




Name of the College	7304 - ERODE SENGUNTHAR ENGINEERING COLLEGE (AUTONOMOUS)
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-MATHEMATICS
Name of the faculty member	MRS. DEEPA S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	11/352,MARUTHACHALAM THOTTAM
Line 2	KARATTUPALAYAM,ERODE-638457
District	ERODE
Telephone number	04294 - 232701
Mobile number	+91 - 9659777668
Email	SDEEPAMATH@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	AWHPD0675M
Passport Number	
Aadhar Number	338260571426
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	43989880894
Date of Birth	11-03-1986
Age	38
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.SC.	OTHERS - MATHEMATICS	2006	OTHERS - PKR ARTS AND SCIENCE COLLEGE FOR WOMEN	BHARATHI YAR UNIVERSITY	81	FIRST CLASS	
P.G.	M.SC.	OTHERS - MATHEMATICS	2008	OTHERS - PKR ARTS AND SCIENCE COLLEGE FOR WOMEN	BHARATHI YAR UNIVERSITY	86	FIRST CLASS	
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - MATHEMATICS	2011	OTHERS - PKR ARTS AND SCIENCE COLLEGE FOR WOMEN	BHARATHI YAR UNIVERSITY	62	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
ERODE SENGUNTHAR ENGINEERING COLLEGE (AUTONOMOUS)	ASSISTANT PROFESSOR	02-01-2024	25-01-2024	0	0	24
Total				0	0	24

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