	Ins 26-11 Relia	titutions -2024 Total eving Date	17 17 E Years	2 2 Experience Months	24 25



Name of the College	7106 - CSI COLLEGE OF ENGINEERING				
Faculty ID	308403				
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING				
Name of the Degree & Course	B.EELECTRONICS AND COMMUNICATION ENGINEERING				
Name of the faculty member	MRS. GLORY THANGAM JUDITH J				
Regular Or Adjunct	Regular				
Image					
Present Designation	ASSISTANT PROFESSOR				
Residential Address Line 1	3, THIRUMARAIYUR ROAD, NAZARETH, TIRUCHENDUR TK				
Line 2	NAZARETH, THOOTHUKKUDI - 628617				
District	THOOTHUKUDI				
Telephone number	-				
Mobile number	+91 - 9500195552				
Email	GLORY.JUDITH@GMAIL.COM				
Gender	FEMALE				
Community	BC				
PAN Number	AXDPG3729Q				
Passport Number					
Faculty code given by C.O.E.					
Faculty code given by A.I.C.T.E.	1-44725925764				
Date of Birth	15-09-1988				
Age	36				
I. Particulars of Educational Qualification : (only com	pleted)				

CSI COLLEGE OF ENGINEERINGASSISTANT PROFESSOR01-11-202428-11-20240028Total0028V. Industrial Experience :Name of the OrganisationDesignationNature of WorkJoining DateRelieving DateExperienceVI. C.O.E. Appointment Experience : Capacity at which service is extended for the conduct of Exmination during the last yearMonthsDaysVI. C.O.E. Appointment Experience : Capacity at which service is extended for the conduct of Exmination during the last yearRelieving DateRelieving DateRelieving DateAUR (No. of MemberSquad (Practical)External Examiner (No. of scriptsCentral Evaluation (No. of scriptsRe-Evaluation (No. of scripts	Category	Name of the Degree	Specializ ation	Year of Passing	Name o the College	tl Univ	ne of ne versit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		tificat e	
P.G. M.TECH. BIOTECH NOLOGY 2012 KARUNYA IT KARUNYA UNIVERSI TY KARUNYA UNIVERSI TY 7.88 FIRST CLASS Image: Class * Upload Scanned copy of Original Degree Certificate. <	U.G.	B.TECH.	BIOINFOR	2010	KARUNY. UNIVERS	A KARU SI UNIV	JNYA	6.66				
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 for Presently Working Institutions CSI COLLEGE OF ENGINEERING ASSISTANT PROFESSOR 01-11-2024 28-11-2024 0 0 28 V. Industrial Experience : Joining Date Relieving Date Experience Name of the Organisation Designation Nature of Work Joining Date Relieving Date Experience V. Industrial Experience : V. Industrial Experience : V. C.O.E. Appointment Experience :	P.G.	M.TECH.		2012	KARUNY. UNIVERS	A KARU SI UNIV	JNYA	7.88				
Waddemic Experience : Name of the College Designation Joining Date Relieving Date for Presently Working Institutions Experience CSI COLLEGE OF ENGINEERING ASSISTANT PROFESSOR 01-11-2024 28-11-2024 0 0 28 V. Industrial Experience : Name of the Organisation Designation 01-11-2024 28-11-2024 0 0 28 V. Industrial Experience : Name of the Organisation Designation Nature of Work Joining Date Relieving Date Experience V. I. C.O.E. Appointment Experience : Capacity at which service is extended for the conduct of Exmination during the last year AUR (No. of Member External Examiner (Practical) Central Evaluation (No. of scripts) Re-Evaluation (No. of scripts)	Score : File : II. Title of	core : ile :										
Name of the CollegeDesignationJoining Date/ Current Date for Presently Working InstitutionsExperienceCSI COLLEGE OF ENGINEERINGASSISTANT PROFESSOR01-11-202428-11-20240028V. Industrial Experience :Name of the OrganisationDesignationNature of WorkJoining DateRelieving DateExperienceV. Industrial Experience :V. Industrial Experience :Nature of WorkJoining DateRelieving DateExperienceVI. C.O.E. Appointment Experience :Capacity at which service is extended for the conduct of Exmination during the last yearAUR (No. ofSquad MemberAUR (No. ofSquad MemberExternal Examiner (Practical)Central Evaluation (No. of scriptsRe-Evaluation (No. of scripts	IV. Acaden	nic Experien	ce :		e)*							
CSI COLLEGE OF ENGINEERINGASSISTANT PROFESSOR01-11-202428-11-20240028V. Industrial Experience :Name of the Organisation0028Nature of Work0028Pointment Experience :Squad MontheNature of Work0028V. Industrial Experience :SignationNature of Work0028V. I. C.O.E. Appointment Experience :Capacity at which service is extended for the conduct of Exmination during the last yearAUR (No. of MemberSquad MemberExternal Examiner (Practical)Central Evaluation (No. of scriptsRe-Evaluation (No. of scripts							/ Cu	rrent Date	Experien		e	
ENGINEERING PROFESSOR 01-11-2024 28-11-2024 0 0 28 Industrial Experience : Total 0 0 28 Name of the Organisation Designation Nature of Work Joining Date Relieving Date Experience: Experience: VI. C.O.E. Appointment Experience : Conduct of Exmination during the last year Months Days AUR (No. of Member Squad Member External Examiner (Practical) Central Evaluation (No. of scripts Re-Evaluation (No. of scripts	Name of	the College	Desig	Ination	Joinin	g Date	N	/orking	Years	Months	Days	
V. Industrial Experience : Name of the Organisation Designation Nature of Work Joining Date Relieving Date Experience VI. C.O.E. Appointment Experience : Capacity at which service is extended for the conduct of Exmination during the last year Months Days AUR Squad External Examiner Central Evaluation Re-Evaluation (No. of Member (Practical) (No. of scripts (No. of scripts					01-11-20)24	28-11	-2024	0	0	28	
Name of the Organisation Designation Nature of Work Joining Date Relieving Date Experience VI. C.O.E. Appointment Experience : Capacity at which service is extended for the conduct of Exmination during the last year Months Days AUR (No. of Member Squad Member External Examiner (Practical) Central Evaluation (No. of scripts Re-Evaluation (No. of scripts								Total	0	0	28	
Nume of the OrganisationDesignationNume of WorkJoining DateRelieving DateYearsMonthsDaysVI. C.O.E. Appointment Experience : Capacity at which service is extended for the conduct of Exmination during the last yearAUR (No. ofSquadExternal Examiner (Practical)Central Evaluation (No. of scriptsRe-Evaluation (No. of scripts	V. Industri	al Experien	ce :									
OrganisationWorkJoining DateRelieving DateYearsMonthsDaysVI. C.O.E. Appointment Experience : Capacity at which service is extended for the conduct of Exmination during the last yearAUR (No. ofSquadExternal Examiner (Practical)Central Evaluation (No. of scriptsRe-Evaluation (No. of scripts	Name of 1	the	Na	ature of					E	xperienc	e	
Capacity at which service is extended for the conduct of Exmination during the last yearAURSquadExternal ExaminerCentral EvaluationRe-Evaluation(No. ofMember(Practical)(No. of scripts(No. of scripts)		I Docian	ation	Work	Joinin	g Date	Kelie	eving Date	Years	Months	Days	
AUR (No. ofSquad MemberExternal Examiner (Practical)Central Evaluation (No. of scriptsRe-Evaluation (No. of scripts					e conduct	of Fym	inatio	n during +1	ne last v	ear		
	AUR	Squa Memb	d Ex er	ternal Exa	nminer al)	Centra (No.	l Eval	uation ripts	Re-E (No.	Evaluation		



Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	309560
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.ECOMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MR. GIDEON PAUL S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	4, BELMOUNT, VANDISOLAI ROAD
Line 2	OOTY - 643001
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9677337943
Email	SGIDEONPAUL@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	FOQPP5065F
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-44725790437
Date of Birth	15-05-1998
Age	26
I. Particulars of Educational Qualification : (on	ly completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	COMPUTE R SCIENCE AND ENGINEE RING	2021	CSI COLLEGE OF ENGINEE RING	ANNA UNIVERSI TY	76	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

File:

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

IV. Academic Experience :

(Start from the Current working Experience) \ast

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently	Experience)
Name of the College	Designation	Jonning Date	Working Institutions	Years	Months	Days
CSI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	01-11-2024	29-11-2024	0	0	29
			Total	0	0	29

V. Industrial Experience :

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

VI. C.O.E. Appointment Experience :

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

days)(No. of days)Evaluated)Evaluated)
--

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

Dune -
Signature of the Faculty :

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	308745
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECHINFORMATION TECHNOLOGY
Name of the faculty member	MS. JANANI R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	109/B, MEL GANDHI NAGAR, HOBART ROAD
Line 2	OOTY - 643001
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 7010714729
Email	JANANIDC984@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	DZMPR8986N
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-44724023401
Date of Birth	28-07-1999
Age	25
I. Particulars of Educational Qualification : (only	y completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name o the College	or ti Univ	ne of he versit y	% of Marks Grades obtaine / Ph.D. Awarde (Y/N)	d Clas obtair		tificat e		
U.G.	B.TECH.	INFORMA TION TECHNOL OGY	2020	CSI COLLEG OF ENGINE RING	UNIV	A /ERSI	78	FIRST CLASS				
-	anned copy o mal Qualific	5	5		IFICATIC	DN						
	Ph.D. Thesis		arded									
IV. Academ	nic Experien n the Currer	ce :		e)*								
Name of	the College	Decia	Designation Joining I		a Doto	Date Relieving Date for Presently Working Institutions		e Experience		9		
	the College	Desig			g Date			Vears	Months	Days		
CSI COLLE ENGINEEF		ASSISTA PROFESS		08-11-2024		29-11-2024		0	0	22		
V. Industria	al Experienc	e :					Tot	al 0	0	22		
Name of t	he	N	ature of						Experience	e		
Organisat	I LIOCIAN	ation	Work	Joinin	g Date	Relieving Date		Years	Months	Days		
	Appointment t which servi			e conduc	t of Exm	inatio	n during	the last y	vear			
AUR (No. of days)	Squae Memb (No. of d	er	ternal Exa (Practica (No. of da	al)	(No	al Eval . of sci aluate		(No	Re-Evaluation (No. of scripts Evaluated)			
It is certified	d that all the	information		re true to	the best o	of my k	mowledge					
Signature (of the Facul	l¥ ty∶										

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	308882
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.ECOMPUTER SCIENCE AND ENGINEERING (CYBER SECURITY)
Name of the faculty member	MR. REMOS A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	7/103, WELLINGTON GYMKHANA CLUB
Line 2	COONOOR - 643231
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 8072519895
Email	REMO9694@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BJTPR2523N
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-44725934894
Date of Birth	17-06-1994
Age	30
I. Particulars of Educational Qualification : (on	ly completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name o the College	tl Univ	ne of he versit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Clas obtain		tificat e	
U.G.	B.TECH.	INFORMA TION TECHNOL OGY	2017	CSI COLLEG OF ENGINE RING	UNIV	A /ERSI	72	FIRST CLASS			
* Upload Sc	anned copy o	f Original De	egree Certi	ficate.							
I.a. Additio Score : File :	onal Qualific	ation :- NO	ADDITION	AL QUAL	IFICATIO	N					
II. Title of	Ph.D. Thesis	6									
III. Faculty	v in which Pl	n.D. was aw	arded								
	nic Experien n the Curren		Experienc	e)*							
						Relieving Date / Current Date			Experience		
Name of	the College	Desig	Designation		Joining Date		for Presently Working Institutions		Months	Days	
CSI COLLE ENGINEEF		ASSISTA PROFESS		01-11-20)24	29-11-2024		0	0	29	
							Tota	l 0	0	29	
V. Industri	al Experienc	:e :									
Name of t	the	N	ature of	Toinin	Data	Dali		E	xperience	rience	
Organisat	ion Design	ation	Work	Joinin	g Date	Relieving Date		Years	Months	Days	
	Appointment			e conduc	t of Fym	inatio	n during '	the last v	aar		
AUR (No. of days)	Squad Memb (No. of d	d Ex er		ctical) (No		Ination during th Il Evaluation of scripts aluated)		Re-I (No.	Re-Evaluation (No. of scripts Evaluated)		
It is certifie	d that all the	information	provided a	re true to	the best	of my k	nowledge				
Signature	of the Facul	ty:	Jer X								

