




Name of the College	7304 - ERODE SENGUNTHAR ENGINEERING COLLEGE (AUTONOMOUS)
Name of the Department	ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the Degree & Course	B.E.-ELECTRICAL AND ELECTRONICS ENGINEERING
Name of the faculty member	MR. RAJAGOPAL R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	70,KAVUNDAMPALAYAM,THUDUPATHI-POST
Line 2	PERUNDURAI-638057
District	ERODE
Telephone number	-
Mobile number	+91 - 9994973383
Email	RRAJAGOPALEEEE@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	AVIPR4660A
Passport Number	
Aadhar Number	414667217219
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	9314787209
Date of Birth	11-12-1987
Age	37
I. Particulars of Educational Qualification : (only completed)	

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.E.	ELECTRICAL AND ELECTRONICS ENGINEERING (SS)(SW)	2009	ERODE SENGUNTHAR ENGINEERING COLLEGE (AUTONOMOUS)	ANNA UNIVERSITY	75	DISTINCTION	
P.G.	M.E.	POWER ELECTRONICS AND DRIVES	2012	PAAVAI ENGINEERING COLLEGE (AUTONOMOUS)	ANNA UNIVERSITY	8.18	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

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

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
OTHERS - KONGU VELALAR POLYTECHNIC COLLEGE	OTHERS - LECTURER	28-05-2009	31-05-2010	1	0	4
SASURIE COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	18-06-2012	25-05-2016	3	11	8
ERODE SENGUNTHAR ENGINEERING COLLEGE (AUTONOMOUS)	ASSISTANT PROFESSOR	01-07-2020	26-01-2024	3	6	26
Total				8	6	11

V. Industrial Experience :

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

VI. C.O.E. Appointment Experience :

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

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



Signature of the Faculty :