





Name of the College	7304 - ERODE SENGUNTHAR ENGINEERING COLLEGE (AUTONOMOUS)
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-ENGLISH
Name of the faculty member	MR. RAMESH BABU M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	18-23/1, MAMOODU
Line 2	UNDICHAL VILAI, KULASEKARAM
District	KANYAKUMARI
Telephone number	-
Mobile number	+91 - 9626534857
Email	BABU.RAMESH659@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BAKPR1518M
Passport Number	
Aadhar Number	227789650888
Faculty code given by C.O.E.	6208488
Faculty code given by A.I.C.T.E.	1751973316
Date of Birth	03-02-1985
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.A.	ENGLISH	2005	OTHERS - SRNM COLLEGE	MADURAI KAMARAJ UNIVERSITY	47	OTHERS - THIRD CLASS	
P.G.	OTHERS - MA	OTHERS - ENGLISH	2007	OTHERS - VHNSN COLLEGE	MADURAI KAMARAJ UNIVERSITY	63	FIRST CLASS	
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - ENGLISH	2008	OTHERS - THE MADURA COLLEGE	MADURAI KAMARAJ UNIVERSITY	67	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
GNANAMANI COLLEGE OF TECHNOLOGY (AUTONOMOUS)	ASSISTANT PROFESSOR	27-07-2009	26-06-2012	2	10	31
ERODE SENGUNTHAR ENGINEERING COLLEGE (AUTONOMOUS)	ASSISTANT PROFESSOR	26-10-2021	12-01-2024	2	2	18
GNANAMANI COLLEGE OF TECHNOLOGY (AUTONOMOUS)	ASSISTANT PROFESSOR	11-12-2017	25-08-2021	3	8	15
LATHA MATHAVAN ENGINEERING COLLEGE	OTHERS - LECTURER	11-06-2008	17-04-2009	0	10	7
ARIFA INSTITUTE OF TECHNOLOGY	ASSISTANT PROFESSOR	08-08-2014	30-11-2017	3	3	24
LOYOLA INSTITUTE OF TECHNOLOGY	OTHERS - LECTURER	04-07-2012	25-06-2014	1	11	22
Total				14	11	4

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)
		1	1	1

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

Signature of the Faculty : 