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	308906
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECHARTIFICIAL INTELLIGENCE AND DATA SCIENCE
Name of the faculty member	MS. AISHWARYA K
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	139 H, APPLE BY TOWN AREA
Line 2	COONOOR - 643102
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9385606266
Email	AISHWARYAK964@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	CHBPA4696L
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-44122928231
Date of Birth	03-12-1999
Age	25
I. Particulars of Educational Qualification :	(only completed)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Nam th Univ	e ersit	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		ificat e
U.G.	B.E.	ELECTRO NICS AND COMMUN ICATION ENGINEE RING	2021	CSI COLLEGE OF ENGINEE RING	ANNA UNIV TY		80	FIRST CLASS		
P.G.		COMPUTE R SCIENCE AND ENGINEE RING	2023	CSI COLLEGE OF ENGINEE RING	ANNA UNIV TY		81	FIRST CLASS		NUMBER
' Upload Sc	canned copy of	Original De	egree Certif	icate.						
I .a. Additic Score : File :	onal Qualifica	ntion :- NO	ADDITION	AL QUALIF	ICATION	J				
I. Title of	Ph.D. Thesis									
III. Faculty	y in which Ph	.D. was awa	arded							
	nic Experience m the Curren		Experience	;) *						
Nome of	the College	Dacid	mation	Ioining	Data	/ Cu	eving Date	E	xperience	
Name of	f the College	Desig	ynation	Joining	Date	/ Cu for V		E Years	xperience Months	e Days
Name of CSI COLLI ENGINEEI	EGE OF	Desig ASSISTA PROFESS	NT	Joining 01-11-20		/ Cu for V Ins	rrent Date Presently Vorking		-	
CSI COLLI	EGE OF	ASSISTA	NT			/ Cu for V Ins	rrent Date Presently Vorking titutions	Years 0	Months	Days
CSI COLLI ENGINEEI	EGE OF	ASSISTA PROFESS	NT			/ Cu for V Ins	rrent Date Presently /orking titutions	Years 0	Months	Days 29
CSI COLLI ENGINEEI	EGE OF RING ial Experienc	ASSISTA PROFESS e :	NT	01-11-20	24	/ Cu for V Ins 29-12	rrent Date Presently /orking titutions I-2024 Total	Years 0 0	Months	Days 29 29
CSI COLLI ENGINEEI /. Industri	EGE OF RING ial Experienc the Designa	ASSISTA PROFESS e :	NT SOR		24	/ Cu for V Ins 29-12	rrent Date Presently /orking titutions	Years 0 0	Months 0 0	Days 29 29
CSI COLLI ENGINEE /. Industri Name of f Organisat /I. C.O.E. /	EGE OF RING ial Experienc the Designa	ASSISTA PROFESS e : tion Na Experience	NT SOR ature of Work e :	01-11-20	24 1 Date	/ Cu for W Ins 29-12	rrent Date Presently Vorking titutions 1-2024 Total eving Date	Years 0 0 E Years	Months 0 0 xperience Months	Days 29 29



Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	309063
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.ECOMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MR. SANTHOSH R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	10/74, KRISHNA VILAS,ARUVANKADU
Line 2	ARUVANKADU -643202
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 7708675833
Email	SANTHOSHRANI94@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	LMDPS1797N
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-44185206850
Date of Birth	17-04-1994
Age	30
I. Particulars of Educational Qualification : ((only completed)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Nam th Unive		% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		ificat e	
U.G.	B.E.	COMPUTE R SCIENCE AND ENGINEE RING	2018	SASURIE ACADEMY OF ENGINEE RING	ANNA UNIV TY		61	SECON CLASS	D		
P.G.	M.E.	COMPUTE R SCIENCE AND ENGINEE RING	2022	CSI COLLEGE OF ENGINEE RING	ANNA UNIV TY		8.7	FIRST CLASS			
	anned copy c					J					
Score : File :		ation :- NO	ADDITION	AL QUALIF		N					
II. Title of	Ph.D. Thesi	5									
III. Faculty	v in which P	h.D. was awa	arded								
	nic Experien n the Curre		Experience	e) *							
Nama of	the College	Decid	mation	Toining	Data	Relieving Date / Current Date Date for Presently					
Name of	the College		gnation	Joining	Date	V	Vorking stitutions	Years	Months	Days	
CSI COLLE ENGINEEE		ASSISTA PROFES		01-11-2024 2		29-11-2024		0	0	29	
							Total	0	0	29	
V. Industri	al Experien	ce :									
Name of t	1 106100	ation	ature of	Joining	Date	Roli	eving Date	E	xperienc	e	
Organisat	ion		Work	Johning	Dutt	Ken		Years	Months	Days	
	Appointmen			a conduct	of Fymi	natior	during th	a last vo	ar		
AUR (No. of days)	Squa Memb (No. of d	d Ex er	ternal Exa (Practica (No. of da	miner al)	Centra (No.	of Exmination during th Central Evaluation (No. of scripts Evaluated)			Re-Evaluation (No. of scripts Evaluated)		
				•			•				

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	309487
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.ECOMPUTER SCIENCE AND ENGINEERING (ARTIFICIAL INTELLIGENCE AND MACHINE LEARNING)
Name of the faculty member	MRS. YOGESHWARI C
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	8/211 Q, BLUE HILLS AVENUE, METTUPALAYAM
Line 2	641301
District	COIMBATORE
Telephone number	-
Mobile number	+91 - 7094636600
Email	KEERTHANAKEERTHU@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	CLEPC1564J
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-44122928231
Date of Birth	05-04-1997
Age	27
I. Particulars of Educational Qualification : (only completed)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name the Univer	•	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtaine	(orti	ficate
U.G.	B.E.	COMPUTE R SCIENCE AND ENGINEER ING	2018	CSI COLLEGE OF ENGINEER ING	ANNA UNIVEI TY	RSI	687	FIRST CLASS	And the second s	
P.G.	M.E.	COMPUTE R SCIENCE AND ENGINEER ING	2023	CSI COLLEGE OF ENGINEER ING	ANNA UNIVEI TY	RSI		FIRST CLASS		VERSIL V and an analysis of the second
.a. Additic Score : File : I. Title of	canned copy of onal Qualifica Ph.D. Thesis	ation :- NO A	DDITIONA		ATION					
V. Acaden	y in which Ph nic Experienc <mark>m the Curren</mark>	ce :) *						
N			•	Tatat	Relieving Date / Current Date					
Name of the College		Des	ignation	Joinin	0		r Presently Working stitutions	Years	Months	Days
		ASSISTA	ANT		24 29-1					
		PROFES		01-11-20	24	29-1	1-2024	0	0	29
				01-11-20	024	29-1	.1-2024 Tota		0	29 29
ENGINEEI		PROFES		01-11-20	024	29-1				
ENGINEEI /. Industri Name of t	RING ial Experienc the Designa	PROFES	SOR				Tota	L 0		29
ENGINEEI 7. Industri	RING ial Experienc the Designa	PROFES						L 0	0	29
ENGINEE . Industri Name of to Organisat . C.O.E	RING ial Experienc the Designa	PROFES	ure of Wor	k Joining	g Date	Rel	Total	I 0 E F Years	0 xperience	29



Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	309789
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.EGENERAL ENGINEERING
Name of the faculty member	MR. JEGADEESH S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3/159A KURUTHUKOLI
Line 2	OOTY
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9786660043
Email	VICHUU.JAGA@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BHWPJ7374L
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-44727126464
Date of Birth	05-03-1991
Age	33
I. Particulars of Educational Qualification : (only co	mpleted)

Category	Name of the Degree	Specializ ation	Year of Passing	Name o the College	t tl Univ	ne of ne versit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Clas: obtain		ificat e
P.G.	M.E.	MANUFA CTURING ENGINEE RING	2016	CSI COLLEGI OF ENGINEI RING	UNIV		70	FIRST CLASS		
Upload Sc	anned copy o	f Original De	egree Certi	ficate.						
.a. Additio Score : File :	onal Qualific	ation :- NO	ADDITION	IAL QUAL	IFICATIO	N				
I. Title of	Ph.D. Thesis	6								
II. Faculty	v in which Pl	n.D. was aw	arded							
	nic Experien n the Curren		Experienc	e)*						
Name of	the College	Desig	Ination	Ioinin	g Date	/ Cu	eving Date rrent Date Presently	Е	xperience	.
					9	W	/orking titutions	Years	Months	Days
CSI COLLE ENGINEEF		ASSISTA PROFESS		01-11-20)24	29-11	-2024	0	0	29
						1	Total	0	0	29
. Industri	al Experienc	ce :								
Name of t	the	Na	ature of	Toinin	a Data	Dalla	unin a Data	E	xperience	,
Organisat	ion Design	ation	Work	Joinin	g Date	Relle	eving Date	Years	Months	Days
	Appointmen t which serv Squa Memb (No. of d	i <u>ce is exten</u> d Ex er		miner al)	Centra (No.		uation ripts	Re-E (No.	ear Evaluation of scripts aluated)	
-	d that all the			•					inuitu)	
		lt	Si							

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	309841
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.EGENERAL ENGINEERING
Name of the faculty member	MR. VIGNESH GOPALAKRISHNAN G
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	4/289B JEGATHALA VILLAGE AND POST
Line 2	ARUVANKADU - 643202
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9566510133
Email	VIGNESHJG90@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AXNPV0723D
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-44727116654
Date of Birth	26-05-1990
Age	34
I. Particulars of Educational Qualification : (onl	y completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	MECHANI CAL ENGINEE RING	2011	CSI COLLEGE OF ENGINEE RING	ANNA UNIVERSI TY	75	FIRST CLASS	
P.G.	M.E.	THERMAL ENGINEE RING	2014	CHRIST THE KING ENGINEE RING COLLEGE	ANNA UNIVERSI TY	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	Loining Data	Relieving Date / Current Date	E	xperience	e
Name of the College	Designation	Joining Date	for Presently Working Institutions	Years	Months	Days
PPG INSTITUTE OF TECHNOLOGY	ASSISTANT PROFESSOR	30-06-2015	25-05-2023	7	10	26
KGISL INSTITUTE OF TECHNOLOGY	ASSISTANT PROFESSOR	15-12-2014	25-06-2015	0	6	11
CSI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	01-11-2024	29-11-2024	0	0	29
		•	Total	8	6	9
V. Industrial Experience	•:					
Name of the Designed	Nature of	Loining Data	Dolioving Doto	E	xperience	9
Organisation Designat	Work	Joining Date	Relieving Date	Years	Months	Davs

Years | Months | Days

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

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	309872
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.EGENERAL ENGINEERING
Name of the faculty member	MR. SANJEEV KARIVARATHAN R K
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	2/136B, SATHY MAIN ROAD, ALANGOMBU
Line 2	METTUPALAYAM - 641302
District	COIMBATORE
Telephone number	-
Mobile number	+91 - 8778332349
Email	RKSANJEEVMECH012@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	LAVPS3001F
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-447277478131
Date of Birth	12-07-1997
Age	27
I. Particulars of Educational Qualification : (only c	completed)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name the Univer)	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtaine	(orti	ficate
U.G.	B.E.	MECHANI CAL ENGINEER ING	2018	BANNARI AMMAN INSTITUTE OF TECHNOL OGY (AUTONO MOUS)	ANNA UNIVE TY	RSI	7.9	FIRST CLASS		
P.G.	M.E.	ENGINEER ING DESIGN	2020	BANNARI AMMAN INSTITUTE OF TECHNOL OGY (AUTONO MOUS)	ANNA UNIVE TY	RSI	8.5	FIRST CLASS		
Score : File : II. Title of	Ph.D. Thesis	ation :- NO A s h.D. was awa		AL QUALIFIC	CATION					
	nic Experien <mark>m the Curre</mark> i	ce : nt working E	xperience)*		1		1		
Namo	of the Colleg		ignation	Ioinin	g Date	/ C 1	ieving Date urrent Date r Presently		xperience	9
Name	n the coney		ignation	John	y Date	,	Working stitutions	Years	Months	Days
CHRIST TI ENGINEE	HE KING RING COLLE(GE ASSIST		28-02-20	022	17-0)5-2023	1	2	18
CSI COLLI ENGINEE		ASSIST PROFES		01-11-2	024	30-1	1-2024	0	0	30
							Tota	1 1	3	19
V. Industri	al Experienc	ce :								
Name of	l nocium	ation Natu	re of Wor	k Joinin	g Date	Rel	ieving Date		xperience	
Organisat							-	Years	Months	Days

at all the informat	tion provided are true to th	ne best of my knowledge.			
R	ngutt.				
	R Faculty :	Rhgutt,	Ringutt.		
Name of the College	7106 - CSI COLLEGE OF ENGINEERING				
---	-------------------------------------	--	--	--	--
Faculty ID	309889				
Name of the Department	MECHANICAL ENGINEERING				
Name of the Degree & Course	B.EMECHANICAL ENGINEERING				
Name of the faculty member	MR. ARUN M				
Regular Or Adjunct	Regular				
Image					
Present Designation	ASSISTANT PROFESSOR				
Residential Address Line 1	5/343, BILLICOMBAI VILLAGE AND POST				
Line 2	KATTABETTU - 643214				
District	NILGIRIS				
Telephone number	-				
Mobile number	+91 - 9943283699				
Email	VEEARR2001@GMAIL.COM				
Gender	MALE				
Community	BC				
PAN Number	AWAPA4304R				
Passport Number					
Faculty code given by C.O.E.					
Faculty code given by A.I.C.T.E.	1-2288947827				
Date of Birth	09-05-1982				
Age	42				
I. Particulars of Educational Qualification : (only	completed)				

