





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

13. Faculty

Name of the College	1131 - VEL TECH MULTI TECH DR RANGARAJAN DR SAKUNTHALA ENGINEERING COLLEGE (AUTONOMOUS)
Name of the Department	INFORMATION TECHNOLOGY
Name of the Degree & Course	B.TECH.-INFORMATION TECHNOLOGY
Name of the faculty member	MRS. SRI NANDHINI KOWSALYA S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	DOOR NO 1-141,KARUVALLI POST KADAYAMPATTI
Line 2	636305
District	SALEM
Telephone number	-
Mobile number	+91 - 9489856289
Email	SRINANDHINIKOWSALYA@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	MRKPS7068H
Passport Number	
Aadhar Number	693724403575
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	11318236042
Date of Birth	14-05-1991
Age	32
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2015	MAHENDRA INSTITUTE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.68	FIRST CLASS	
U.G.	B.E.	COMPUTER SCIENCE AND ENGINEERING	2012	MAHENDRA ENGINEERING COLLEGE (AUTONOMOUS)	ANNA UNIVERSITY	8.74	DISTINCTION	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
VEL TECH MULTI TECH DR RANGARAJAN DR SAKUNTHALA ENGINEERING COLLEGE (AUTONOMOUS)	ASSISTANT PROFESSOR	22-04-2022	30-03-2023	0	11	9
Total				0	11	9

V. Industrial Experience :

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

VI. C.O.E. Appointment Experience :

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

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

S. N. B. G.

Signature of the Faculty :
