






Name of the College	7304 - ERODE SENGUNTHAR ENGINEERING COLLEGE (AUTONOMOUS)
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	B.E.-COMPUTER SCIENCE AND ENGINEERING (CYBER SECURITY)
Name of the faculty member	DR. SURESH S M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	54, KAMARAJI ROAD, ATHANI
Line 2	ANTHIYUR-638502
District	ERODE
Telephone number	-
Mobile number	+91 - 8248333352
Email	SMSURESH026@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	JFHPS8935H
Passport Number	
Aadhar Number	673155764398
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	124695916516
Date of Birth	05-02-1992
Age	32
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 - PHYSICS	2012	OTHERS - GOBI ARTS AND SCIENCE COLLEGE	BHARATHIYAR UNIVERSITY	82.52	FIRST CLASS	
P.G.	M.SC.	OTHERS - PHYSICS	2014	OTHERS - NMSSVN COLLEGE	MADURAI KAMARAJ UNIVERSITY	65.1	FIRST CLASS	
P.G.	OTHERS - MPHIL	OTHERS - PHYSICS	2016	OTHERS - BHARATHIYAR UNIVERSITY	BHARATHIYAR UNIVERSITY	62.1	FIRST CLASS	
PH.D.	PH.D.	PHYSICS	2021	OTHERS - KALASALINGAM ACADEMY OF RESEARCH AND EDUCATION	OTHERS - KALASALINGMA UNIVERSITY	Y		

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

STRUCTURE STABILITY AND CATALYTIC ACTIVITY OF BINARY METAL OXIDE CLUSTERS A DFT STUDY

III. Faculty in which Ph.D. was awarded

FACULTY OF SCIENCE AND HUMANITIES

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	22-08-2022	12-01-2024	1	4	22
Total				1	4	24

V. Industrial Experience :

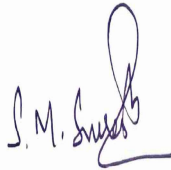
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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


Signature of the Faculty :