Name of the College	7304 - ERODE SENGUNTHAR ENGINEERING COLLEGE (AUTONOMOUS)		
Name of the Department	CIVIL ENGINEERING		
Name of the Degree & Course	M.EENVIRONMENTAL ENGINEERING		
Name of the faculty member	MS. ABIRAMY R		
Regular Or Adjunct	Regular		
Image			
Present Designation	ASSISTANT PROFESSOR		
Residential Address Line 1	17/48, NADUPPALAYAM, GNANIPALAYAM POST, V.VELLODE VIA		
Line 2	ERODE-638112		
District	ERODE		
Telephone number	-		
Mobile number	+91 - 7402083367		
Email	CRABIRAMY@GMAIL.COM		
Gender	FEMALE		
Community	BC		
PAN Number	CWYPA0384D		
Passport Number			
Aadhar Number	286896967213		
Faculty code given by C.O.E.	7304		
Faculty code given by A.I.C.T.E.	14258349904		
Date of Birth	26-12-1993		
Age	31		
I. Particulars of Educational Qualification : (only con	npleted)		

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.	в.тесн.	OTHERS - ENERGY AND ENVIRON MENTAL ENGINEE RING	2015	OTHERS - TAMILNA DU AGRICULT URAL UNIVERSI TY	TAMIL NADU AGRICULT URAL UNIVERSI TY	76.3	FIRST CLASS	The state of the s
P.G.	M.E.	ENVIRON MENTAL ENGINEE RING	2018	ERODE SENGUNT HAR ENGINEE RING COLLEGE (AUTONO MOUS)	ANNA UNIVERSI TY	87.4	DISTINCT ION	ANALINTENTY  PROMISE COPPOSITOR  THE PROMISE COPPOSITO

<sup>\*</sup> 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 )  $\ensuremath{^*}$ 

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
ERODE SENGUNTHAR ENGINEERING COLLEGE (AUTONOMOUS)	ASSISTANT PROFESSOR	02-07-2018	25-01-2024	5	6	24
	5	6	27			

### V. Industrial Experience:

Name of the Organisation	Designation	Nature of	Joining Date	Relieving Date	Experience		
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						
No. of N	Squad Member o. of days)	External Examiner Central Evaluation Re-Evaluation (Practical) (No. of scripts (No. of scripts				

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

Signature of the Faculty: