




Name of the College	7304 - ERODE SENGUNTHAR ENGINEERING COLLEGE (AUTONOMOUS)
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING
Name of the Degree & Course	M.E.-APPLIED ELECTRONICS
Name of the faculty member	MR. BALAMURUGAN M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	4-294, PERUMAL KOVIL STREET
Line 2	MELAPALAYAM, CHENNIMALAI
District	ERODE
Telephone number	-
Mobile number	+91 - 8072067076
Email	BALAEER2013@GAMAIL.COM
Gender	MALE
Community	BC
PAN Number	ARYPB4801B
Passport Number	
Aadhar Number	455807771416
Faculty code given by C.O.E.	9225524
Faculty code given by A.I.C.T.E.	14526722884
Date of Birth	20-07-1985
Age	39
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	2006	M P NACHIMUTHU M JAGANATHAN ENGINEERING COLLEGE	ANNA UNIVERSITY	72	FIRST CLASS	
P.G.	M.E.	APPLIED ELECTRONICS	2009	SRI SIVASUBRAMANIYA NADAR COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	74	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
EXCEL COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	15-06-2015	25-10-2016	1	4	11
SURYA ENGINEERING COLLEGE	ASSISTANT PROFESSOR	13-07-2009	30-04-2012	2	9	19
V S B ENGINEERING COLLEGE (AUTONOMOUS)	ASSISTANT PROFESSOR	05-06-2018	30-04-2021	2	10	26
HINDUSTHAN COLLEGE OF ENGINEERING AND TECHNOLOGY(AUTONOMOUS)	ASSISTANT PROFESSOR	03-07-2017	16-05-2018	0	10	14
ERODE SENGUNTHAR ENGINEERING COLLEGE (AUTONOMOUS)	ASSISTANT PROFESSOR	01-07-2021	30-01-2024	2	6	30
Total				10	6	14

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 :