





Name of the College	7304 - ERODE SENGUNTHAR ENGINEERING COLLEGE (AUTONOMOUS)
Name of the Department	COMPUTER SCIENCE AND ENGINEERING
Name of the Degree & Course	M.TECH.-COMPUTER SCIENCE AND ENGINEERING (5 YEAR INTEGRATED)
Name of the faculty member	MR. MUTHUKUMARAN S
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	42, MAHALIAMMAMKOVIL STREET,
Line 2	KALAPPATI-641048
District	COIMBATORE
Telephone number	-
Mobile number	+91 - 8883143235
Email	SKUMARA@REDIFFMAIL.COM
Gender	MALE
Community	BC
PAN Number	BQOPM2975F
Passport Number	
Aadhar Number	473521725952
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	3372875242
Date of Birth	11-12-1978
Age	45
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 - CHEMISTRY	1999	OTHERS - RAJAPALAYAM RAJUS COLLEGE	MADURAI KAMARAJ UNIVERSITY	67.27	FIRST CLASS	
P.G.	M.SC.	OTHERS - SOFTWARE TECHNOLOGY AND MANAGEMENT	2001	OTHERS - MANONMANIAM SUNDARANAR UNIVERSITY	MANOMANIAM SUNDARANAR UNIVERSITY	70.55	FIRST CLASS	
P.G.	M.E.	OTHERS - INFORMATION TECHNOLOGY	2011	OTHERS - VINAYAGAM MISSIONS UNIVERSITY	OTHERS - VINAYAGAM MISSIONS UNIVERSITY	77.87	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	01-07-2022	26-05-2023	0	10	26
Total				0	10	1

V. Industrial Experience :

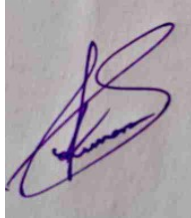
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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 :