Name of the College	7304 - ERODE SENGUNTHAR ENGINEERING COLLEGE (AUTONOMOUS)				
Name of the Department	INFORMATION TECHNOLOGY				
Name of the Degree & Course	B.TECHINFORMATION TECHNOLOGY				
Name of the faculty member	MR. RAJKUMAR G				
Regular Or Adjunct	Regular				
Image					
Present Designation	ASSISTANT PROFESSOR				
Residential Address Line 1	NO 9,ASWATHI APPARTMENT, PUDHUR ROAD,				
Line 2	ODDANCHATRAM,624619				
District	DINDIGUL				
Telephone number	-				
Mobile number	+91 - 9629260999				
Email	GRAJKUMAR19@GMAIL.COM				
Gender	MALE				
Community	BC				
PAN Number	BKJPG7702F				
Passport Number					
Aadhar Number	676978323045				
Faculty code given by C.O.E.					
Faculty code given by A.I.C.T.E.	43383849506				
Date of Birth	19-12-1992				
Age	32				
I. Particulars of Educational Qualification : (only complete	d)				

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.	INFORMA TION TECHNOL OGY	2013	CHRISTIA N COLLEGE OF ENGINEE RING AND TECHNOL OGY	ANNA UNIVERSI TY	80	FIRST CLASS	Annual Bullistration of the Control
P.G.	M.E.	COMPUTE R SCIENCE AND ENGINEE RING	2016	R V S COLLEGE OF ENGINEE RING AND TECHNOL OGY	ANNA UNIVERSI TY	75	FIRST CLASS	And Multicrary And Andrews an

^{*} 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) $\mbox{*}$

	Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
			Johning Date		Years	Months	Days
	ERODE SENGUNTHAR ENGINEERING COLLEGE (AUTONOMOUS)	ASSISTANT PROFESSOR	01-07-2022	06-01-2024	1	6	6
	Total					6	9

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

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



Signature of the Faculty: