Name of the College 7304 - ERODE SENGUNTHAR ENGINEERING CO (AUTONOMOUS)						
Name of the Department	COMPUTER SCIENCE AND ENGINEEERING					
Name of the Degree & Course	M.TECHCOMPUTER SCIENCE AND ENGINEERING (5 YEAR INTEGRATED)					
Name of the faculty member	DR. SARAVANAN K					
Regular Or Adjunct	Regular					
Image						
Present Designation	PROFESSOR					
Residential Address Line 1	91,R.S ROAD,PERUNDURAI					
Line 2	ERODE					
District	ERODE					
Telephone number 04294 - 222870						
Mobile number	+91 - 9994214792					
Email SARAVANANKUMARASANY@GMAIL.COM						
Gender MALE						
Community	ВС					
PAN Number	BZQPS0272N					
Passport Number						
Aadhar Number	965594470246					
Faculty code given by C.O.E.						
Faculty code given by A.I.C.T.E.	9315469901					
Date of Birth	16-05-1984					
Age	40					
I. Particulars of Educational Qualification : (only completed)						

Category	Name of the Degree	Specializat ion	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.E.	ELECTRONI CS AND COMMUNI CATION ENGINEERI NG	2005	MAHARAJA ENGINEERI NG COLLEGE	ANNA UNIVERSIT Y	75	DISTINCTIO N	And thinks by
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERI NG	2008	DR MAHALING AM COLLEGE OF ENGINEERI NG AND TECHNOLO GY (AUTONOM OUS)	ANNA UNIVERSIT Y	78.75	DISTINCTIO N	Burnelly Co. A continue of the continue of th
PH.D.	PH.D.	COMPUTER SCIENCE AND ENGINEERI NG	2015	KONGUNAD U COLLEGE OF ENGINEERI NG AND TECHNOLO GY (AUTONOM OUS)	ANNA UNIVERSIT Y	Y		Anna Bairready

^{*} Upload Scanned copy of Original Degree Certificate.

$\begin{tabular}{ll} \textbf{I.a. Additional Qualification} :- \begin{tabular}{ll} \textbf{NO ADDITIONAL QUALIFICATION} \\ \textbf{Score}: \end{tabular}$

File:

II. Title of Ph.D. Thesis	STATISTICAL ANOMALY TRAFFIC DETECTION OF DISTRIBUTED DENIAL OF SERVICE DDOS ATTACKS USING NEURO FUZZY BASED CLUSTERING
III. Faculty in which Ph.D. was awarded	FACULTY OF INFORMATION AND COMMUNICATION ENGINEERING
IV. Academic Experience : (Start from the Current working Experience) *	

Name of the Callege	Docimention	Isimin a Data	Relieving Date / Current Date	Experience		
Name of the Conege	Jame of the College Designation Joining Date		for Presently Working Institutions	Years	Months	Days
ERODE SENGUNTHAR ENGINEERING COLLEGE (AUTONOMOUS)	OTHERS - LECTURER	22-12-2008	30-06-2011	2	6	10
ERODE SENGUNTHAR ENGINEERING COLLEGE (AUTONOMOUS)	ASSOCIATE PROFESSOR	10-11-2020	30-06-2021	0	7	21
JAIRUPAA COLLEGE OF ENGINEERING	ASSOCIATE PROFESSOR	05-05-2017	30-10-2017	0	5	26
OTHERS - SHADAN WOMENS COLLEGE OF ENGINEERING AND TECHNOLOGY	PROFESSOR	01-11-2017	05-11-2020	3	0	5
ERODE SENGUNTHAR ENGINEERING COLLEGE (AUTONOMOUS)	PROFESSOR	01-07-2021	25-01-2024	2	6	25
ERODE SENGUNTHAR ENGINEERING COLLEGE (AUTONOMOUS)	ASSISTANT PROFESSOR	01-07-2011	04-05-2017	5	10	4
	Total	15	1	3		

V. Industrial Experience :

Name of the	Designation	Nature of	Ioining Date	Delicaing Date	Experience		
Organisation	Designation	Work Joining Date Relieving Da		Keneving Date	Years	Months	Days
MAX TWO COMPUTER SERVICES	SOFTWARE TRAINEE	TRAINING	08-06-2005	31-05-2006	0	11	23
Total						11	27

$\label{eq:VI.C.O.E.Appointment} \textbf{Experience:}$

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)
-	uays)	-	(No. of days)	Evaluated)	_

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



Signature of the Faculty: