Name of the College	7304 - ERODE SENGUNTHAR ENGINEERING COLLEGE (AUTONOMOUS)				
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING				
Name of the Degree & Course	B.TECHARTIFICIAL INTELLIGENCE AND DATA SCIENCE				
Name of the faculty member	MR. MUTHUSAMY S				
Regular Or Adjunct	Regular				
Image					
Present Designation	ASSISTANT PROFESSOR				
Residential Address Line 1	RATTAMADI THOTTAM, THIRUMANATHAMPALAYAM,				
Line 2	SURIYAPAMPALAYAM,NAMBIYUR, GOBICHETTIPAYALAM				
District	ERODE				
Telephone number	-				
Mobile number	+91 - 9787169510				
Email	MUTHUSAMYBECSE@G				
Gender	MALE				
Community	BC				
PAN Number	CHNPM0302B				
Passport Number					
Aadhar Number	301072346734				
Faculty code given by C.O.E.					
Faculty code given by A.I.C.T.E.	9315432772				
Date of Birth	03-07-1988				
Age	36				
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.	COMPUTE R SCIENCE AND ENGINEE RING	2012	BANNARI AMMAN INSTITUT E OF TECHNOL OGY (AUTONO MOUS)	ANNA UNIVERSI TY	7.88 CGPA	FIRST CLASS	Again Mellerand
P.G.	M.E.	SOFTWAR E ENGINEE RING	2015	BANNARI AMMAN INSTITUT E OF TECHNOL OGY (AUTONO MOUS)	ANNA UNIVERSI TY	8.04CGPA	FIRST CLASS	Anna Minterrapy  The state of t

<sup>\*</sup> Upload Scanned copy of Original Degree Certificate.

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

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
SURYA ENGINEERING COLLEGE	ASSISTANT PROFESSOR	12-07-2018	30-09-2019	1	2	20
ERODE SENGUNTHAR ENGINEERING COLLEGE (AUTONOMOUS)	ASSISTANT PROFESSOR	02-01-2021	26-01-2024	3	0	25
			Total	4	3	16

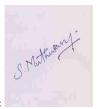
## V. Industrial Experience :

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

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

cupacity at which service is extended for the conduct of Exhibitation 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:**