Category	Name of the Degree	Specializ ation	Year of Passing	Namo tho Colle	e	th	ersit	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		tificat e
U.G.	B.E.	MECHANI CAL ENGINEE RING	2005	M.P.N. IMUTI M.JAG THAN ENGIN RING COLLI	HU ANA NEE	ANNA UNIV TY		75	DISTIN ON	CTI 	Maincrash Particular Particu
P.G.	M.E.	THERMAL ENGINEE RING	2011	ANNA UNIVE Y REGIC L CAMP TIRUC APPAL	ESIT DNA US, CHIR	ANNA UNIV TY		8.3	FIRST CLASS		
-	* Upload Scanned copy of Original Degree Certificate.										
I.a. Addition Score : File :	onal Qualific	cation :- NO	ADDITION	IAL QUA	ALIFI	CATIO	N				
II. Title of	Ph.D. Thesi	S									
		h.D. was aw	arded								
(Start from	nic Experien m the Curre	nt working	Experienc	e)*			•				
Namo	of the Colleg	o Dosi	gnation	Ioir	ning l	Data	/ Cu	Relieving Date / Current Date for Presently			
Name o	of the Coney	e Desi	gnation		iiiig i	Date	V	Vorking titutions	Years	Months	Days
DR MAHA COLLEGE ENGINEEI TECHNOL (AUTONOI	OF RING AND OGY	ASSIST PROFE		14-07	7-2014	1	03-07	7-2023	8	11	21
V S B ENG COLLEGE (AUTONOI	INEERING MOUS)	ASSIST PROFE		12-02	2-2007	7	03-07	7-2014	7	4	20
V S B ENG COLLEGE (AUTONO)	SINEERING MOUS)	ASSIST PROFE		08-08	8-2023	3	08-10)-2024	1	2	1
CSI COLLI ENGINEEI		ASSIST PROFE		01-11	L-2024	1	30-11	-2024	0	0	30
								Total	17	7	15

V. Industrial	Experience :							
Name of th Organisatio	Designation	Nature of Work	Joini	ng Date	Relieving Date			
	ppointment Expe which service is (rience : extended for the	conduc	ct of Exmi	nation during tl	ne last y	ear	
AUR (No. of days)	Squad Member (No. of days)	External Exar (Practical (No. of day	l)	Central Evaluation (No. of scripts Evaluated)		Re-Evaluation (No. of scripts Evaluated)		- 1
It is certified	that all the inform	ation provided are	e true to	the best o	f my knowledge.			
Signature of	the Faculty :	0 2 Em						

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	309884
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.EGENERAL ENGINEERING
Name of the faculty member	MR. RAJKUMAR B
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	7/42, BANAHATTY, BILLICOMBAI POST
Line 2	643214
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9786289290
Email	NIKE.YASHU@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	ANIPR3767J
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-44727598814
Date of Birth	20-05-1970
Age	54
I. Particulars of Educational Qualification : (only co	ompleted)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	MECHANI CAL ENGINEE RING	1992	KONGU ENGINEE RING COLLEGE (AUTONO MOUS)	BHARATH IYAR UNIVERSI TY	59.8	SECOND CLASS	
P.G.	M.E.	PRODUCT DESIGN AND DEVELOP MENT	2007	SONA COLLEGE OF TECHNOL OGY (AUTONO MOUS)	ANNA UNIVERSI TY	74.8	FIRST CLASS	

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

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

IV. Academic Experience :

(Start from the Current working Experience) *

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently	Experience		
Name of the Conege		Johning Date	Working Institutions	Years	Months	Days
NEHRU INSTITUTE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ASSOCIATE PROFESSOR	16-02-2011	25-05-2022	11	3	10
CSI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	04-06-2007	03-01-2011	3	6	30
CSI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	01-11-2024	30-11-2024	0	0	30
	•	•	Total	14	11	14

V. Industrial Experience :

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

	pointment Expe which service is (t of Exmination during	the last year			
AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	(Practical) (No. of scripts				
It is certified	that all the inform	ation provided are true to	the best of my knowledge				
Signature of	the Faculty :	Unin					

Name of the College	7106 - CSI COLLEGE OF ENGINEERING			
Faculty ID	309997			
Name of the Department	INFORMATION TECHNOLOGY			
Name of the Degree & Course	B.TECHARTIFICIAL INTELLIGENCE AND DATA SCIENCE			
Name of the faculty member	MR. GOPISARAN M A			
Regular Or Adjunct	Regular			
Image				
Present Designation	ASSISTANT PROFESSOR			
Residential Address Line 1	M2/12, PONVIZHA NAGAR, TRICY ROAD			
Line 2	NAMMAKKAL - 637002			
District	NILGIRIS			
Telephone number	-			
Mobile number	+91 - 8220262896			
Email	MAGOPISARAN@GMAIL.COM			
Gender	MALE			
Community	BC			
PAN Number	BDJPG2891J			
Passport Number				
Faculty code given by C.O.E.				
Faculty code given by A.I.C.T.E.	1-44205493288			
Date of Birth	03-07-1989			
Age	35			
I. Particulars of Educational Qualification : (only completed)				

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	COMPUTE R SCIENCE AND ENGINEE RING	2010	SRI RAMAKRI SHNA INSTITUT E OF TECHNOL OGY (AUTONO MOUS)	ANNA UNIVERSI TY	68	FIRST CLASS	
P.G.	M.E.	COMPUTE R SCIENCE AND ENGINEE RING	2012	GOVERN MENT COLLEGE OF ENGINEE RING TIRUNEL VELI	ANNA UNIVERSI TY	81	FIRST CLASS	A state of the sta

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

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

IV. Academic Experience :

(Start from the Current working Experience) \ast

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently	E	Experience		
	Designation	Johning Date	Working Institutions	Years	Months	Days	
CSI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	21-01-2013	14-06-2016	3	4	25	
CSI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	06-05-2024	03-12-2024	0	6	29	
	•	•	Total	3	11	29	

V. Industrial Experience :

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

	ppointment Expe which service is (rience : extended for the conduc	t of Exmination during	the last year
AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
It is certified	that all the inform	ation provided are true to	the best of my knowledge	3.
		4.1.0/		
		1 mm		
Signature of	f the Faculty :			

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	301667
Name of the Department	ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the Degree & Course	M.EPOWER ELECTRONICS AND DRIVES
Name of the faculty member	DR. SATHIABAMA N
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	9/66, KUMARAN KUDIL, MELUR POST
Line 2	OOTY -643221
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 8248131410
Email	SATYAGANS@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BJFPS7542L
Passport Number	
Faculty code given by C.O.E.	7106053
Faculty code given by A.I.C.T.E.	1-492831505
Date of Birth	29-05-1973
Age	51
I. Particulars of Educational Qualification : (only completed))

Category	Name of the Degree	Specializ ation	Year of Passing	Name o the College	t ti Univ	ne of he ⁄ersit y	% of Marks Grades obtaine / Ph.D. Awarde (Y/N)	d Clas obtain		tificat e
U.G.	B.E.	ELECTRIC AL AND ELECTRO NICS ENGINEE RING	2003	COIMBA' ORE INSTITU' E OF TECHNO OGY (AUTONO MOUS)	T BHAI IYAR L UNIV TY	RATH /ERSI	70	FIRST CLASS		
P.G.	M.E.	VLSI DESIGN	2006	OTHERS KARUNY UNIVERS TY	A KARU	ERS - JNYA /ERSI	8.02	DISTIN ION		Lange Lange
III. Faculty IV. Acaden	Ph.D. Thesia 7 in which Pl nic Experien n the Curre	h.D. was aw ce :		o)*						
	the College		Ination		g Date	Relieving Date / Current Date for Presently		e	Experienc	e
		3		J	9	W	/orking titutions	Vears	Months	Days
CSI COLLE ENGINEEE		ASSISTA PROFESS		17-04-20	006	22-11	-2024	18	7	6
							Tot	al 18	7	9
V. Industri	al Experien	ce :								
Name of t	the p.	Na	ature of				· .]	Experienc	e
Organisat			Work	Joinin	g Date	Kell	eving Dat	Years	Months	Days
	Appointmen t which serv			e conduc	t of Exm	inatio	n during	the last y	year	
AUR (No. of days) 6	Squa Memb (No. of d	er	ternal Exa (Practica (No. of da	al)	(No	al Eval of sci valuate 200		(No	Evaluatio . of script valuated) 50	

It is certified that all the	ne information pro	ovided are true to t	he best of my knowledge.
10 10 001 01110 a 011a0 an o	io miormanon pr	oriada are drad to t	me boot of my mienteage.

All thrownal

Signature of the Faculty :

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	303671
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-PHYSICS
Name of the faculty member	MRS. COLLIN GRACE DEBORAH J D
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	377/1, MUSALNAICKANPALAYAM, N.KADAMPALAYAM AND POST
Line 2	NAMAKKAL -637203
District	NAMAKKAL
Telephone number	-
Mobile number	+91 - 9942703608
Email	COLLINGRACEJD@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BDQPD8663Q
Passport Number	
Faculty code given by C.O.E.	7106147
Faculty code given by A.I.C.T.E.	1-509646273
Date of Birth	08-07-1976
Age	48
I. Particulars of Educational Qualification : (only co	ompleted)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.SC.	OTHERS - PHYSICS	1998	OTHERS - NKR COLLEGE OF ARTS AND SCIENCE FOR WOMEN	UNIVERSI TY OF MADRAS	66	FIRST CLASS	
P.G.	M.SC.	OTHERS - PHYSICS	2002	OTHERS - UNIVERSI TY OF MADRAS	UNIVERSI TY OF MADRAS	59	SECOND CLASS	
OTHERS - M.PHIL	OTHERS - PHYSICS	OTHERS - XRD	2006	OTHERS - BHARATHI DASAN UNIVERSI TY	BHARATHI DASAN UNIVERSI TY	75	DISTINCTI ON	

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score : File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently	Experience		
Name of the Coneye	Designation	Johning Date	Working Institutions	Years	Months	Days
CSI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	21-02-2011	25-11-2024	13	9	5
			Total	13	9	9

V. Industrial Experience :

Name of the	Decignation	Nature of Mork	Loining Doto	Dolioving Doto	E	xperience	,
Organisation	Designation	Nature of Work	Joining Date	Reneving Date	Years	Months	Days

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
; is certified	that all the informa	ation provided are true to th	he best of my knowledge.	
	the Faculty :	Rollin		

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	306259
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-TAMIL
Name of the faculty member	MRS. MELITA JASMINE D
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	4/323, KEREDA VILLAGE, LOVEDALE POST
Line 2	OOTY -643003
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 8098509421
Email	D.MELITAJASMINE83@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	DRNPM3278M
Passport Number	
Faculty code given by C.O.E.	7106203
Faculty code given by A.I.C.T.E.	1-44720677033
Date of Birth	20-04-1983
Age	41
I. Particulars of Educational Qualification : (only	y completed)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name the Univer	e	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		tificat e
U.G.	B.A.	OTHERS - TAMIL	2012	OTHERS - TAMILNA DU OPEN UNIVERSI TY	OTHEF TAMIL DU OP UNIVE TY	NA EN	68	FIRST CLASS		
P.G.	OTHERS - M.A	OTHERS - TAMIL	2017	ANNAMAL AI UNIVERSI TY	ANNAN AI UNIVE TY		57	SECONI CLASS		
[:] Upload Sc	anned copy o	of Original De	egree Certif	icate.						
I .a. Additic Score : File :	onal Qualific	cation :- NO	ADDITION	AL QUALIFI	CATION					
	Dh D. Thosi	s								
I. Title of	rn.D. mesi	5								
II. Title of III. Faculty	y in which P		arded							
III. Faculty		h.D. was aw		•)*						
III. Faculty V. Acaden Start from	y in which P nic Experien <mark>m the Curre</mark>	h.D. was aw ice : nt working i	Experience			/ Cu	eving Date rrent Date		xperienc	e
III. Faculty V. Acaden Start from	y in which P nic Experien	h.D. was aw ice : nt working i) * Joining	g Date	/ Cu for V			xperienc Months	
III. Faculty V. Acaden Start from	y in which P nic Experien m the Curres f the College EGE OF	h.D. was aw ice : nt working i	Experience ignation			/ Cu for V Ins	rrent Date Presently Vorking		-	
III. Faculty V. Acaden Start from Name of CSI COLLI	y in which P nic Experien m the Curres f the College EGE OF	h.D. was aw ice : nt working : e Desi	Experience ignation	Joining		/ Cu for V Ins	rrent Date Presently Vorking stitutions	Years 0	Months	Days
III. Faculty V. Acaden Start from Name of CSI COLLI ENGINEE	y in which P nic Experien m the Curres f the College EGE OF	h.D. was aw	Experience ignation	Joining		/ Cu for V Ins	rrent Date Presently Vorking stitutions 1-2024	Years 0	Months	Days 10
III. Faculty V. Acaden Start from Name of CSI COLLI ENGINEE	y in which P nic Experien m the Curres f the College EGE OF RING	h.D. was aw ice : nt working i e Desi ASSISTA PROFES	Experience ignation ANT iSOR	Joining	24	/ Cu for V Ins 27-1	rrent Date Presently Vorking stitutions 1-2024 Tota	Years 0 1 0	Months	Days 10 15
II. Faculty V. Acaden Start from Name of CSI COLLI ENGINEE	y in which P nic Experien m the Curres f the College EGE OF RING tal Experience the Design	h.D. was aw ice : nt working i e Desi ASSISTA PROFES	Experience ignation	Joining	24	/ Cu for V Ins 27-1	rrent Date Presently Vorking stitutions 1-2024	Years 0 1 0	Months 10 10	Days 10 15
II. Faculty V. Acaden Start from Name of CSI COLLI ENGINEE V. Industri Name of f Organisat	y in which P nic Experien m the Curres f the College EGE OF RING the Lion Design Appointmen	h.D. was aw ice : nt working 1 e Desi ASSIST/ PROFES ce : ation Natu t Experienc	Experience ignation ANT SSOR ure of Worl e :	Joining 18-01-20	24 J Date	/ Cu for V Ins 27-1 Reli	rrent Date Presently Vorking stitutions 1-2024 Tota eving Date	Years 0 1 0 Vears	Months 10 10 cxperienc Months	Days 10 15
II. Faculty V. Acaden Start from Name of CSI COLLI ENGINEE V. Industri Name of f Organisat	y in which P nic Experien m the Curres f the College EGE OF RING the Lion Design	h.D. was aw ice : nt working 1 Desi ASSISTA PROFES ce : ation Natu t Experienc ice is exten- id Ez	Experience ignation ANT SSOR ure of Worl e :	Joining 18-01-20 Seconduct of miner al)	24 g Date of Exmina Central (No. o	/ Cu for V Ins 27-1 Reli ation Eval	rrent Date Presently Vorking stitutions 1-2024 Tota eving Date during the uation ripts	Years Vears 0 1 0 Years Years Particular Particular <t< td=""><td>Months 10 10 cxperienc Months</td><td>Days 10 15 e Days</td></t<>	Months 10 10 cxperienc Months	Days 10 15 e Days



Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	303814
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-MATHEMATICS
Name of the faculty member	MR. PRAKASH T
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	6/82, SHOLUR, BACKODAI,SHOLUR POST
Line 2	OOTY -643005
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9442016968
Email	PRAKASHTHONAN@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AUJPP6778K
Passport Number	
Faculty code given by C.O.E.	7106065
Faculty code given by A.I.C.T.E.	1-508767571
Date of Birth	15-05-1974
Age	50
I. Particulars of Educational Qualification : (only co	ompleted)

Category	gory the Degree Specializa Year of the College		Name o the College	the	e	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtaine	d e	
U.G.	B.SC.	OTHERS - MATHEMA TICS	1997	OTHERS GOVERN ENT ART COLLEGH OOTY	$\begin{array}{c c} M & BHARA \\ YAR \\ S & UNIVE \end{array}$		46.7	OTHERS THIRD	Predmanance The American and th
P.G.	M.SC.	OTHERS - MATHEMA TICS	1999	OTHERS SRI RAMAKR HNA MISSION VIDHAYA A COLLETC OF ARTS AND SCIENCE	IS BHARA L YAR UNIVE GE TY		67.6	FIRST CLASS	The second secon
OTHERS - M.PHILL	OTHERS - MATHEMA TICS	OTHERS - TOPOLOG Y	2002	OTHERS NGM COLLEGH OF ARTS AND SCIENCE POLLACH	E BHARA YAR UNIVE TY		60	FIRST CLASS	
[*] Upload Sc	anned copy o	f Original Deg	gree Certif	icate.					
I.a. Additic Score : 192 File : 💌		ation :- NO A	ADDITION A	AL QUALIF	FICATION				
II. Title of	Ph.D. Thesis	5							
III. Faculty	y in which Pl	h.D. was awa	rded						
	nic Experien m the Currei	ce : nt working E	xperience	e)*					
					ng Date Relieving Da for Present Working				xperience Months Days

Name of the College	Designation	Joining Date	for Presently							
Name of the coneye	Designation	Johning Date	Working Institutions	Years	Months	Days				
CSI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	20-08-2005	25-11-2024	19	3	6				
OTHERS - KANDHAN COLLEGE OF ARTS AND SCIENCE	OTHERS - LECTURER	03-06-2002	12-08-2005	3	2	10				
	Total									
V. Industrial Experience :	V. Industrial Experience :									

Name of the	Basimation	Nature of Work Joini		na Doto	Dolioving Data		Experience		
Organisatio	Designation	Nature of work	Joini	ng Date	Relieving Date	Years	Months	Days	
	pointment Expe		onduct	of Fymina	tion during the	last vea	r		
Capacity at which service is extended for the conduct of Exmination during the last yearAUR (No. of days) 12Squad Member (No. of days)External Examiner (Practical) (No. of days)Central Evaluation (No. of scripts Evaluated) 150Re-Evaluation (No. of scripts Evaluated) 25									
is certified t	hat all the inform	ation provided are tr	rue to th	ne best of n	ny knowledge.				
		TO b							
	~	IPorch							

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	313392
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.ECOMPUTER SCIENCE AND ENGINEERING (CYBER SECURITY)
Name of the faculty member	MR. AMBRISH R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	759/14, TYPE 1 QURTS
Line 2	CF ARUVANKADU - 643202
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9159595998
Email	AMBRISHMECS@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BINPA4364D
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-4686468004
Date of Birth	29-07-1991
Age	34
I. Particulars of Educational Qualification : (only co	mpleted)

				College		ersit y	/ Ph.D. Awarded (Y/N)	obtain	ed	e
U.G.	B.E.	COMPUTE R SCIENCE AND ENGINEE RING	2013	MAHARAJ A INSTITUT E OF TECHNOL OGY	A INSTITUT E OF TECHNOL		58	SECON CLASS		
P.G.	M.E.	COMPUTE R SCIENCE AND ENGINEE RING	2016	CSI COLLEGE ANNA OF UNIVE ENGINEE TY RING			70	FIRST CLASS		
Upload Sc	anned copy of	f Original D	egree Certi	ficate.						
.a. Additio Score : File :	nal Qualific	ation :- NO	ADDITION	AL QUALIF	ICATIO	N				
I. Title of I	Ph.D. Thesis	l								
II. Faculty	in which Ph	n.D. was aw	arded							
	nic Experient n the Curren		Experienc	e)*						
Name of	the College	Desid	Ination	Ioining	Data	Relieving Dat / Current Dat for Presently		te Experience		9
Nume of	the concyc	Desig	jiution	Joining Date		W	orking titutions	Years	Months	Days
CSI COLLE ENGINEEF		ASSISTA PROFES		27-01-202	25	30-01	-2025	0	0	4
							Total	0	0	4
/. Industri	al Experienc	e :								
Name of t	he	. N	ature of					E	xperience	è
Organisati		ation	Work	Joining	Date	Relie	eving Date	Years	Months	Days
	Appointment which servi			e conduct :	of Exmi	inatio	n durina th	e last v	ear	
	Capacity at which service is extended for the conduct of ExAURSquadExternal ExaminerCent(No. ofMember(Practical)(Ndays)(No. of days)(No. of days)1						ĭ	Re-Evaluation (No. of scripts Evaluated)		



Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	313874
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.ECOMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MR. JOHN SATHYA M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	11/207 A, SHANTHOOR,
Line 2	KETTI - 643215
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9486248113
Email	MJOHNSATHYA@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	ASIPJ3326L
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-2192182930
Date of Birth	28-02-1989
Age	36
I. Particulars of Educational Qualification : (only co	ompleted)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	the Universit		Class obtained	Certificat e
U.G.	B.E.	COMPUTE R SCIENCE AND ENGINEE RING	2011	CSI COLLEGE OF ENGINEE RING	ANNA UNIVERSI TY	79.3	FIRST CLASS	
P.G.	M.TECH.	OTHERS - COMPUTE R SCIENCE AND ENGINEE RING	2013	OTHERS - KARUNYA UNIVERSI TY	OTHERS - KARUNYA UNIVERSI TY	75.3	FIRST CLASS	

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

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

IV. Academic Experience :

(Start from the Current working Experience) *

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently	e Experience		
Name of the College	Designation		Working Institutions	Years	Months	Days
CSI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	03-06-2013	30-01-2025	11	7	27
	Total					

V. Industrial Experience :

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

VI. C.O.E. Appointment Experience :

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

	AUR (No. of days) (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.



Name of the College7106 - CSI COLLEGE OF ENGINEERING	
Faculty ID 313929	
Name of the DepartmentCOMPUTER SCIENCE AND ENGINEEERING	
Name of the Degree & CourseB.ECOMPUTER SCIENCE AND ENGINEERING (CYBER SECURITY)	
Name of the faculty memberMRS. ANGEL PEMALA G	
Regular Or Adjunct Regular	
Image Sector Sec	
Present Designation ASSISTANT PROFESSOR	
Residential Address Line 143/98B, MISSION COMPOUND	
Line 2 KOTAGIRI - 643217	
District NILGIRIS	
Telephone number -	
Mobile number +91 - 7868073318	
Email ANGELGILBERT10@GMAIL.COM	
Gender FEMALE	
Community BC	
PAN NumberDAQPA1781K	
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.1-44789002634	
Date of Birth 10-09-1990	
Age 35	

Category	Name of the Degree	Specializa tion	Year of Passing	Nam th Colle	e	Name the Univers	-	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtaine	d Certi	ficate
U.G.	J.G. B.TECH. INFORMAT OGY J.G. B.TECH. INFORMAT J.G. B.TECH. INFORMAT J.G. B.TECH. INFORMAT J.G. B.TECH. INFORMAT J.G. INFORMAT J.G. Z012 J.G. Z01		JNA FUTE NOL NO	ANNA UNIVEF TY	RSI	84.7	FIRST CLASS				
P.G.	M.E.	COMPUTE R SCIENCE		EGE NEER ND	ANNA UNIVEF TY	RSI	83.5	FIRST CLASS			
I.a. Addition Score : File : II. Title of III. Faculty IV. Academ											
					1		Relieving Date / Current Date		e Experience		e
Name o	of the Colleg	e Des	signation	J	oinin	g Date		r Presently Working Istitutions	Years	Months	Days
CSI COLLI ENGINEEI		ASSISTA PROFES		27	27-01-20		30-0	01-2025	0	0	4
								Tota	1 0	0	4
V. Industri	al Experienc	e:									
Name of t Organisat		ation Natu	ire of Woi	rk J	oinin	g Date	Re	lieving Dat	e E Years	xperienco Months	
	(No. of Squad Member (Practical)							uation ripts	Re-E (No.	valuation of scripts lluated)	

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

y. Angel Pernala

Signature of the Faculty :

Name of the College	7106 - CSI COLLEGE OF ENGINEERING				
Faculty ID	314011				
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING				
Name of the Degree & Course	B.ECOMPUTER SCIENCE AND ENGINEERING				
Name of the faculty member	MRS. ADLIN BRAINY T				
Regular Or Adjunct	Regular				
Image					
Present Designation	ASSISTANT PROFESSOR				
Residential Address Line 1	82/17 B1 TOWN CENTRAL NEW POLICE QUARTERS				
Line 2	OOTY - 643001				
District	NILGIRIS				
Telephone number	-				
Mobile number	+91 - 8610157322				
Email	BRAINY.ADLIN@GMAIL.COM				
Gender	FEMALE				
Community	BC				
PAN Number	CDRPT1425Q				
Passport Number					
Faculty code given by C.O.E.					
Faculty code given by A.I.C.T.E.	1-44789214324				
Date of Birth	26-04-1991				
Age	34				
I. Particulars of Educational Qualification : (only completed	1)				

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	OTHERS - MSC	OTHERS - SOFTWAR E ENGINEE RING	2013	SUN COLLEGE OF ENGINEE RING AND TECHNOL OGY	ANNA UNIVERSI TY	85	DISTINCT ION	
P.G.	M.E.	COMPUTE R SCIENCE AND ENGINEE RING	2015	PONJESLY COLLEGE OF ENGINEE RING	ANNA UNIVERSI TY	8.91	DISTINCT ION	

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

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

IV. Academic Experience :

(Start from the Current working Experience) \ast

Name of the Colleg	Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently	Experience		
	Name of the Conege	Designation	Johning Date	Working Institutions	Years	Months	Days
	CSI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR 27-01-2025		31-01-2025	0	0	5
				Total	0	0	5

V. Industrial Experience :

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

VI. C.O.E. Appointment Experience :

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

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

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



Signature of the Faculty :

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	314102
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.ECOMPUTER SCIENCE AND ENGINEERING (ARTIFICIAL INTELLIGENCE AND MACHINE LEARNING)
Name of the faculty member	MR. VINSON A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	68, SIRUVALUR ROAD, KAVUNDHAPADI
Line 2	ERODE - 638455
District	ERODE
Telephone number	-
Mobile number	+91 - 6379227545
Email	VINSONABEL@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	CGSPV3737R
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-44789308474
Date of Birth	05-05-2000
Age	25
I. Particulars of Educational Qualification : (only comple	ted)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	tl Univ	ne of ne versit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		ificat e	
U.G.	R TECH	INFORMA TION TECHNOL OGY	2021	CSI COLLEGE OF ENGINEE RING	UNIV	A 'ERSI	7.62	FIRST CLASS			
P.G.	M.E.	COMPUTE R SCIENCE AND ENGINEE RING	2023	CSI COLLEGE OF ENGINEE RING	UNIV	A ′ERSI	7.5	FIRST CLASS	Autor		
* Upload Sc	anned copy of	f Original De	egree Certi	ficate.							
Score : File :	onal Qualific		ADDITION	IAL QUALI	FICATIO	N					
	Ph.D. Thesis										
	/ in which Ph		arded								
	nic Experien n the Currer		Experienc	e)*							
						Relieving Date / Current Date				9	
Name of	the College	Desig	nation	Joining Date		for Presently Working Institutions		Years	Months	Days	
CSI COLLE ENGINEEE		ASSISTA PROFESS		27-01-20	25 31-01-2025		-2025	0	0	5	
		•		•			Total	0	0	5	
V. Industri	al Experienc	e :									
Name of t	tha	Na	ature of					E	xperience	ience	
Organisat		ation I	Work	Joining	J Date	Relie	eving Date	Years	Months	Days	
	Appointment			• -	6.5	• ••	1	1 -			
Capacity al AUR (No. of days)	t which servi Squad Membe (No. of d	l Ex	ded for th ternal Exa (Practica (No. of da	miner al)	Centra (No.		uation ripts	Re-E (No.	ear Evaluation of scripts aluated)		
It is cortifio	d that all the i	nformation				<u> </u>					

A Vinden

Signature of the Faculty :
Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	314297
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.ECOMPUTER SCIENCE AND ENGINEERING (ARTIFICIAL INTELLIGENCE AND MACHINE LEARNING)
Name of the faculty member	MRS. ATHUNNIYA PRIYA DHARSINI S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1/4 R 54B, KAMARAJ NAGAR, O VALLEY
Line 2	GUDALUR - 643211
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 6380698162
Email	ATHUNNIYA1615@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	MYJPS6673N
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-44789638667
Date of Birth	16-05-2000
Age	25
I. Particulars of Educational Qualification : (only complete	d)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	COMPUTE R SCIENCE AND ENGINEE RING	2021	CSI COLLEGE OF ENGINEE RING	ANNA UNIVERSI TY	70	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

File:

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

IV. Academic Experience :

(Start from the Current working Experience) \ast

	Name of the College	Designation	nation Joining Date for		Experience		
	Name of the Coneye	Designation	Johning Date	for Presently Working Institutions	Years	Months	Days
	CSI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	27-01-2025	31-01-2025	0	0	5
ſ				Total	0	0	5

V. Industrial Experience :

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

VI. C.O.E. Appointment Experience :

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

AURSquadExternal ExaminerCentral EvaluationRe-Evaluation(No. ofMember(Practical)(No. of scripts(No. of scripts)days)(No. of days)(No. of days)Evaluated)Evaluated	pts
---	-----

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



Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	305232
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-CHEMISTRY
Name of the faculty member	MR. DOMINIC XAVIER J
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	64A1, BETHANIA HOUSE, MOUNTPLEASANT
Line 2	COONOOR - 643102
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9943492899
Email	DOMCHEM@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	APVPD3255J
Passport Number	
Faculty code given by C.O.E.	7106066
Faculty code given by A.I.C.T.E.	1-508835459
Date of Birth	18-11-1981
Age	43
I. Particulars of Educational Qualification : (only	completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.SC.	OTHERS - CHEMIST RY	2002	OTHERS - GOVERN MENT ARTS COLLEGE OOTY	BHARATH IYAR UNIVERSI TY	74.64	FIRST CLASS	A state of the sta
P.G.	M.SC.	OTHERS - CHEMIST RY	2005	OTHERS - SRI RAMAKRI SHNA VIDYALAY A CAS CBE	BHARATH IYAR UNIVERSI TY	76	DISTINCT ION	The second secon
OTHERS - M.PHILL	OTHERS - M.PHILL	OTHERS - CHEMIST RY	2007	OTHERS - PERIYAR UNIVERSI TY SALEM	PERIYAR UNIVERSI TY	73.5	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) \ast

Name of the College	Designation	Designation Joining Date		Experience			
Name of the Conege	Designation	Johning Date	for Presently Working Institutions	Years	Months	Days	
CSI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	20-07-2007	26-11-2024	17	4	7	
OTHERS - GOVERNMENT ARTS COLLEGE OOTY	ASSISTANT PROFESSOR	01-06-2005	19-07-2007	2	1	19	
			Total	19	5	28	
V. Industrial Experience	:						

Name of the	e Designation	Nature of	Ioinin	ning Date Relieving Dat		E	Experience	e
Organisatio	n	Work	Joinn	y Date	Kellevilly Date	Years	Months	Days
-	VI. C.O.E. Appointment Experience : Capacity at which service is extended for the conduct of Exmination during the last year							
AUR (No. of days) 5	Squad External Examiner Central Evaluation Re-Evaluation						- 1	
It is certified t	that all the inform	ation provided ar	e true to	the best o	of my knowledge.			
Signature of	IRANT							
Signature of	the Faculty :							

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	305289
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-ENGLISH
Name of the faculty member	MR. AMAL RAJ I
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	6/120,NEHRU NAGAR ,SELAS
Line 2	643213
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 8110062895
Email	AMALRAJENGLISH123@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	ERVPA5657P
Passport Number	
Faculty code given by C.O.E.	7106185
Faculty code given by A.I.C.T.E.	1-44151772737
Date of Birth	03-02-1997
Age	27
I. Particulars of Educational Qualification : (only com	pleted)

Category	Name of the Degree	Specializat ion	Year of Passing	Nam the Co		Name of the University	obtained	0	Class btained	l Certi	ficate
U.G.	B.A.	ENGLISH	2015	OTHERS - KAYPEEYES ARTS AND SCIENCE		BHARATHI YAR UNIVERSI Y	05	DI	STINCT I		
P.G.	OTHERS - M.A	OTHERS - ENGLISH	2021	OTHERS - ANNAMAL IUNIVERSI TY		ANNAMAL I UNIVERSIT Y	01	DI	STINCT J		An an and angle of the second
* Upload Scanned copy of Original Degree Certificate. I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION Score : File :											
I. Title of	Ph.D. Thesis										
III. Faculty	in which Ph	.D. was awar	ded								
	nic Experienc n the Curren		perience)	*							
					T - * *	/ Curi		Relieving Date Current Date for Presently		e Experience	
Name	of the Colleg	e D	esignatio	n	Joini	ing Date	Working Institution	0	Years	Months	Days
CSI COLLE ENGINEEE		ASSIST PROFE			22-06-	2023	26-11-2024		1	5	5
				•			То	otal	1	5	7
	al Experience):									
V. Industri	-								Experience		
	the _			.					<u> </u>	xperience	e
V. Industri Name of † Organisat	LIDCIUUS	tion Nat	ure of Wo	rk	Joini	ing Date	Relieving D	ate	Years	-	
Name of t Organisat VI. C.O.E. 4	LIDCIUUS	Experience :							Years	-	



Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	305324
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-ENGLISH
Name of the faculty member	MRS. SARITHA E K
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	5/8F,KARAKORAI VILLAGE, JEGATHALA ROAD, ARUVANKADU
Line 2	COOOOR - 643202
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9585632713
Email	SARIBABU2@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	CILPS9728L
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-44127857992
Date of Birth	02-05-1982
Age	42
I. Particulars of Educational Qualification : (on	ly completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name o the College	I tł	ne of he versit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		ificat e
U.G.	B.A.	ENGLISH	2002	OTHERS PROVIDE NCE COLLEGE FOR WOMEN	BHAI IYAR		59.5	SECON CLASS	D	A construction of the second s
	OTHERS - M.A	OTHERS - ENGLISH	2010	ANNAMA AI UNIVERS TY	AI	AMAL ⁄ERSI	55	SECON CLASS	D	Arrandal University Territoria Contractions Territoria Contractions
Upload Sca	anned copy o	f Original De	egree Certi	ficate.						
a. Addition core : ile :	nal Qualific	ation :- NO	ADDITION	IAL QUALI	FICATIO	N.				
[. Title of]	Ph.D. Thesis	5								
II. Faculty	in which Pl	h.D. was aw	arded							
	nic Experien n the Curren		Experienc	e)*						
Name of	the College	Decie	mation	Toinin	~ Data	/ Cu	eving Date	E	xperience	,
Name of	the College	Desig	nation	Joinin	g Date	/ Cur for W		E Years	xperience Months	
Name of CSI COLLE ENGINEER	GE OF	Desig ASSISTA PROFESS	NT	Joining		/ Cur for W Ins	rrent Date Presently /orking		-	
CSI COLLE	GE OF	ASSISTA	NT			/ Cur for W Ins	rrent Date Presently /orking titutions	Years	Months	Day
CSI COLLE ENGINEER	GE OF	ASSISTA PROFESS	NT			/ Cur for W Ins	rrent Date Presently /orking titutions -2024	Years	Months	Day 16
CSI COLLE ENGINEER	CGE OF NNG al Experienc	ASSISTA PROFESS	NT	11-09-20)23	/ Cun for W Ins 26-11	rrent Date Presently /orking titutions 2024 Total	Years 1 1	Months	Day 16 17
CSI COLLE ENGINEER . Industria	GE OF NNG al Experienc he Design	ASSISTA PROFESS	NT SOR)23	/ Cun for W Ins 26-11	rrent Date Presently /orking titutions -2024	Years 1 1	Months 2 2	Days 16 17
CSI COLLE ENGINEER 7. Industria Name of t Organisati 1. C.O.E. A	GE OF NNG al Experienc he Design	ASSISTA PROFESS ce : ation Na t Experience	NT SOR ature of Work e :	11-09-20)23 g Date	/ Cun for W Ins 26-11	rrent Date Presently /orking titutions 2024 Total eving Date	Years 1 1 E Years Years	Months 2 2 xperience Months	Day: 16 17



Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	307356
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.EGENERAL ENGINEERING
Name of the faculty member	MR. PREM KUMAR J
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	12/499, THORAIJADA, SHANTHOOR
Line 2	OOTY - 643215
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9080739318
Email	PREMMECH0802@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BTFPP0303J
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-44724758341
Date of Birth	08-07-1992
Age	32
I. Particulars of Educational Qualification : (only c	ompleted)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Nam th Unive y	e ersit	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		ificat e
U.G.	B.E.	MECHANI CAL ENGINEE RING	2014	CSI COLLEGE OF ENGINEE RING	ANNA UNIVI TY		65	FIRST CLASS		
P.G.	M.E.	MANUFAC TURING ENGINEE RING	2016	CSI COLLEGE OF ENGINEE RING	ANNA UNIVI TY		75	FIRST CLASS		
III. Faculty	Ph.D. Thesi y in which P nic Experien	h.D. was aw	arded							
	m the Curre		Experienc	e)*						
Name of	f the College	Docid	Ination	Joining	Data	/ Cu	eving Date rrent Date Presently	E	xperience	e
Name of	the conege	Desig	JIIACIOII	Joining	Date	V	Vorking stitutions	Years	Months	Days
CSI COLLI ENGINEE		ASSISTA PROFESS		02-02-202	2	28-11	1-2024	2	9	26
				•			Total	2	9	0
/. Industri	ial Experien	V. Industrial Experience :								
V. Industri Name of Organisat	the Design	N	ature of	Joining	Data	Dali	eving Date	E	xperience	

		•			
	ppointment Expe				
Capacity at v	which service is o	extended for the condu	ct of Exmination during	the last year	
AUR	Squad	External Examiner	Central Evaluation	Re-Evaluation	n
(No. of	Member	(Practical)	(No. of scripts	(No. of script	- 1
days)	(No. of days)	(No. of days)	Evaluated)	Evaluated)	

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

Jul-	
Signature of the Faculty :	

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	305501
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.EELECTRONICS AND COMMUNICATION ENGINEERING
Name of the faculty member	DR. SILAMBOLI J
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	1/185 A, PUDHUPET, VADATHORASALUR POST
Line 2	KALLAKURICHI - 606206
District	KALLAKURICHI
Telephone number	-
Mobile number	+91 - 8925385771
Email	J.SILAMBOLI@CSICE.EDU.IN
Gender	MALE
Community	BC
PAN Number	FFCPS8695H
Passport Number	
Faculty code given by C.O.E.	7106104
Faculty code given by A.I.C.T.E.	1-813832909
Date of Birth	24-06-1988
Age	36
I. Particulars of Educational Qualification : (only completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	th	ersit	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Clas: obtain		ificat e	
U.G.	B.E.	ELECTRO NICS AND COMMUN ICATION ENGINEE RING	2009	OTHERS - KARUNYA UNIVERSI TY	OTHE KARU UNIV TY	JNYA	7.26	FIRST CLASS		A CANADA	
P.G.	M.TECH.	OTHERS - COMMUN ICATION SYSTEM	2012	OTHERS - KARUNYA UNIVERSI TY	OTHE KARU UNIV TY	JNYA	8.5	DISTIN ION	- Karung		
PH.D.	PH.D.	ELECTRO NICS ENGINEE RING	2024	OTHERS - JAIN DEEMED TO BE UNIVERSI TY	OTHE JAIN DEEN TO BI UNIV TY	∕IED E	Y			C C C C C C C C C C C C C C C C C C C	
I.a. Additio Score : File :	canned copy o onal Qualific Ph.D. Thesis	ation :- NO			CATIO	N					
	y in which P		arded								
	nic Experien m the Curre		Experienc	e)*							
						/ Cu	eving Date rrent Date			ience	
Name of	f the College	Desig	nation	Joining I	Date	W	Presently /orking titutions	Years	Months	Days	
CSI COLLI ENGINEE		ASSISTA PROFESS		18-04-2012	2	26-11	-2024	12	7	9	
							Total	12	7	12	
V. Industrial Experience :											
v. muustri	. Industrial Experience :										

AUR No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days) 3	Central Evaluation (No. of scripts Evaluated) 250	Re-Evaluation (No. of scripts Evaluated)
certified	that all the inform	ation provided are true to	the best of my knowledge.	
cerunea	that all the inform	ation provided are true to	the best of my knowledge.	
	10 10.00	and the second		
		1 went		

