






Anna University, Chennai
Vel Tech Multi Tech Dr Rangarajan Dr Sakunthala Engineering College - 1131

13. Faculty

Name of the College	1131 - VEL TECH MULTI TECH DR RANGARAJAN DR SAKUNTHALA ENGINEERING COLLEGE
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.E. - CIVIL ENGINEERING
Name of the faculty member	MR. KATHIRAVAN A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	136/A, NORTH KANDIYAR STREET, EDA-MELAIYUR PO
Line 2	MANNARGUDI
District	THIRUVARUR
Telephone number	-
Mobile number	+91 - 9677866087
Email	KATHIRAVAN@VELTECHMULTITECH.ORG
Gender	MALE
Community	BC
PAN Number	DSSPK1535H
Passport Number	
Aadhar Number	675920575067
Faculty code given by C.O.E.	1131452
Faculty code given by A.I.C.T.E.	3536718101
Date of Birth	30-07-1993
Age	26
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
P.G.	M.E.	STRUCTURAL ENGINEERING	2017	MAHATHAMMA INSTITUTE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	88.75	DISTINCTION	
U.G.	B.E.	CIVIL ENGINEERING	2014	P R ENGINEERING COLLEGE	ANNA UNIVERSITY	72.21	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

IV. Academic Experience :

(Start from the Current working Experience) *

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
PONNAYAH RAMAJAYAM COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	07-07-2014	22-06-2015	0	11	16
VEL TECH MULTI TECH DR RANGARAJAN DR SAKUNTHALA ENGINEERING COLLEGE	ASSISTANT PROFESSOR	05-08-2017	14-02-2019	1	6	10
Total				2	5	27

V. Industrial Experience :

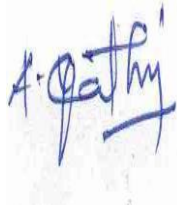
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

VI. C.O.E. Appointment Experience :

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

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

A handwritten signature in blue ink, appearing to read "A. Gathy". The signature is written in a cursive style with a horizontal line underneath the name.

Signature of the Faculty :