






**Anna University, Chennai**  
**Jayaram College of Engineering and Technology - 8114**

**13. Faculty**

<b>Name of the College</b>	8114 - JAYARAM COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	MASTER OF COMPUTER APPLICATIONS
<b>Name of the Degree &amp; Course</b>	M.C.A. - MASTER OF COMPUTER APPLICATIONS
<b>Name of the faculty member</b>	MRS. SHANTHI R
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	4A, 17 TH WARD UDAYARPALAYAM
Line 2	THAMMAMPATTI
<b>District</b>	SALEM
<b>Telephone number</b>	-
<b>Mobile number</b>	+91 - 7639061880
<b>Email</b>	SHANTHIPRIYA_1983@YAHOO.CO.IN
<b>Gender</b>	FEMALE
<b>Community</b>	MBC
<b>PAN Number</b>	CJQPS4006P
<b>Passport Number</b>	
<b>Aadhar Number</b>	555029857113
<b>Faculty code given by C.O.E.</b>	8114401
<b>Faculty code given by A.I.C.T.E.</b>	
<b>Date of Birth</b>	25-05-1983
<b>Age</b>	35
<b>I. Particulars of Educational Qualification : (only completed)</b>	

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
P.G.	M.C.A.	MASTER OF COMPUTER APPLICATIONS	2007	JAYARAM COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	77	DISTINCTION	
U.G.	B.SC.	OTHERS - MATHEMATICS	2004	OTHERS - HOLY CROSS COLLEGE TRICHY	BHARATHI DASAN UNIVERSITY	81	DISTINCTION	

\* 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
JAYARAM COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	20-07-2016	03-01-2018	1	5	15
SRINIVASAN ENGINEERING COLLEGE	OTHERS - LECTURER	18-06-2007	24-05-2010	2	11	7
ROEVER ENGINEERING COLLEGE	ASSISTANT PROFESSOR	01-06-2010	28-12-2010	0	6	28
<b>Total</b>				<b>4</b>	<b>11</b>	<b>23</b>

**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 :**