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	305534
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.EELECTRONICS AND COMMUNICATION ENGINEERING
Name of the faculty member	MR. SIVALINGAN K
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	6/342, THANGADU, T.HORONALLI POST
Line 2	OOTY - 643003
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9943386755
Email	SIVALINGAN03@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	DYEPS1599M
Passport Number	
Faculty code given by C.O.E.	7106143
Faculty code given by A.I.C.T.E.	1-2499412803
Date of Birth	30-05-1975
Age	49
I. Particulars of Educational Qualification : (only completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name o the College	t Univ	ne of he versit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Clas obtain		ificat e
U.G.	OTHERS - AMIE	ELECTRO NICS AND COMMUN ICATION ENGINEE RING	2010	OTHERS THE INSTITUT ON OF ENGINEH RING INDIA	- THE INST II ONS ENG E RING INID	INEE G	7.13	FIRST CLASS	Ut. Jeththet af Saydarer Chika)	$p_{ij} = p_{ij} = p$
P.G.	M.E.	VLSI DESIGN	2014	OTHERS KARPAGA M UNIVERS TY	A KAR M	ERS - PAGA VERSI	8.32	FIRST CLASS		
III. Faculty IV. Acaden	Ph.D. Thesis 7 in which Pl nic Experien n the Curren	h.D. was aw ce :		e)*						
Name of	the College	Desid	Ination	Joinin	g Date	Relieving Date / Current Date for Presently		rent Date Ex] resently		e
	5						orking titutions	Years	Months	Days
CSI COLLE ENGINEEE		ASSISTA PROFES		01-06-20)14	26-11	-2024	10	5	26
							Total	10	5	28
V. Industri	al Experienc	ce :								
Name of t	I LIOCIAIN	ation	ature of	Joinin	a Data	Dali	eving Date	E	xperience	e
Organisat	ion		Work	Jounu	y Date	Aeil	eviny Date	Years	Months	Days
	Appointmen t which serv			e conduct	t of Exm	inatio	n durina tl	ne last v	ear	
AUR (No. of days) 4	Squa Memb (No. of d 3	d Ex er	ternal Exa (Practica (No. of da 3	nminer al)	Centra (No		uation ripts	Re-I (No.	Evaluation of script aluated) 100	

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



Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	309135
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.EGENERAL ENGINEERING
Name of the faculty member	MR. MANECK NAVEEN O
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	12/11, ONAGUNDU, SHANTHOOR, KETI
Line 2	OOTY -643215
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 7200243669
Email	MNMANECK@GMAIL.COM
Gender	MALE
Community	ST
PAN Number	BWEPM6965K
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-44726629564
Date of Birth	09-07-1995
Age	29
I. Particulars of Educational Qualification : (or	ly completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name o the College	r tl	ne of ne versit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		ificat e
U.G.	B.E.	MECHANI CAL ENGINEE RING	2016	CSI COLLEGI OF ENGINEI RING	UNIV	A ′ERSI	68	FIRST CLASS		
P.G.	M.E.	MANUFA CTURING ENGINEE RING	2018	CSI COLLEGI OF ENGINEI RING	UNIV	A 'ERSI	83	FIRST CLASS		
* Upload Sc	anned copy o	f Original D	egree Certi	ficate.						
	Ph.D. Thesis 7 in which Pl		varded							
	nic Experien n the Currei		Experienc	e)*						
						Relieving Date				9
Name of	the College	Desig	J nation	Joinin	g Date	for W	Presently Vorking titutions	Years	Months	Days
CSI COLLE ENGINEEE		ASSISTA PROFES		01-11-20)24	29-11	-2024	0	0	29
				1		I	Total	0	0	29
V. Industri	al Experienc	ce :								
Name of t	he	N	ature of					E	xperience	e
Organisat	I Docian	ation	Work	Joinin	g Date	Reli	eving Date	Years	Months	Days
	Appointmen t which serv			o conduc	t of Even	inatia	n during +1	n lact	oor	
AUR AUR (No. of days)	Squad Memb (No. of d	d Ex er	ternal Exa (Practica) (No. of da	miner al)	Centra (No.		uation ripts	Re-E (No.	ear Evaluation of scripts aluated)	
It is certifie	d that all the	information	provided a:	re true to	the best (of my k	nowledge.			



Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	305763
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.EGENERAL ENGINEERING
Name of the faculty member	MR. KAVIYARASAN A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	4/1009 A, PALANAMPADI VILLAGE, BARUR POST
Line 2	POCHAMPALLI TK, KRISHNAGIRI DT - 635201
District	KRISHNAGIRI
Telephone number	-
Mobile number	+91 - 8667085902
Email	KAVIROMANKAVI@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	EPCPK2962E
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-44720509684
Date of Birth	18-02-1997
Age	27
I. Particulars of Educational Qualification : (only	completed)

Category	Name of the Degree	Specializa tion	Year of Passing	Name the Colleg		Name the Univers		% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	I	Class obtaine	d Certi	ficate
U.G.	B.E.	CIVIL ENGINEER ING	2018	ANNA UNIVES REGION CAMPU IRUCHI PPALLI	JAL S,T	ANNA UNIVER TY	SI	58		ECOND LASS	And a construction of the second seco	
P.G.	M.E.	STRUCTUR AL ENGINEER ING	2021	ALAGAH CHETTI GOVER ENT COLLEC OF ENGINI ING AN TECHN OGY (AUTON MOUS)	AR NM GE EER D OL	ALAGAP UNIVER TY		84		IRST LASS		
Score : File : II. Title of III. Faculty IV. Acaden	Ph.D. Thesis / in which Pl nic Experien	n.D. was awa	rded		FICA	ATION						
N		D	•••••			Data	/ C ı	ieving Da Irrent Da	te	E	xperienc	e
Name o	of the Colleg	e Des	ignation	Jo	ininę	g Date		r Present Working stitution	Ĭ	Years	Months	Days
CSI COLLE ENGINEEE		ASSISTA PROFES		26-0)4-20	23	27-1	1-2024		1	7	2
								To	tal	1	7	5
V. Industri	al Experienc	ce :										
Name of t Organisat		ation Natu	ire of Woi	ck Jo	ininę	g Date	Rel	ieving Da	te	E: Years	xperienc Months	
		t Experience		oond		Evminati		uning the				
AUR (No. of days)	Squa Squa Meml (No. of c	ber	ternal Exa (Practic (No. of d	aminer al)		Central I (No. of Evalu	Evalı f scr	uation ipts	; 1dS	Re-E	valuation of scripts lluated)	

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

A. Bessurper

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	307466
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.ECOMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MRS. REVATHI L
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	61, NETHĄJI NAGAR, FINGER POST
Line 2	OOTY - 643006
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9789993905
Email	REVATHI.11RAY@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	BPNPR4439D
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-44150648712
Date of Birth	11-06-1992
Age	32
I. Particulars of Educational Qualification : (on	ly completed)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	COMPUTE R SCIENCE AND ENGINEE RING	2013	K S R COLLEGE OF ENGINEE RING (AUTONO MOUS)	ANNA UNIVERSI TY	75	FIRST CLASS	
P.G.	M.E.	COMPUTE R SCIENCE AND ENGINEE RING	2022	CSI COLLEGE OF ENGINEE RING	ANNA UNIVERSI TY	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	/ Cu		Relieving Date / Current Date for Presently	Experience			
Name of the conege	Designation	Johning Date	Working Institutions	Years	Months	Days	
CSI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	20-03-2023	28-11-2024	1	8	9	
			Total	1	8	13	

V. Industrial Experience :

Name of the	Decignation	Nature of		Daliarin a Data	Experience		
Organisation	Designation	Work	Joining Date	Relieving Date	Months	Days	

VI. C.O.E. Appointment Experience :

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

	AUR (No. of days) (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.



Name of the College	7106 - CSI COLLEGE OF ENGINEERING		
Faculty ID	305997		
Name of the Department	ELECTRICAL AND ELECTRONICS ENGINEERING		
Name of the Degree & Course	B.EELECTRICAL AND ELECTRONICS ENGINEERING		
Name of the faculty member	MRS. KOWSALYA M		
Regular Or Adjunct	Regular		
Image			
Present Designation	ASSISTANT PROFESSOR		
Residential Address Line 1	RVS COMPLEX, SHANTHOOR		
Line 2	KETTI -643215		
District	NILGIRIS		
Telephone number	-		
Mobile number	+91 - 9443284045		
Email	KOWSE89@GMAIL.COM		
Gender	FEMALE		
Community	BC		
PAN Number	DOMPK6715K		
Passport Number			
Faculty code given by C.O.E.	7106215		
Faculty code given by A.I.C.T.E.	1-2191772743		
Date of Birth	04-07-1989		
Age	35		
I. Particulars of Educational Qualification : (only completed)		

Category	Name of the Degree	Specializ ation	Year of Passing	Name o the College	tł Univ	ne of ne versit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		tificat e
J.G.	B.E.	ELECTRIC AL AND ELECTRO NICS ENGINEE RING	2010	CSI COLLEGI OF ENGINEI RING	UNIV		67	FIRST CLASS		
P.G.	M.E.	VLSI DESIGN	2013	OTHERS KARPAGA M UNIVERS TY	A KARF M	PAGA	83	FIRST CLASS		
core :										
core : ile : . Title of I. Faculty	Ph.D. Thesis	1.D. was av	varded							
core : ile : . Title of I. Faculty /. Acaden		n.D. was av ce :		e)*						
core : ile : . Title of I. Faculty /. Acaden Start from	v in which Pl nic Experient n the Currer	n.D. was av ce : nt working	Experienc			/ Cu	eving Date	E	xperience	e
core : ile : . Title of I. Faculty /. Acaden Start from	v in which Pl	n.D. was av ce : nt working		e)*	g Date	/ Cur for W		E Years	xperience	
Core : ile : . Title of I. Faculty /. Acaden Start from Name of CSI COLLE	v in which Ph nic Experien n the Curren the College	n.D. was av ce : nt working	Experienc gnation			/ Cur for W Ins	rrent Date Presently Jorking		-	
Core : ile : . Title of I. Faculty /. Acaden Start from Name of CSI COLLE	v in which Ph nic Experien n the Curren the College	n.D. was av ce : nt working Desig	Experienc gnation	Joining		/ Cur for W Ins	rrent Date Presently /orking titutions	Years	Months	Day
I. Faculty V. Acaden Start from Name of CSI COLLE	v in which Ph nic Experien n the Curren the College	n.D. was av	Experienc gnation	Joining		/ Cur for W Ins	rrent Date Presently Vorking titutions -2024	Years 11	- Months	Day 25
core : ile : . Title of I. Faculty V. Acaden Start from Name of CSI COLLE ENGINEE . Industri Name of t	v in which Photo P	n.D. was av ce : nt working Desig ASSISTA PROFES	Experienc gnation NT SOR	Joinin	13	/ Cui for X Ins 27-11	rrent Date Presently /orking titutions -2024 Total	Years 11 11	- Months	Day 25 27
core : ile : . Title of I. Faculty V. Acaden Start from Name of CSI COLLE ENGINEE . Industri	v in which Photo P	n.D. was av ce : nt working Desig ASSISTA PROFES	Experienc gnation	Joining	13	/ Cui for X Ins 27-11	rrent Date Presently Vorking titutions -2024	Years 11 11	- Months 5 5	Day 25 27
Core : ile : I. Title of I. Faculty J. Academ Start from Name of CSI COLLE ENGINEE I. Industri Name of f Drganisat I. C.O.E.	v in which Photo P	n.D. was av ce : nt working Desig ASSISTA PROFES	Experienc gnation NT SOR ature of Work Ce :	Joining 03-06-20	J13 J Date	/ Cun for 1 W Ins 27-11	rrent Date Presently /orking titutions -2024 Total eving Date	Years 11 11 11 E Years	5 5 xperience Months	Day 25 27



Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	306065
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.ECIVIL ENGINEERING
Name of the faculty member	MRS. IRFANA PARVEEN
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	TEA BOARD QUARTERS, 78MIG HOUSING UNIT,VANNARPET
Line 2	COONOOR - 643102
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9074203638
Email	PARVEENSHAMEER123@GMAIL.COM
Gender	FEMALE
Community	OC
PAN Number	AMDPI7616P
Passport Number	
Faculty code given by C.O.E.	7106200
Faculty code given by A.I.C.T.E.	1-44720509865
Date of Birth	24-05-1995
Age	29
I. Particulars of Educational Qualification : (only com	pleted)

Category	Name of the Degree	Specializat ion	Year of Passing	Name the Col		Name o the Universit	obtained	Class obtaine		ficate	
U.G.	B.TECH.	OTHERS - CIVIL ENGINEERI NG	2017	OTHER COCHIL COLLE OF ENGIN NG ANI TECHN GY VALAN RY	N GE EERI D TOLO	OTHERS - UNIVERSI Y OF CALICUT		FIRST CLASS			
P.G.	M.TECH.	OTHERS - STRUCTUR AL ENGINEERI NG AND CONSTRUC TION MANAGEM ENT	2020	OTHER INDRA GANDE INSTIT OF TECHN GY KOTHA NGALA	II UTE OLO MA	OTHERS - APJ ABDU KALAM TECHNOL GICAL UNIVERSI Y	L .O 7.91	FIRST CLASS		ang Language ang Language an	
Score : File : II. Title of III. Faculty	onal Qualifica Ph.D. Thesis y in which Ph nic Experienc	.D. was awar		. QUALIF	FICATI	ON					
	m the Curren		perience)	*							
Name	e of the Colle	ae	Designation		Joining Date		Relieving Da / Current Da for Presentl	te	Experience	perience	
			5		5	5	Working Institutions	Voare	Months	Days	
CSI COLLI ENGINEEI			STANT FESSOR	2	20-11-	2023	27-11-2024	1	0	8	
OTHERS - TRAINING PALARIVA			STANT FESSOR		05-06-	2018	04-07-2019	1	0	30	
							Το	t al 2	1	8	
V. Industri	ial Experience	e:									
Name of		tion Nat	ure of Wo	ork	Join	ing Date	Relieving Da	te ——	Experience	1	
Organisat	tion				<u> </u>	9	<u>-</u>	Years	6 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 th	hat all the informati	ion provided are true to the k	best of my knowledge.							
Signature of t	the Faculty :	Zing								
Name of the College	7106 - CSI COLLEGE OF ENGINEERING									
---	--									
Faculty ID	307549									
Name of the Department	ELECTRICAL AND ELECTRONICS ENGINEERING									
Name of the Degree & Course	B.EELECTRICAL AND ELECTRONICS ENGINEERING									
Name of the faculty member	MR. KAMALAKANNAN A									
Regular Or Adjunct	Regular									
Image	T ment of context									
Present Designation	ASSISTANT PROFESSOR									
Residential Address Line 1	7/120 B1 A, THATTAMPARA, AYYANKOLLI									
Line 2	GUDALUR - 643239									
District	NILGIRIS									
Telephone number	-									
Mobile number	+91 - 9489124497									
Email	KANNANKANNA4832@GMAIL.COM									
Gender	MALE									
Community	SC									
PAN Number	GKJPK7185M									
Passport Number										
Faculty code given by C.O.E.										
Faculty code given by A.I.C.T.E.	1-44724758449									
Date of Birth	04-11-1998									
Age	26									
I. Particulars of Educational Qualification : (or	ly completed)									

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name the Univer	;	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtaine		ificat e
U.G.	B.E.	ELECTRIC AL AND ELECTRO NICS ENGINEER ING	2020	UNITED INSTITUT E OF TECHNOL OGY (AUTONO MOUS)	ANNA UNIVE TY	RSI	/5	FIRST CLASS		
P.G.	M.E.	POWER ELECTRO NICS AND DRIVES	2023	CSI COLLEGE OF ENGINEER ING	ANNA UNIVE TY	RSI	/ ///	FIRST CLASS		
[«] Upload Sc	canned copy of	f Original Deg	gree Certifio	cate.						
I.a. Additic Score : File :	onal Qualific	ation :- NO A	ADDITIONA	L QUALIFIC	CATION					
I. Title of	Ph.D. Thesis	;								
III. Faculty	y in which Pł	I.D. was awa	rded							
	nic Experien m the Currer		xperience) *						
		-			. .	/ Cu	ieving Date Irrent Date	E	xperience	,
Name o	of the College	e Des	ignation	Joinin	g Date	/ Cu for V		E Years	xperience Months	Days
Name o CSI COLLI ENGINEE	EGE OF	ASSISTA PROFES	ANT	Joinin 01-11-20		/ Cu for V In	rrent Date Presently Working		-	
CSI COLLI	EGE OF	ASSISTA	ANT			/ Cu for V In	rrent Date Presently Working stitutions	Years 0	Months	Days
CSI COLLI ENGINEE	EGE OF	ASSISTA PROFES	ANT			/ Cu for V In	Presently Working stitutions	Years 0	Months	Days 28
CSI COLLI ENGINEEI V. Industri	EGE OF RING ial Experienc	ASSISTA PROFES	ANT SOR	01-11-20)24	/ Cu for V In 28-1	Presently Working stitutions 1-2024 Total	Vears 0 0 E	Months	Days 28 28
CSI COLLI ENGINEE	EGE OF RING ial Experienc the Decign	ASSISTA PROFES	ANT	01-11-20)24	/ Cu for V In 28-1	Presently Working stitutions	Vears 0 0 E	Months 0 0	Days 28 28
CSI COLLI ENGINEE /. Industri Name of Organisat /I. C.O.E.	EGE OF RING ial Experienc the Decign	ASSISTA PROFES	ANT SOR ure of Work	01-11-20)24 g Date	/ Cu for V In 28-1	irrent Date Presently Working stitutions 1-2024 Total	Years 0 0 E Years Vears	Months 0 0 xperience Months	Days 28 28



Signature of the Faculty :

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	306206
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECHINFORMATION TECHNOLOGY
Name of the faculty member	MRS. VIDHYA R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	110/A, BOMBAY CASTLE,
Line 2	OOTY - 643001
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9486183463
Email	VIDHYA.OOTY@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	AQYPR7537F
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-758650722
Date of Birth	12-09-1982
Age	42
I. Particulars of Educational Qualification : (only o	completed)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.SC.	OTHERS - MATHS	2003	OTHERS - AVINASHI LINGAM DEEMED UNIVERSI TY	OTHERS - AVINASHI LINGAM DEEMED UNIVERSI TY	71	FIRST CLASS	
P.G.	M.SC.	OTHERS - COMPUTE R SCIENCE	2005	ANNAMAL AI UNIVERSI TY	ANNAMAL AI UNIVERSI TY	72	FIRST CLASS	
P.G.	M.E.	COMPUTE R SCIENCE AND ENGINEE RING	2011	ANNA UNIVESIT Y REGIONAL CAMPUS,T IRUCHIRA PPALLI	ANNA UNIVERSI TY	83	FIRST CLASS	
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - COMPUTE R SCIENCE	2007	ANNAMAL AI UNIVERSI TY	ANNAMAL AI UNIVERSI TY	65	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

File :

II.	Title	of	Ph.D.	Thesis
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III. Faculty in which Ph.D. was awarded

IV. Academic Experience :

(Start from the Current working Experience) *

Name of the College	me of the College Designation Joining I		/ Current		Relieving Date / Current Date for Presently	Experience		
Name of the Conege	Designation	Joining Date	Working Institutions	Years	Months	Days		
CSI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	16-07-2007	31-07-2019	12	0	16		
CSI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	06-05-2024	27-11-2024	0	6	22		
	•	•	Total	12	7	11		
V. Industrial Experience :								

Name of the	Designation	Nature of Work	Joining Data	Polioving Data	Experience		
Organisatio	Designation	Nature of work	Joining Date	Relieving Date	Years	Months	Days
	pointment Expe /hich service is (rience : extended for the co	onduct of Exmina	ation during the l	ast yea	r	
AUR (No. of days)	Squad Member (No. of days)	External Exam (Practical) (No. of days	(No.)	Evaluation of scripts luated)	(No.	valuation of scripts aluated)	_
It is certified t	hat all the inform	ation provided are ti	rue to the best of r	ny knowledge.			
	2	X					

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	306308
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-MATHEMATICS
Name of the faculty member	MRS. RAJA LAKSHMI C
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	749/12, TYPE II QUARTERS, CATLE POUND
Line 2	COONOOR -643202
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 8946055658
Email	RAJALAKSHMIMSC96@GMAIL.COM
Gender	FEMALE
Community	MBC
PAN Number	EEWPR4679A
Passport Number	
Faculty code given by C.O.E.	7106209
Faculty code given by A.I.C.T.E.	1-44720676784
Date of Birth	17-06-1996
Age	28
I. Particulars of Educational Qualification : (only com	pleted)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name the Univers	obtained	Class obtained	Certificat e
U.G.	B.SC.	OTHERS - MATHEMA TICS	2016	OTHERS - APC MAHALAX MI COLLEGE FOR WOMEN TUTICORI N	MANOM NIAM SUNDAI AR UNIVER TY	RN 95.4	FIRST CLASS	
P.G.	M.SC.	OTHERS - MATHEMA TICS	2018	OTHERS - APC MAHALAX MI COLLEGE FOR WOMEN TUTICORI N	MANOM NIAM SUNDAI AR UNIVER TY	RN 93.1	DISTINCTI ON	
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - MATHEMA TICS	2019	OTHERS - APC MAHALAX MI COLLEGE FOR WOMEN TUTICORI N	MANOM NIAM SUNDAI AR UNIVER TY	RN 96.7	FIRST CLASS	
* Upload Sc	canned copy o	f Original Deg	gree Certifi	icate.				
I.a. Additic Score : File :	onal Qualific	ation :- NO A	DDITION	AL QUALIFIC	ATION			
II. Title of	Ph.D. Thesis	5						
III. Faculty	y in which Pl	n.D. was awa	rded					
IV. Acaden (<mark>Start fro</mark> i	nic Experien <mark>m the Curre</mark> i	ce : nt working E	xperience	;) *				
						Relieving Dat		erience

Name of the College	Name of the College Designation		Relieving Date / Current Date for Presently	Experience					
Name of the Conege	Designation	Joining Date	Working Institutions	Years	Months	Days			
CSI COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	07-08-2024	27-11-2024	0	3	21			
	Total 0 3 22								
V. Industrial Experience :									

Name of the	e Designation	Nature of Work	Joining Date	Relieving Date	Experience		
Organisatio	n	Nature of Work	Joining Date	Kellevilly Date	Years	Months	Days
	pointment Expe which service is (rience : extended for the co	nduct of Exminat	tion during the la	nst year		
AUR (No. of days)	Squad Member (No. of days)	External Exami (Practical) (No. of days)	(No. c	Evaluation of scripts luated)	(No.	valuation of scripts aluated)	
t is certified t	hat all the inform	ation provided are tru	ie to the best of m	y knowledge.			
		. Raja Lakshmi					
		·///// -/					

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	307640
Name of the Department	MECHANICAL ENGINEERING
Name of the Degree & Course	B.EGENERAL ENGINEERING
Name of the faculty member	MR. BRAINARD ABRAHAM C
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	12/40E, UPPER SHANTHOOR, KETTI
Line 2	OOTY - 643215
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 8667735191
Email	BRAIN5310@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	DGIPA7347K
Passport Number	
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	1-9607560626
Date of Birth	07-03-1994
Age	30
I. Particulars of Educational Qualification : (only comp	pleted)

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	tł Univ	ne of ne versit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		tificat e
U.G.	B.E.	MECHANI CAL ENGINEE RING	2017	CSI COLLEGE OF ENGINEE RING	ANNA UNIV TY		69.1	FIRST CLASS		An and a second
P.G.	M.E.	MANUFA CTURING ENGINEE RING	2019	CSI COLLEGE OF ENGINEE RING	ANNA UNIV TY		82.8	FIRST CLASS		Bullerauf Bullerauf
.a. Additic Score : File :	onal Qualific) ADDITION	IAL QUALIF	TICATIO	N				
II. Faculty	Ph.D. Thesis y in which Pl nic Experien m the Curre	h.D. was av ce :		e)*			eving Date	E	xperience	e
III. Faculty IV. Acaden (Start from	y in which Pl nic Experien	h.D. was av ce : nt working		e)*	Date	/ Cur for W	eving Date crent Date Presently /orking titutions	E Years	xperience Months	e Days
III. Faculty IV. Acaden (Start from	y in which Pl nic Experien m the Curren T the College EGE OF	h.D. was av ce : nt working	Experienc gnation			/ Cur for W Ins	rrent Date Presently /orking		-	
III. Faculty V. Acaden Start from Name of CSI COLLI	y in which Pl nic Experien m the Curren T the College EGE OF	h.D. was av ce : ht working Desi ASSIST/	Experienc gnation	Joining		/ Cur for W Ins	rrent Date Presently /orking titutions	Years	Months	Days
III. Faculty IV. Academ (Start from Name of CSI COLLI ENGINEE)	y in which Pl nic Experien m the Curren T the College EGE OF	h.D. was av ce : nt working Desi ASSISTA PROFES	Experienc gnation	Joining		/ Cur for W Ins	rrent Date Presently Vorking titutions -2024	Years 4	Months	Days 26
V. Academ (Start from Name of CSI COLLI ENGINEE) V. Industri Name of	y in which Pl nic Experien m the Curren f the College EGE OF RING al Experience the Dosign	h.D. was av ce : ht working Desi ASSISTA PROFES	Experienc gnation ANT SOR	Joining 03-01-202	20	/ Cui for X Ins 28-11	rrent Date Presently /orking titutions -2024 Total	Years 4 4	Months	Days 26 1
II. Faculty V. Academ Start from Name of CSI COLLI ENGINEE	y in which Pl nic Experien m the Curren f the College EGE OF RING al Experience the Dosign	h.D. was av ce : ht working Desi ASSISTA PROFES	Experienc gnation ANT SOR	Joining	20	/ Cui for X Ins 28-11	rrent Date Presently Vorking titutions -2024	Years 4 4	Months 10 10	Days 26 1
III. Faculty V. Academ Start from Name of CSI COLLI ENGINEE V. Industri Name of Organisat	y in which Pl nic Experien m the Curren f the College EGE OF RING al Experience the Dosign	h.D. was av ce : ht working Desi ASSIST/ PROFES	Experienc gnation ANT SSOR Jature of Work Ce :	Joining 03-01-202 Joining e conduct	20 Date	/ Cun for W Ins 28-11 Relia	rrent Date Presently /orking titutions -2024 Total eving Date	Years 4 4 4 Years F Years	Months 10 10 xperience Months	Days 26 1 Days



Name of the College	7106 - CSI COLLEGE OF ENGINEERING				
Faculty ID	306534				
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING				
Name of the Degree & Course	B.ECOMPUTER SCIENCE AND ENGINEERING				
Name of the faculty member	MS. RAMYA S				
Regular Or Adjunct	Regular				
Image					
Present Designation	ASSISTANT PROFESSOR				
Residential Address Line 1	44 BOGHI STREET, KANDAL				
Line 2	OOTY - 643006				
District	NILGIRIS				
Telephone number	-				
Mobile number	+91 - 8940999181				
Email	RAMYASHANKAR976@GMAIL.COM				
Gender	FEMALE				
Community	SC				
PAN Number	FVHPR3375C				
Passport Number					
Faculty code given by C.O.E.	7106201				
Faculty code given by A.I.C.T.E.	1-44722145585				
Date of Birth	27-01-2000				
Age	24				
I. Particulars of Educational Qualification : (only	completed)				

Category	Name of the Degree	Speciali tion	za Year of Passing	Name of the College	Name the Unive	e	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtain		ificat e
U.G.	B.E.	COMPUT R SCIENCE AND ENGINEI RING	2021	CSI COLLEGE OF ENGINEE RING	ANNA UNIVE TY	ERSI	76	FIRST CLASS		A constraints of the second se
P.G.	M.E.	COMPUT R SCIENCE AND ENGINEI RING	2023	CSI COLLEGE OF ENGINEE RING	ANNA UNIVE TY	ERSI	75	FIRST CLASS		A Construction of the second s
[:] Upload So	canned copy o	f Original	Degree Certifi	cate.						
I .a. Additio Score : File :	onal Qualific	ation :- N	O ADDITIONA	L QUALIF						
	Dh D Thosi	_								
III. Faculty	y in which P	n.D. was a	warded							
III. Faculty	y in which Pl nic Experien	n.D. was a ce :	warded g Experience)*						
III. Faculty IV. Acaden (Start from	y in which Pl nic Experien <mark>m the Curre</mark> i	n.D. was a ce : nt working	g Experience		a Data	/ Cu	ieving Date	, Ľ		e
IV. Acaden (<mark>Start fro</mark> i	y in which Pl nic Experien	n.D. was a ce : nt working			g Date	/ Cu for	-	, Ľ	Experience Months	e Days
III. Faculty IV. Acaden (Start from	y in which Pl nic Experien m the Curren f the College EGE OF	n.D. was a ce : nt working e D ASSIS	g Experience			/ Cu for V In	rrent Date Presently Vorking	, <u> </u>	-	
III. Faculty V. Academ Start from Name o	y in which Pl nic Experien m the Curren f the College EGE OF	n.D. was a ce : nt working e D ASSIS	g Experience esignation	Joinin		/ Cu for V In	rrent Date Presently Vorking stitutions	Years	Months	Days
III. Faculty V. Academ Start from Name o CSI COLLI ENGINEE	y in which Pl nic Experien m the Curren f the College EGE OF	n.D. was a ce : nt working e D ASSIS PROF	g Experience esignation	Joinin		/ Cu for V In	Presently Vorking stitutions	Years	Months	Days
III. Faculty IV. Academ (Start from Name o CSI COLLI ENGINEE) V. Industri	y in which Pl nic Experien m the Curren f the College EGE OF RING ial Experience	n.D. was a ce : nt working > D ASSIS PROF	g Experience esignation TANT ESSOR	Joinin 26-06-2	023	/ Cu for In 27-1	Presently Vorking stitutions 1-2024 Tota	Years 1 1 1 F	Months	Days 2 4
II. Faculty V. Academ Start from Name o CSI COLLI ENGINEE	y in which Pl nic Experien m the Curren f the College EGE OF RING ial Experience the Dociment	n.D. was a ce : nt working > D ASSIS PROF	g Experience esignation	Joinin 26-06-2		/ Cu for In 27-1	Presently Vorking stitutions	Years 1 1 1 F	5 5	Days 2 4
II. Faculty V. Academ Start from Name of CSI COLLI ENGINEE	y in which Pl nic Experien m the Curren f the College EGE OF RING ial Experience the tion Design Appointmen	n.D. was a ce : nt working e D ASSIS PROF	g Experience esignation TANT ESSOR	Joinin 26-06-2	023 g Date	/ Cu for In 27-1	Presently Norking stitutions 1-2024 Tota	Years Years 1 1 Vears F Years F Years	Months 5 5 Experience Months	Days 2 4



Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	306477
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING
Name of the Degree & Course	B.ECOMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MS. BUVANSHWARI G
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	343, KURUSHADI COLONY, KANDAL, FINGERPOST
Line 2	OOTY - 643006
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 6383373276
Email	BUVANACSICE@GMAIL.COM
Gender	FEMALE
Community	SC
PAN Number	DXVPB1182D
Passport Number	
Faculty code given by C.O.E.	7106210
Faculty code given by A.I.C.T.E.	1-44722145527
Date of Birth	01-06-2001
Age	23
I. Particulars of Educational Qualification : (only comple	eted)

(Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
τ	J.G.	B.E.	COMPUTE R SCIENCE AND ENGINEE RING	2022	CSI COLLEGE OF ENGINEE RING	ANNA UNIVERSI TY	76	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

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

File:

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

IV. Academic Experience :

(Start from the Current working Experience) \ast

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently	Е	xperience)	
Name of the Conege	Designation	Johning Date	Working Institutions	Years	Months	Days	
CSI COLLEGE OF ENGINEERING			27-11-2024	0	3	12	
	Tota						

V. Industrial Experience :

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

VI. C.O.E. Appointment Experience :

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

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

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



Signature of the Faculty :

Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	306567
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECHARTIFICIAL INTELLIGENCE AND DATA SCIENCE
Name of the faculty member	MR. JEEVAKUMAR S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	5/298, PERAR,T MAINAILAI POST
Line 2	OOTY -643002
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9080720028
Email	JEEVASAMIVEL7DS@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	СҒОРЈ3536Н
Passport Number	
Faculty code given by C.O.E.	7106206
Faculty code given by A.I.C.T.E.	1-44720677171
Date of Birth	03-09-1998
Age	26
I. Particulars of Educational Qualification : (only comp	leted)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	COMPUTE R SCIENCE AND ENGINEE RING	2021	CSI COLLEGE OF ENGINEE RING	ANNA UNIVERSI TY	76	FIRST CLASS	And Hairran

* Upload Scanned copy of Original Degree Certificate.

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

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently	Experience		9	
Name of the Coneye	Designation	Joining Date	Working Institutions	Years	Months	Days	
CSI COLLEGE OF ENGINEERING			27-11-2024	0	1	27	
	Tota						

V. Industrial Experience :

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

VI. C.O.E. Appointment Experience :

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

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

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



Signature of the Faculty :

Name of the College	7106 - CSI COLLEGE OF ENGINEERING				
Faculty ID	306624				
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING				
Name of the Degree & Course	B.ECOMPUTER SCIENCE AND ENGINEERING				
Name of the faculty member	MS. ANGELINE PEARL G P				
Regular Or Adjunct	Regular				
Image					
Present Designation	ASSISTANT PROFESSOR				
Residential Address Line 1	142 A, SHREE NIVAS, HOSPITAL ROAD				
Line 2	OOTY -643001				
District	NILGIRIS				
Telephone number	-				
Mobile number	+91 - 8946013011				
Email	ANGELINEPEARL22@GMAIL.COM				
Gender	FEMALE				
Community	BC				
PAN Number	EOAPA9050L				
Passport Number					
Faculty code given by C.O.E.					
Faculty code given by A.I.C.T.E.	1-44722145673				
Date of Birth	22-09-1999				
Age	25				
I. Particulars of Educational Qualification : (only com	pleted)				

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name the Unive	е	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtaine		tificat e
U.G.	B.E.	COMPUTE R SCIENCE AND ENGINEE RING	2021	CSI COLLEGE OF ENGINEE RING	ANNA UNIVE TY		83	FIRST CLASS		
P.G.	M.TECH.	OTHERS - COMPUTE R SCIENCE AND ENGINEE RING	2024	OTHERS - KARUNYA UNIVERSI TY	OTHEI KARUI UNIVE TY	NYA	88	DISTINO ON	CTI	
Upload Sc	canned copy o	Original De	gree Certifi	cate.						
II. Faculty V. Acaden Start from	Ph.D. Thesis y in which Ph nic Experience m the Currer	.D. was awa ce : t working I	Experience		Date	/ Cu	eving Date rrent Date Presently		Experienc	e
I. Title of II. Facult V. Acaden Start from	y in which Ph nic Experiend	.D. was awa ce : t working I) * Joining	Date	/ Cu for V			Experienc	e Days
I. Title of II. Faculty V. Academ Start from Name o	y in which Ph nic Experience m the Currer f the College EGE OF	.D. was awa ce : t working I	Experience gnation			/ Cu for V Ins	rrent Date Presently Vorking		-	
I. Title of II. Faculty V. Academ Start from Name o	y in which Ph nic Experience m the Currer f the College EGE OF	.D. was awa ce : t working I Desi	Experience gnation	Joining		/ Cu for V Ins	rrent Date Presently Vorking stitutions	Years 0	Months	Days
I. Title of II. Faculty V. Academ Start from Name o CSI COLLI ENGINEE	y in which Ph nic Experience m the Currer f the College EGE OF	.D. was awa ce : t working I Desi ASSISTA PROFES	Experience gnation	Joining		/ Cu for V Ins	rrent Date Presently Vorking stitutions 1-2024	Years 0	Months	Days 27
I. Title of II. Faculty V. Academ Start from Name o CSI COLLI ENGINEE	y in which Ph nic Experience m the Currer f the College EGE OF RING	a.D. was awa ce : t working I Desi ASSISTA PROFES e :	gnation NT SOR	Joining 01-11-202	24	/ Cu for V Ins 27-1	rrent Date Presently Vorking stitutions 1-2024 Total	Years 0 0 E	Months	Days 27 27
I. Title of II. Faculty V. Academ Start from Name o CSI COLLI ENGINEE	y in which Ph nic Experience m the Currer f the College EGE OF RING ial Experience the Decime	a.D. was awa ce : t working I Desi ASSISTA PROFES e :	Experience gnation	Joining 01-11-202	24	/ Cu for V Ins 27-1	rrent Date Presently Vorking stitutions 1-2024	Years 0 0 E	Months 0 0	Days 27 27
I. Title of II. Faculty V. Academ Start from Name o CSI COLLI ENGINEE /. Industri Name of Organisat /I. C.O.E.	y in which Ph nic Experience m the Currer f the College EGE OF RING ial Experience the Decime	a.D. was awa ce : t working I Desi ASSISTA PROFES e : tion Natu Experience	Experience gnation NT SOR ure of Work	Joining 01-11-202	24 T Date	/ Cu for V Ins 27-1 Reli	rrent Date Presently Vorking stitutions 1-2024 Total eving Date	Years 0 0 E Years Vears	Months 0 0 Cxperienc Months	Days 27 27



Name of the College	7106 - CSI COLLEGE OF ENGINEERING
Faculty ID	307771
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	B.EELECTRONICS AND COMMUNICATION ENGINEERING
Name of the faculty member	DR. CHANDRA SEKARAN R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	303/24/1, BAND LANE, BEHIND LIBERTY THEATRE
Line 2	OOTY - 643001
District	NILGIRIS
Telephone number	-
Mobile number	+91 - 9384440788
Email	CHANDRU_OSHO@CSICE.EDU.IN
Gender	MALE
Community	SC
PAN Number	АНЈРС4914Н
Passport Number	
Faculty code given by C.O.E.	7106109
Faculty code given by A.I.C.T.E.	1-506638111
Date of Birth	14-04-1978
Age	46
I. Particulars of Educational Qualification : (or	nly completed)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	ELECTRO NICS AND COMMUNI CATION ENGINEER ING	1999	RVS COLLEGE OF ENGINEER ING AND TECHNOL OGY (AUTONO MOUS)	MADURAI KAMARAJ UNIVERSI TY	65	FIRST CLASS	<section-header><section-header><section-header><text><text><text><text><text></text></text></text></text></text></section-header></section-header></section-header>
P.G.	M.E.	OPTICAL COMMUNI CATION	2005	ALAGAPPA CHETTIAR GOVERNM ENT COLLEGE OF ENGINEER ING AND TECHNOL OGY (AUTONO MOUS)	ANNA UNIVERSI TY	76	FIRST CLASS	
PH.D.	PH.D.	OTHERS - INFORMA TION AND COMMUNI CATION ENGINEER ING	2022	KPR INSTITUTE OF ENGINEER ING AND TECHNOL OGY (AUTONO MOUS)	ANNA UNIVERSI TY	Y		
* Upload Scanned copy of Original Degree Certificate.								
I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION Score : File :								
II. Title of	Ph.D. Thesis	S						

III. Faculty in which Ph.D. was awarded	FACULTY OF INFORMATION AND COMMUNICATION ENGINEERING
IV. Academic Experience : (Start from the Current working Experience) *	

Name of the College		Designation	Joining Date		Relieving Date / Current Date	Experience		
		Designation	Join	ing Date	for Presently Working Institutions	Years	Months	Days
MOUNT ZION OF ENGINEE TECHNOLOG	RING AND	OTHERS - LECTURER	28-07-2004		28-07-2004 05-11-2004		3	9
CSI COLLEGI ENGINEERIN		ASSISTANT PROFESSOR	09-10-2007		09-10-2007 28-11-2024		1	20
CSI COLLEGI ENGINEERIN	-	OTHERS - LECTURER	04-01-	2005	10-08-2007		7	7
SRI KRISHNA ENGINEERING COLLEGE		OTHERS - LECTURER	02-07-2001		30-08-2003	2	1	29
				Tota		22	2	6
V. Industrial	Experience :							
Name of the	Designation	Nature of Work	Ioin	ing Data	Relieving Date	Experience		
Organisation	n	Nature of Work	Joining Date		Relieving Date	Years	Months	Days
	pointment Exp hich service is Squad Member	erience : extended for the co External Exam (Practical)	iner	Central	tion during the Evaluation of scripts	Re-E	Valuation of scripts	
days)	, , , ,			Eva	Evaluated)			
It is certified t	hat all the inform	nation provided are tr	rue to tł	ne best of m	ıy knowledge.			
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