Name of the College	9503 - GRACE COLLEGE OF ENGINEERING
Name of the Department	MATHEMATICS
Name of the Degree & Course	S&H-MATHEMATICS
Name of the faculty member	MR. RAMAN R
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	3B/401B, SANTHI NAGAR 1ST STREET, CHIDAMBARA NAGAR POST
Line 2	TUTICORIN, 628008
District	THOOTHUKUDI
Telephone number	-
Mobile number	+91 - 9791831011
Email	RRAMANRAM1988@GMAIL.COM
Gender	MALE
Community	MBC
PAN Number	BXHPR5776F
Passport Number	
Aadhar Number	469120938232
Faculty code given by C.O.E.	9503365
Faculty code given by A.I.C.T.E.	19381131405
Date of Birth	30-07-1988
Age	36
I. Particulars of Educational Qualification : (on	ly completed)

Category	Name of the Degree	Specializa tion	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.SC.	OTHERS - MATHEMA TICS	2008	OTHERS - G VENKATAS WAMY NAIDU COLLEGE KOVILPAT TI	MANOMA NIAM SUNDARN AR UNIVERSI TY	70	FIRST CLASS	And the second s
P.G.	M.SC.	OTHERS - MATHEMA TICS	2010	OTHERS - G VENKATAS WAMY NAIDU COLLEGE KOVILPAT TI	MANOMA NIAM SUNDARN AR UNIVERSI TY	84	DISTINCTI ON	And the second s
P.G.	OTHERS - M.PHIL	OTHERS - MATHEMA TICS	2011	OTHERS - SRI S RAMASAM Y NAIDU MEMORIA L COLLEGE SATTUR	MADURAI KAMARAJ UNIVERSI TY	75	FIRST CLASS	

<sup>\*</sup> 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	E	xperience	
Name of the Conege	Designation	Joining Date	Working Institutions	Years Months	Months	Days
GRACE COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	19-02-2018	23-02-2024	6	0	5
INFANT JESUS COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	16-07-2013	19-06-2015	1	11	4
			Total	7	11	14

V. Industrial Experience :	
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Name of th Organisatio	Hocianation	Nature of Work	Joining Date	Relieving Date	Experience Years   Months   Days		
					Tears	Months	Days
-	ppointment Expe which service is	rience : extended for the co	onduct of Exmina	tion during the l	ast yeaı	•	
AUR Squad (No. of Member		External Exami		Central Evaluation (No. of scripts Evaluated)		Re-Evaluation (No. of scripts Evaluated)	
(No. of	-	(Dwa stical)	(3.7	(No. of scripts		- ·	
days)		(Practical) (No. of days		-		-	<b>.</b>
days)	(No. of days)	· ·	) Eva	luated)		-	
days)	(No. of days)	(No. of days	) Eva	luated)		-	
days)	(No. of days)	(No. of days	) Eva	luated)		-	
days)	(No. of days)	(No. of days	) Eva	luated)		-	