

Anna University, Chennai PET Engineering College - 9632

13. Faculty

Name of the College	9632 - PET ENGINEERING COLLEGE				
Name of the Department	ELECTRONICS AND COMMUNICATION ENGINEERING				
Name of the Degree & Course	B.EELECTRONICS AND COMMUNICATION ENGINEERING				
Name of the faculty member	MRS. PADMA S.I				
Regular Or Adjunct	Regular				
Image					
Present Designation	ASSOCIATE PROFESSOR				
Residential Address Line 1	17/50, SANNATHI STREET, GANAPATHIPURAM				
Line 2	GANAPATHIPURAM POST-629502				
District	KANYAKUMARI				
Telephone number	04652 - 245274				
Mobile number	+91 - 9943336959				
Email	SAGARPADMA09@GMAIL.COM				
Gender	FEMALE				
Community	ВС				
PAN Number	AWSPP1344A				
Passport Number					
Aadhar Number	496639678622				
Faculty code given by C.O.E.	9632063				
Faculty code given by A.I.C.T.E.	11442088172				
Data of Dial.	27-07-1986				
Date of Birth	•				

Category	Name of the Degree	Specializa tion	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
P.G.	M.E.	COMMUN ICATION SYSTEMS	ON 2012 E OF U		ANNA UNIVERSI TY	8.28	FIRST CLASS	3 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
U.G.	B.E.	ELECTRO NICS AND COMMUN ICATION ENGINEE RING	2007	C S I INSTITUT E OF TECHNOL OGY	ANNA UNIVERSI TY	81	DISTINCTI ON	

^{*} 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	Experience		
Name of the Conege	College Designation Joining Da		Working Institutions	Years	Months	Days
PET ENGINEERING COLLEGE	OTHERS - LECTURER	11-07-2007	31-08-2010	3	1	21
PET ENGINEERING COLLEGE	ASSISTANT PROFESSOR	01-09-2010	28-02-2022	11	5	30
PET ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	01-03-2022	09-02-2024	1	11	9
	Total					1

V. Industrial Experience :

Name of the	Designation	esignation Nature of Work Joining Date Relieving Date	Daliaring Data	Experience		
Organisation	Designation		Joining Date	Relieving Date	Years	Months

Capacity at which service is extended for the conduct of Exmination during the last year

AUR Squad (Pro	Central Evaluation (No. of scripts of days) Evaluated) 250	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:

