



**LOURDES MOUNT**  
**COLLEGE OF ENGINEERING & TECHNOLOGY**  
Run by Chellammal Educational Trust  
Mullanganavilai, Marthandam-Karungal Road  
Kanyakumari Dist., Pin: 629 195

**AICTE Mandatory Disclosure**

Mandatory disclosure : Updated on 19/03/2024

**1. AICTE File No** : Southern / 1-36222731800/2023/EOA

Date & Period of Last approval : 15.05.2023-For 2023-2024

**2. NAME OF THE INSTITUTION**

Name of the Institution : LOURDES MOUNT COLLEGE OF ENGINEERING & TECHNOLOGY

Address of the Institution : Chundavilai, Mullanganavilai, Marthandam-Karungal Road  
Kanyakumari District, Tamilnadu

City & Pin code : Marthandam & 629 195

State/UT : Tamilnadu

Phone number with STD code : 04651-267733, 04651-266744, 04651-267735

Fax number with STD code : 04651-267733

Office hours at the Institution : 9.00 a.m to 5 p.m

Academic hours at the Institution : 9.00 a.m to 4.00 p.m

Email : lourdes.mount@gmail.com

Website : www.lourdesmountcollege.com

Nearest Railway Station (dist in Km) : 4KM

Nearest Airport (dist in Km) : 40KM

### 3. Type of Institution

Type of Institution : Private-Self Financed  
Category (1) of the Institution : Non-Minority  
Category (2) of the Institution : Co-Ed

### 4. Name of the Organization running the Institution

Name of the Organization running the Institution : CHELLAMMAL EDUCATIONAL TRUST  
Type of the Organization : Trust  
Address of the Organization : NO.26 Dr.Ambedkar Road,  
Kodambakkam, Chennai.  
Registered with : Sub-Registrar, Kodambakkam  
Registered Date : 06/06/2008  
Website of the Organization : www.chellammaleducationaltrust.com

### 5. Name of the Affiliating University

Name of the Affiliating University : Anna University, Chennai  
Address : Guindy, Chennai – 600 025.  
Website : www.annauniv.edu  
Latest affiliation period : 2023 - 2024

### 6. Name of the Principal/Director

Name of the Principal/Director : Dr.S.S.Vinsley  
Exact Designation : Principal  
Phone Number with STD code : 04651-266744  
Fax number with STD code : 04651-267733  
Email : vinsleyss@gmail.com  
Highest Degree : Ph.D  
Field of Specialization : Electronics and Communication

### 7. Governing Board Members

S.NO	Name	Category	Designation
1.	Sri. P.Lawrence	Management	Chairman
2.	Sri.C.Augustin	Management	Members
3.	Sri. A.JohnBosco	Management	Members
4.	Smt. L.ShalinJency	Management	Members
5.	Sri.A.AntoineBerty	Management	Members
6.	Sri.M.S.Ramasubramaniam	Management	Members
7.	Dr.S.S.Vinsley	Academic	Principal

Frequency of meetings & Date of last Meeting: Once in a Year.

## 8. Planning and Monitoring Board Members

S.No	CATEGORY	DESIGNATION	NAME
1.	Principal	Chairman	Dr.S.S.Vinsley
2.	Senior Faculty Member of the College	Member	Smt.K.Kalpana
3.	Senior Faculty Member Of the college	Member	Sri. D. Rajan
4.	Senior Faculty Member from University/other College	Member	Sri. Antony Robert
5.	Industrial expert in the field of engineering and technology	Member	Smt. A. Subella
6.	Industrial expert in the field of engineering and technology	Member	Sri. John de Britto
7.	Architect/ Civil engineer	Member	Sri. Isaiyas

Frequency of meetings & Date of last Meeting: Twice in a Year

## 9. Grievance redressal mechanism for faculty, staff and students

- System for Redressal of grievances of faculty, staff and students
- The management of the college follows an open system of administration and grievances from staff and students are given the utmost attention.
- Complaints and suggestion boxes are kept at a number of places in the campus.
- The suggestions and Complaints are carefully looked into and remedial measures undertaken, Responses are also publicized through notice boards.
- In case of Indiscipline, a committee appointed by the principal enquires into the matter by calling witnesses and recommendations are made about the action to be taken by the management.
- Grievances regarding the staff in terms of salary, promotions etc., are carefully looked into by the HR Department in consultation with the secretary and remedial measures taken.
- Class Committee meetings are held in which grievances of students are taken note of and remedial measures taken.
- A Students welfare officer looks in the welfare of the students and advises the management for necessary action.

## Establishment of Anti ragging Committee:

The antiragging committee members are constituted as follows.

Sl No	Committee Type	Appointment Order Reference No.	Date of Appointment	Name of the Committee member	Profession	Mobile No.	E-Mail Address
1	Anti-Ragging Committee	LMCE/ARC/14/1	1/2/2023	DR VINSLEY S.S	PRINCIPAL	9443692427	vinsleyss@gmail.com
2	Anti-Ragging Committee	LMCE/ARC/14/3	1/2/2023	SURESH KUMAR . S	INSPECTOR	9751398833	sureshsk85@gmail.com
3	Anti-Ragging Committee	LMCE/ARC/14/4	1/2/2023	RAJA SEKCHARAN . T	DEPUTY THASILDOR	9442574540	rajasekhar@gmail.com
4	Anti-Ragging Committee	LMCE/ARC/14/5	1/2/2023	VICTOR BENJAMIN . J	OFFICIAL OF NGO	9443606166	v.benjamin@gmail.com
5	Anti-Ragging Committee	LMCE/ARC/14/6	1/2/2023	DEVADHAS . F	ACCOUNTANT	9488881302	deva.f@gmail.com
6	Anti-Ragging Committee	LMCE/ARC/14/8	1/2/2023	ANU	LAB INSTRUCTOR	9150427695	anustanley@gmail.com
7	Anti-Ragging Committee	LMCE/ARC/14/2	1/2/2023	MANISHA MOL	STUDENT	9940962199	manishamolece@gmail.com
8	Anti-Ragging Committee	LMCE/ARC/14/7	1/2/2023	ABHIJITH V S	STUDENT	9778292069	ashlinmonishaashlin@gmail.com
9	Anti-Ragging Squad	LMCE/ARS/14/1	1/2/2023	DR VINSLEY S.S	PRINCIPAL	9443692427	vinsleyss@gmail.com
10	Anti-Ragging Squad	LMCE/ARS/14/2	1/2/2023	MR. GODWIN M	HOD/ MECHANICAL ENGINEERING	9698499345	godwin@gmail.com
11	Anti-Ragging Squad	LMCE/ARS/14/3	1/2/2023	MR. ARUN S J	HOD/CIVIL ENGINEERING	7502748843	arun@gmail.com
12	Anti-Ragging Squad	LMCE/ARS/14/4	1/2/2023	RAJAN	HOD/MATHS	9487116933	rajanmaths@gmail.com
13	Anti-Ragging Squad	LMCE/ARS/14/5	1/2/2023	BREESHA S R	HOD/ELECTRICAL & ELECTRONICS	9488900951	lmceeeehod@gmail.com
14	Anti-Ragging Squad	LMCE/ARS/14/6	1/2/2023	REEDA LEENUS	HOD/CHEMISTRY	8903706067	reedaleenus@gmail.com
15	Anti-Ragging Squad	LMCE/ARS/14/7	1/2/2023	MERLIN THAYA S V	HOD/PHYSICS	9787693901	merlinthaya@gmail.com
16	Anti-Ragging Squad	LMCE/ARS/14/8	1/2/2023	MRS. MARIYA LISSY	LAB INSTRUCTOR	9488507012	lissy@gmail.com

## Establishment of Online Grievance Redressal Committee:



Create - Lourdes Mount College

Not secure | lourdesmountcollege.com/gv\_student/Create

Gmail YouTube Translate LMCET | CMS - Login eSkilledia - eLearn... ISO 27001 Require... Cisco Email and We... Free ISO 27001 Tra... Adversara eTraining Essay Writing Softw... Free Online Word C...

**Lourdes Mount**  
College of Engineering & Technology  
Approved by AICTE, New Delhi & Affiliated to Anna University, Chennai

Call us today 04551-267785 & 9841511400 | lourdesmount@gmail.com

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## Student

You are here: Home > Grievances > Student

Name

Roll No

Department

Mobile

E-Mail

Send message

## Details of Grievance Redressal Committee in the Institution and OMBUDSMAN by the university:

This committee has been formed at Lourdes Mount College of Engineering and Technology, Mullanganavilai in order to ensure transparency, imparting technical education, admissions and with paramount objective of preventing unfair practices and to provide a mechanism to innocent students for redressal of their grievances. As per the Clause 5 of the above Regulation made by the AICTE, the proceeding concerning each grievance will be recorded in a systematic manner. The information relating to the proceedings shall be treated as confidential and can be viewed only by the members of Grievance Redressal Committee, for the purpose of investigation. The Chair person and every Member of the Internal Committee shall hold office for such period, not exceeding two years, from the date of nomination. The Committee, comprised of the following members.

S.NO	FACULTY NAME	DESIGNATION	REMARKS
1	MR. RAJAN	PROFESSOR	CHAIRPERSON
2	DR. BRESHA	HOD	MEMBER
3	MRS. KALPANA	HOD	MEMBER
4	MR. GODWIN	HOD	MEMBER
5	MR. ARUN	HOD	MEMBER
6	MS. KEZIAH BLESSY	STUDENT	SPECIAL INVITEE



## Establishment of Internal Committee:

The Internal Complaint committee members are constituted as follows.

Sl No.	Committee Type	Appointment Order Reference No.	Date of Appointment	Name of the Committee member	Profession	Associated With	Mobile No.	E-Mail Address	Designation	Gender
1	COMPLAINT COMMITTEE	LMCET/ICC/01/23	6/1/2023	DR. BREESHA	CHAIR PERSON	EEE	9443692427	breesha21@gmail.com	HOD	FEMALE
2	COMPLAINT COMMITTEE	LMCET/ICC/02/23	6/1/2023	MRS. KALPANA	MEMBER	CSE	7738045500	kalpanaclement23@gmail.com	TEACHING FACULTY	FEMALE
3	COMPLAINT COMMITTEE	LMCET/ICC/03/23	6/1/2023	ASHLIN MONISHA	STUDENT	CSE	9778292069	ashlinmonishashlin@gmail.com	STUDENT	FEMALE
4	COMPLAINT COMMITTEE	LMCET/ICC/04/23	6/1/2023	AARTHY AMSALEKHA SIVAKAMIS	MEMBER	CSE	8056417982	aarthiyassd@gmail.com	TEACHING FACULTY	FEMALE
5	COMPLAINT COMMITTEE	LMCET/ICC/05/23	6/1/2023	VINOJA C	MEMBER	ACCOUNTANT	9445111180	vinoja.priya@gmail.com	NON TEACHING FACULTY	FEMALE
6	COMPLAINT COMMITTEE	LMCET/ICC/06/23	6/1/2023	MRS. MARIYA LISSY	MEMBER	LAB INSTRUCTOR	9488507012	lissy@gmail.com	NON TEACHING FACULTY	FEMALE
7	COMPLAINT COMMITTEE	LMCET/ICC/07/23	6/1/2023	ALEX BERMIN	STUDENT	EEE	9787016289	alexbermin@gmail.com	STUDENT	MALE
8	COMPLAINT COMMITTEE	LMCET/ICC/08/23	6/1/2023	SHANESS THRISHA	STUDENT	ECE	9952555977	shanessthrisha@gmail.com	STUDENT	FEMALE

## Establishment Committee for SC/ST:

SC/ST Committee members of constitute as follows

Sl. No.	Committee Type	Appointment Order Reference No.	Date of Appointment	Name of the Committee member	Profession	Associated With	Mobile No.	E-Mail Address	Caste	Gender
1	SC/SC COMMITTEE	LMCET/SC/ST/01/24	3/1/2024	DR. VINSLEY S S	CHAIR PERSON	PRINCIPAL	9443692427	lmcetprincipal@gmail.com	OTHER	MALE
2	SC/SC COMMITTEE	LMCET/SC/ST/02/24	3/1/2024	BIFRIN SAMUEL	MEMBER	ECE	9488160281	bifjai07@gmail.com	OTHER	MALE
3	COMMITTEE	LMCET/SC/ST/03/24	3/1/2024	MANISHA MOL M S	STUDENT	ECE	7539955381	manishamolece@gmail.com	SC	FEMALE
4	SC/SC COMMITTEE	LMCET/SC/ST/04/24	3/1/2024	SANTHOSH A	STUDENT	CSE	9600634637	santhosh@gmail.com	SC	MALE
5	SC/SC COMMITTEE	LMCET/SC/ST/05/24	3/1/2024	VISHAL	STUDENT	CSE	9843452087	vishal@gmail.com	SC	MALE

## Internal Quality Assurance Cell:

The internal quality assurance cell was established to initiate, monitor, evaluate and report on relevant measures to upgrade the quality of teaching, learning, evaluation and research initiatives, in the campus. The primary task of the IQAC is to develop a system for conscious, consistent, and catalytic improvement in the overall performance of institutions and to promote measures for institutional functioning towards quality enhancement through internalization quality culture and intuition of best practice.

The Internal Quality Assurance cell of Lourdes mount college of engineering & technology is constituted with the following members as per the regulation of AICTE.

Sl No	Committee Type	Appointment Order Reference No.	Date of Appointment	Name of the Committee member	Profession	Position
1	IQA Cell	LMCE/IQAC/14/1	9/8/2023	DR VINSLEY S.S	PRINCIPAL	CHAIRMAN
2	IQA Cell	LMCE/IQAC/14/2	9/8/2023	MRS. MERLIN THAYA	AP/PHYSICS	CONVENOR
3	IQA Cell	LMCE/IQAC/14/3	9/8/2023	MRS. REEDA LEENUS	AP/CHEMISTRY	MEMBER
4	IQA Cell	LMCE/IQAC/14/4	9/8/2023	MS. ABISHA MOL	AP/CIVIL	MEMBER
5	IQA Cell	LMCE/IQAC/14/5	9/8/2023	MRS. ANU MOL	AP/ENGLISH	MEMBER
6	IQA Cell	LMCE/IQAC/14/6	9/8/2023	MRS. JAYA ROSY	AP/CSE	MEMBER
7	IQA Cell	LMCE/IQAC/14/7	9/8/2023	DR. NISHA	AP/EEE	MEMBER
8	IQA Cell	LMCE/IQAC/14/8	9/8/2023	MR. GODWIN G	AP/MECH	MEMBER
9	IQA Cell	LMCE/IQAC/14/9	9/8/2023	MRS. JENILA	AP/MATHS	MEMBER

### Equal Opportunity Cell:

The equal opportunity cell of Lordes Mount college of Engineering and Technology constituted with following members:

1. Dr.S.S.Vinsley , Chairperson
2. Mr.Rajan, HoD / S&H
3. Dr.Breesha, HoD / EEE
4. Mrs. Kalpana, HoD / CSE
5. Mr.Arun, HoD / CIVIL
6. MRs.Godwin M, HoD / MECH

### Programmes:

Name of the Programmes approved by AICTE: 5

Total number of courses:

Name	Number of Seats	Duration
Computer Science and Engineering	60	4 years
Civil Engineering	30	4 years
Electronics and Communications Engineering	30	4 years
Electrical and Electronics Engineering	30	4 years
Mechanical Engineering	60	4 years

Fee as approved by the State Government: 50,000/

## Department wise Details

Mechanical Engineering

Electrical and Electronics Engineering

Electronics and Communication Engineering

Computer Science and Engineering

Civil Engineering

### MECHANICAL ENGINEERING

S.No	Semester	Sub.Code	Subject
1	1	BS8161	Physics and Chemistry Laboratory
		GE8161	Problem Solving and Python Programming Laboratory
2	2	GE8261	Engineering Practices Laboratory
		BE8261	Basic Electrical, Electronics and Instrumentation Engineering Laboratory
3	3	ME8361	Manufacturing Technology Laboratory– I
		ME8381	Computer Aided Machine Drawing
		EE8361	Electrical Engineering Laboratory
4	4	ME8462	Manufacturing technology laboratory II
		CE8381	Strength of materials and fluid mechanics and machinery laboratory
5	5	ME8511	Kinematics and dynamics Laboratory
		ME8512	Thermal Engineering Laboratory
		ME8513	Metrology & Measurements Laboratory
6	6	ME8681	CAD / CAM Laboratory
7	7	ME8781	Mechatronics Lab
		ME8711	Simulation and Analysis Laboratory

### ELECTRICAL AND ELECTRONICS ENGINEERING

S.No	Semester	Sub.Code	Subject
1	1	BS8161	Physics and Chemistry Laboratory
		GE8161	Problem Solving and Python Programming Laboratory
2	2	GE8261	Engineering Practices Laboratory
		EE8261	Electric Circuits Laboratory
3	3	EC8311	Electronics Laboratory
		EE8311	Electrical machines laboratory I
4	4	EE8411	Electrical machines laboratory II
		EE8461	Linear and digital integrated circuits laboratory
5	5	CS8383	Object oriented programming laboratory
		EE8511	Control and instrumentation laboratory
6	6	EE8661	Power Electronics and Drives Laboratory
		EE8681	Microprocessors and Microcontrollers Laboratory
		EE8711	Power system simulation laboratory
7	7	EE8712	Renewable energy systems laboratory

### ELECTRONICS AND COMMUNICATION ENGINEERING

S.No	Semester	Sub.Code	Subject
1	1	BS8161	Physics and Chemistry Laboratory
		GE8161	Problem Solving and Python Programming Laboratory
2	2	EC8261	Circuits and Devices Laboratory
		GE8261	Engineering Practices Laboratory
3	3	EC8361	Analog & Digital Circuits Laboratory



		EC 8381	Fundamentals of data structures in c laboratory
4	4	EC8461	Circuits & Simulation Integrated Laboratory
		EC8462	Linear Integrated Circuits Laboratory
5	5	EC 8562	Digital Signal Processing Laboratory
		EC 8561	Communication Systems Laboratory
		EC 8563	Communication networks Laboratory
6	6	EC8681	Microprocessor and microcontroller laboratory
		EC8661	VLSI Design Laboratory
7	7	EC8761	Advanced communication laboratory
		EC8711	Embedded Laboratory

## COMPUTER SCIENCE AND ENGINEERING

S.No	Semester	Sub.Code	Subject
1	1	BS8161	Physics and Chemistry Laboratory
		GE8161	Problem Solving and Python Programming Laboratory
2	2	GE8261	Engineering Practices Laboratory
		CS8261	C Programming Laboratory
3	3	CS 8381	Data structures Laboratory
		CS 8382	Digital System Laboratory
		CS8383	Object oriented programming laboratory
4	4	CS8481	Database management systems Laboratory
		CS8461	Operating systems Laboratory
5	5	CS8581	Networks laboratory
		EC8681	Microprocessor and microcontroller laboratory
		CS8582	Object oriented analysis and design Laboratory
6	6	CS8661	Internet programming Laboratory
		CS8662	Mobile application development Laboratory
7	7	CS8711	Cloud Computing Laboratory
		IT8761	Security Laboratory


## CIVIL ENGINEERING

S.No	Semester	Sub.Code	Subject Mobile application development Laboratory
1	1	BS8161	Physics and Chemistry Laboratory
		GE8161	Problem Solving and Python Programming Laboratory
2	2	GE8261	Engineering Practices Laboratory
		CE8211	Computer Aided Building Drawing
3	3	CE8361	Surveying laboratory
		CE8311	Construction materials Laboratory
4	4	CE8481	Strength of Materials Laboratory
		CE8461	Hydraulic Engineering Laboratory
5	5	CE8512	Water and waste water analysis laboratory
		CE8511	Soil mechanics laboratory
6	6	CE8611	Highway engineering laboratory




10.



**Faculty**  
**Anna University, Chennai**  
**Lourdes Mount College of Engineering and Technology -**  
**9636**

<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	ELECTRONICS AND COMMUNICATION ENGINEERING
<b>Name of the Degree &amp; Course</b>	B.E.-ELECTRONICS AND COMMUNICATION ENGINEERING
<b>Name of the faculty member</b>	DR. VINSLEY S.S
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	PRINCIPAL
<b>Residential Address</b> Line 1	7/63, PARAMPU VILAI
Line 2	KEEZHKULAM POST, KANYAKUMARIDT-629193
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	04651 - 266744
<b>Mobile number</b>	+91 - 9443692427
<b>Email</b>	VINSLEYSS@GMAIL.COM
<b>Gender</b>	MALE
<b>Community</b>	BC
<b>PAN Number</b>	BERPS1554M
<b>Passport Number</b>	
<b>Aadhar Number</b>	252375728698
<b>Faculty code given by C.O.E.</b>	9636001
<b>Faculty code given by A.I.C.T.E.</b>	2299647528
<b>Date of Birth</b>	22-03-1976
<b>Age</b>	47

**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.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	1997	OTHERS - ARULMIGU KALASALINGAM COLLEGE OF ENGINEERING	MADURAI KAMARAJ UNIVERSITY	66.5	FIRST CLASS	
P.G.	M.E.	COMMUNICATION SYSTEMS	1998	MEPCO SCHLENK ENGINEERING COLLEGE (AUTONOMOUS)	MADURAI KAMARAJ UNIVERSITY	69.5	FIRST CLASS	
PH.D.	PH.D.	COMMUNICATION SYSTEMS	2010	OTHERS - MANOMANIAM SUNDARANAR	MANOMANIAM SUNDARANAR UNIVERSITY	Y		

\* Upload Scanned copy of Original Degree Certificate.

**I.a. Additional Qualification :-** NO ADDITIONAL QUALIFICATION  
Score :  
File :

**II. Title of Ph.D. Thesis**

STUDY AND ANALYSIS OF VARIOUS DEMOSAICING ALGORITHMS AND DESIGN OF A NOVEL CLASS OF DEMOSAICING ALGORITHM FOR SINGLE SENSOR ARRAY CAMERA IMAGES

**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 College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
JAYAMATHA ENGINEERING COLLEGE	ASSISTANT PROFESSOR	23-02-1999	03-01-2005	5	10	9
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	PRINCIPAL	14-06-2013	19-05-2023	9	11	6
NARAYANAGURU COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	06-01-2005	31-03-2010	5	2	26
NARAYANAGURU COLLEGE OF ENGINEERING	PROFESSOR	01-04-2010	13-06-2013	3	2	13
<b>Total</b>				24	2	26

#### 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 :



<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	ELECTRICAL AND ELECTRONICS ENGINEERING
<b>Name of the Degree &amp; Course</b>	B.E.-ELECTRICAL AND ELECTRONICS ENGINEERING
<b>Name of the faculty member</b>	DR. BREESHA S.R
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	6/18, C.P.N ILLAM, PARAMBU VILAI
Line 2	PALLIYADI POST - 629169
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	04651 - 268681
<b>Mobile number</b>	+91 - 9488900951
<b>Email</b>	BREESHA21@GMAIL.COM
<b>Gender</b>	FEMALE
<b>Community</b>	BC
<b>PAN Number</b>	BSKPB8237K
<b>Passport Number</b>	
<b>Aadhar Number</b>	304934607641
<b>Faculty code given by C.O.E.</b>	9636058
<b>Faculty code given by A.I.C.T.E.</b>	3201300931
<b>Date of Birth</b>	21-07-1989
<b>Age</b>	34
<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
U.G.	B.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2010	C S I INSTITUTE OF TECHNOLOGY	ANNA UNIVERSITY	81	DISTINCTION	
P.G.	M.E.	POWER ELECTRONICS AND DRIVES	2012	ST JOSEPH'S COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	87	DISTINCTION	 
PH.D.	PH.D.	ELECTRICAL AND ELECTRONICS ENGINEERING	2017	OTHERS - NOORUL ISLAM	OTHERS - NOORUL ISLAM	Y		

\* Upload Scanned copy of Original Degree Certificate.

**I.a. Additional Qualification :-** NO ADDITIONAL  
 QUALIFICATION Score :  
 File :

**II. Title of Ph.D. Thesis**

ANALYSIS AND SEPARATION OF FETAL ELECTROCARDIOGRAM FOR DISEASE CLASSIFICATION


**III. Faculty in which Ph.D. was awarded**


FACULTY OF ELECTRICAL ENGINEERING

**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
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	22-08-2016	19-05-2023	6	8	29
Total				6	8	3

**V. Industrial Experience :**

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
<b>VI. C.O.E. Appointment Experience :</b> 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)			
It is certified that all the information provided are true to the best of my knowledge.							
<div style="text-align: center;">  </div> <p><b>Signature of the Faculty :</b></p>							

<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	MECHANICAL ENGINEERING
<b>Name of the Degree &amp; Course</b>	B.E.-MECHANICAL ENGINEERING
<b>Name of the faculty member</b>	MR. GODWIN M
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	MOOPUVILAI VEEDU,
Line 2	MARUTHANCODE POST - 629163
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	-
<b>Mobile number</b>	+91 - 9698499345
<b>Email</b>	GODGODWINGOD@GMAIL.COM
<b>Gender</b>	MALE
<b>Community</b>	BC
<b>PAN Number</b>	BVFPG8445J
<b>Passport Number</b>	
<b>Aadhar Number</b>	569754146560
<b>Faculty code given by C.O.E.</b>	9636017
<b>Faculty code given by A.I.C.T.E.</b>	2300001639
<b>Date of Birth</b>	21-08-1990
<b>Age</b>	33
<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
U.G.	B.E.	MECHANICAL ENGINEERING	2011	JAYAMATHA ENGINEERING COLLEGE	ANNA UNIVERSITY	75	FIRST CLASS	
P.G.	M.E.	CAD/CAM	2014	JOESURESH ENGINEERING	ANNA UNIVERSITY	7.6 CGPA	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
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	30-06-2014	19-05-2023	8	10	20
<b>Total</b>				8	10	25

**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 Examination 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)
1		1	100	

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



**Signature of the Faculty :**

<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	COMPUTER SCIENCE AND ENGINEERING
<b>Name of the Degree &amp; Course</b>	B.E.-COMPUTER SCIENCE AND ENGINEERING
<b>Name of the faculty member</b>	MRS. ANNET SHAMA C
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	MANCODE
Line 2	629152
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	-
<b>Mobile number</b>	+91 - 9092823701
<b>Email</b>	LOURDES.MOUNT@GMAIL.COM
<b>Gender</b>	FEMALE
<b>Community</b>	BC
<b>PAN Number</b>	DDBPA1593R
<b>Passport Number</b>	
<b>Aadhar Number</b>	657599601840
<b>Faculty code given by C.O.E.</b>	
<b>Faculty code given by A.I.C.T.E.</b>	AU1
<b>Date of Birth</b>	23-06-1989
<b>Age</b>	34
<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
U.G.	B.TECH.	INFORMATION TECHNOLOGY	2010	ST XAVIER'S CATHOLIC COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	82	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2012	UNIVERSITY COLLEGE OF ENGINEERING NAGERCOIL	ANNA UNIVERSITY	82	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
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	06-10-2022	19-05-2023	0	7	14
<b>Total</b>				0	7	17

**V. Industrial Experience :**

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

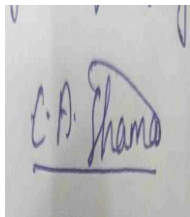



**VI. C.O.E. Appointment Experience :****Capacity at which service is extended for the conduct of Exmination during the last year**



<b>AUR (No. of days)</b>	<b>Squad Member (No. of days)</b>	<b>External Examiner (Practical) (No. of days)</b>	<b>Central Evaluation (No. of scripts Evaluated)</b>	<b>Re- Evaluation (No. of scripts)</b>
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It is certified that all the information provided are true to the best of my knowledge.

**Signature of the Faculty :**

A handwritten signature in blue ink, appearing to read "C.A. Sharma", is written over a horizontal line.

<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	CIVIL ENGINEERING
<b>Name of the Degree &amp; Course</b>	B.E.-CIVIL ENGINEERING
<b>Name of the faculty member</b>	MRS. ABISHA F
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	SUNDARI VILAGAM, KOLLENCODE
Line 2	629160
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	-
<b>Mobile number</b>	+91 - 7598669637
<b>Email</b>	LOURDES.MOUNT@GMAIL.COM
<b>Gender</b>	FEMALE
<b>Community</b>	BC
<b>PAN Number</b>	AHAPF4530B
<b>Passport Number</b>	
<b>Aadhar Number</b>	519775097036
<b>Faculty code given by C.O.E.</b>	
<b>Faculty code given by A.I.C.T.E.</b>	AU1
<b>Date of Birth</b>	10-03-1996
<b>Age</b>	27
<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
U.G.	B.E.	CIVIL ENGINEERING	2017	ARUNACHALA COLLEGE OF ENGINEERING FOR WOMEN	ANNA UNIVERSITY	7.5	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2019	BETHLAHEM INSTITUTE OF ENGINEERING	ANNA UNIVERSITY	7.8	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
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	18-03-2022	19-05-2023	1	2	2

**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 Examination 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.

A handwritten signature in blue ink that reads "Alisha". The signature is written in a cursive style with a horizontal line underneath the name.

**Signature of the Faculty :**



<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	CHEMISTRY
<b>Name of the Degree &amp; Course</b>	S&H-CHEMISTRY
<b>Name of the faculty member</b>	MRS. REEDA LEENUS D
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	1/119, KATTU VILAI, DEVICODE
Line 2	UDAYAMARTHANDAM
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	-
<b>Mobile number</b>	+91 - 8903706067
<b>Email</b>	REEDALEENUS@GMAIL.COM
<b>Gender</b>	FEMALE
<b>Community</b>	BC
<b>PAN Number</b>	CEKPR3468H
<b>Passport Number</b>	
<b>Aadhar Number</b>	888539624806
<b>Faculty code given by C.O.E.</b>	9636021
<b>Faculty code given by A.I.C.T.E.</b>	2299849389
<b>Date of Birth</b>	03-05-1985
<b>Age</b>	38
<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
U.G.	B.SC.	OTHERS - CHEMISTRY	2006	OTHERS - HOLY CROSS COLLEGE NAGERCOIL	MANOMANIAM SUNDAR NAR UNIVERSITY	78	FIRST CLASS	
P.G.	OTHERS - M PHIL	OTHERS - CHEMISTRY	2014	OTHERS - SCOTT CHRISTIAN COLLEGE NAGERCOIL	MANOMANIAM SUNDAR NAR UNIVERSITY	58	SECOND CLASS	
P.G.	M.SC.	OTHERS - CHEMISTRY	2010	OTHERS - SCOTT CHRISTIAN COLLEGE NAGERCOIL	MANOMANIAM SUNDAR NAR UNIVERSITY	60	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
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	30-06-2014	19-05-2023	8	10	20
IMMANUEL ARASAR J J COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	22-08-2012	25-07-2013	0	11	4
<b>Total</b>				9	9	29


**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) 6	Squad Member (No. of days)	External Examiner (Practical) (No. of days) 4	Central Evaluation(No. of scripts Evaluated) 7	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 :**

<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	ELECTRONICS AND COMMUNICATION ENGINEERING
<b>Name of the Degree &amp; Course</b>	B.E.-ELECTRONICS AND COMMUNICATION ENGINEERING
<b>Name of the faculty member</b>	MRS. GLADIS MARY G J
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	D.NO 12/146, NEDIYAVILAI, SWAMIYARMADAM
Line 2	KATTATHURAI POST - 629158
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	-
<b>Mobile number</b>	+91 - 7598530719
<b>Email</b>	G.J.GLADIS@GMAIL.COM
<b>Gender</b>	FEMALE
<b>Community</b>	BC
<b>PAN Number</b>	BNDPG8396N
<b>Passport Number</b>	
<b>Aadhar Number</b>	990041202516
<b>Faculty code given by C.O.E.</b>	
<b>Faculty code given by A.I.C.T.E.</b>	AU1
<b>Date of Birth</b>	11-07-1990
<b>Age</b>	33
<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
U.G.	B.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2011	PONJESLY COLLEGE OF ENGINEERING	ANNA UNIVERSITY	73	FIRST CLASS	
P.G.	M.E.	APPLIED ELECTRONICS	2013	PONJESLY COLLEGE OF ENGINEERING	ANNA UNIVERSITY	8.32 CGPA	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
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	22-08-2022	19-05-2023	0	8	29
PONJESLY COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	17-06-2013	16-03-2022	8	8	30
Total				9	5	2

**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**

<b>AUR (No. of days)</b>	<b>Squad Member (No. of days)</b>	<b>External Examiner (Practical) (No. of days)</b>	<b>Central Evaluation(No. of scripts Evaluated)</b>	<b>Re-Evaluation (No. of scripts Evaluated)</b>
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It is certified that all the information provided are true to the best of my knowledge.

**Signature of the Faculty :**



<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	ENGLISH
<b>Name of the Degree &amp; Course</b>	S&H-ENGLISH
<b>Name of the faculty member</b>	MRS. ANUMOL A J
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	D.NO 3-80, MUCHILLIYARVILAI
Line 2	VIZHUNTHAYAMBALAM POST - 629173
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	-
<b>Mobile number</b>	+91 - 9488616203
<b>Email</b>	ANUMOL875@GMAIL.COM
<b>Gender</b>	FEMALE
<b>Community</b>	BC
<b>PAN Number</b>	DJZPA0994N
<b>Passport Number</b>	
<b>Aadhar Number</b>	752923828354
<b>Faculty code given by C.O.E.</b>	
<b>Faculty code given by A.I.C.T.E.</b>	AU1
<b>Date of Birth</b>	20-08-1992
<b>Age</b>	31
<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
U.G.	B.A.	ENGLISH	2012	OTHERS - ANNAI VELANKANNI COLLEGE THOLYAVATTAM	MANOMANIAM SUNDAR NAR UNIVERSITY	65	FIRST CLASS	
P.G.	OTHERS - M.A	OTHERS - ENGLISH	2016	OTHERS - ANNAI VELANKANNI THOLAYAVATTAM	MANOMANIAM SUNDAR NAR UNIVERSITY	74	FIRST CLASS	
OTHERS - PRE DOCTORATE	OTHERS - M.PHIL	OTHERS - ENGLISH	2017	OTHERS - HOLY CROSS COLLEGE NAGERCOIL	MANOMANIAM SUNDAR NAR UNIVERSITY	79	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
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	23-01-2023	10-03-2023	0	1	19
<b>Total</b>				0	1	19

**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 Examination during the last year**

<b>AUR (No. of days)</b>	<b>Squad Member (No. of days)</b>	<b>External Examiner (Practical) (No. of days)</b>	<b>Central Evaluation(No. of scripts Evaluated)</b>	<b>Re-Evaluation (No. of scripts Evaluated)</b>
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It is certified that all the information provided are true to the best of my knowledge.

**Signature of the Faculty :**

<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	ELECTRICAL AND ELECTRONICS ENGINEERING
<b>Name of the Degree &amp; Course</b>	B.E.-ELECTRICAL AND ELECTRONICS ENGINEERING
<b>Name of the faculty member</b>	MRS. SURIYA C U
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	D.NO 25-17A, SREE MADHURAM, VENKANJI
Line 2	KOLLAM CODE POST - 629160
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	-
<b>Mobile number</b>	+91 - 8682928456
<b>Email</b>	SURIYACU25@GMAIL.COM
<b>Gender</b>	FEMALE
<b>Community</b>	OC
<b>PAN Number</b>	FBGPS8455F
<b>Passport Number</b>	
<b>Aadhar Number</b>	892766633149
<b>Faculty code given by C.O.E.</b>	
<b>Faculty code given by A.I.C.T.E.</b>	AU1
<b>Date of Birth</b>	25-08-1995
<b>Age</b>	28
<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
U.G.	B.E.	ELECTRICAL AND ELECTRONICS ENGINEERING	2017	NARAYAN AGURU COLLEGE OF ENGINEERING	ANNA UNIVERSITY	6.53	FIRST CLASS	
P.G.	M.E.	POWER ELECTRONICS AND DRIVES	2019	BETHLAHEM INSTITUTE OF ENGINEERING	ANNA UNIVERSITY	7.89	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
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	08-08-2022	19-05-2023	0	9	12
SIVAJI COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	01-07-2019	11-05-2022	2	10	11
<b>Total</b>				3	7	27

**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**



<b>AUR (No. of days)</b>	<b>Squad Member (No. of days)</b>	<b>External Examiner (Practical) (No. of days)</b>	<b>Central Evaluation(No. of scripts Evaluated)</b>	<b>Re-Evaluation (No. of scripts Evaluated)</b>
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It is certified that all the information provided are true to the best of my knowledge.

**Signature of the Faculty :**



<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	ELECTRONICS AND COMMUNICATION ENGINEERING
<b>Name of the Degree &amp; Course</b>	B.E.-GENERAL ENGINEERING
<b>Name of the faculty member</b>	MRS. NESALIN HEAVENLIA N L
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	D.NO 22131E, MADATHUVILAI, MANANVILAI
Line 2	KAPPIYARAI POST - 629156
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	-
<b>Mobile number</b>	+91 - 7397060232
<b>Email</b>	NESALINHEAVENLIA@GMAIL.COM
<b>Gender</b>	FEMALE
<b>Community</b>	BC
<b>PAN Number</b>	AWUPN7322G
<b>Passport Number</b>	
<b>Aadhar Number</b>	442348239284
<b>Faculty code given by C.O.E.</b>	
<b>Faculty code given by A.I.C.T.E.</b>	AU1
<b>Date of Birth</b>	14-04-1997
<b>Age</b>	26
<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
U.G.	B.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2018	PONJESLY COLLEGE OF ENGINEERING	ANNA UNIVERSITY	8.54	FIRST CLASS	
P.G.	M.E.	COMMUNICATION SYSTEMS	2020	BETHLAHEM INSTITUTE OF ENGINEERING	ANNA UNIVERSITY	8.70	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
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	22-08-2022	19-05-2023	0	8	29

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



N.L. Nesolin Heavens

**Signature of the Faculty :**

<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	PHYSICS
<b>Name of the Degree &amp; Course</b>	S&H-PHYSICS
<b>Name of the faculty member</b>	MRS. MERLIN THAYA S V
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	VINS MAGO NIVAS, KIZHAKANAMVILAI, PALLIYADI POST
Line 2	629169
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	-
<b>Mobile number</b>	+91 - 9787693901
<b>Email</b>	MERLINTHAYA@GMAIL.COM
<b>Gender</b>	FEMALE
<b>Community</b>	BC
<b>PAN Number</b>	CUJPM1523P
<b>Passport Number</b>	
<b>Aadhar Number</b>	718002721941
<b>Faculty code given by C.O.E.</b>	9636027
<b>Faculty code given by A.I.C.T.E.</b>	2300001023
<b>Date of Birth</b>	28-01-1980
<b>Age</b>	43
<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
U.G.	B.SC.	OTHERS - PHYSICS	2000	OTHERS - NESAMONY MEMORIAL CHRISTIAN COLLEGE	MANOMANIAM SUNDAR NAR UNIVERSITY	60	FIRST CLASS	
P.G.	M.SC.	OTHERS - PHYSICS	2004	OTHERS - SCOTT CHRISTIAN COLLEGE	MANOMANIAM SUNDAR NAR UNIVERSITY	57	SECOND CLASS	
P.G.	OTHERS - M PHIL	OTHERS - PHYSICS	2006	OTHERS - SCOTT CHRISTIAN COLLEGE	MANOMANIAM SUNDAR NAR UNIVERSITY	63	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
RAJAS ENGINEERING COLLEGE	ASSISTANT PROFESSOR	04-07-2007	25-08-2014	7	1	22
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	01-06-2016	19-05-2023	6	11	19
<b>Total</b>				14	1	12


**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) 12	Squad Member (No. of days)	External Examiner (Practical) (No. of days) 4	Central Evaluation(No. of scripts Evaluated) 10	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 :** 

<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	MATHEMATICS
<b>Name of the Degree &amp; Course</b>	S&H-MATHEMATICS
<b>Name of the faculty member</b>	MRS. JENILA R
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	9-64E, MADAN VILAI,
Line 2	PALAPPALLAM POST
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	-
<b>Mobile number</b>	+91 - 8220766379
<b>Email</b>	JENILABENSIGER@GMAIL.COM
<b>Gender</b>	FEMALE
<b>Community</b>	BC
<b>PAN Number</b>	BDWPJ0880R
<b>Passport Number</b>	
<b>Aadhar Number</b>	391382238438
<b>Faculty code given by C.O.E.</b>	9636043
<b>Faculty code given by A.I.C.T.E.</b>	2896938708
<b>Date of Birth</b>	11-03-1987
<b>Age</b>	36
<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
U.G.	B.SC.	OTHERS - MATHEMATICS	2007	OTHERS - NMC COLLEGE MARTHANDAM	MANOMANIAM SUNDAR NAR UNIVERSITY	74.8	FIRST CLASS	
P.G.	OTHERS - M. PHIL	OTHERS - MATHEMATICS	2012	OTHERS - NMC COLLEGE MARTHANDAM	MANOMANIAM SUNDAR NAR UNIVERSITY	73	FIRST CLASS	
P.G.	M.SC.	OTHERS - MATHEMATICS	2009	OTHERS - VIVEKANANDA COLLEGE AGASTHEESWARA	MANOMANIAM SUNDAR NAR UNIVERSITY	68	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
SIVAJI COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	16-07-2011	26-03-2014	2	8	11
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	08-02-2016	19-05-2023	7	3	12


**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) 10	Re-Evaluation (No. of scripts)
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It is certified that all the information provided are true to the best of my knowledge.



**Signature of the Faculty :**



<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	PHYSICS
<b>Name of the Degree &amp; Course</b>	S&H-PHYSICS
<b>Name of the faculty member</b>	MRS. JENIFER JANE P.F
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	7/63, PARAMPU VILAI
Line 2	KEEZHKULAM 629193
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	04651 - 267778
<b>Mobile number</b>	+91 - 9489267778
<b>Email</b>	JENIFERVINS@GMAIL.COM
<b>Gender</b>	FEMALE
<b>Community</b>	BC
<b>PAN Number</b>	BDDPJ1273M
<b>Passport Number</b>	
<b>Aadhar Number</b>	638520560156
<b>Faculty code given by C.O.E.</b>	9636010
<b>Faculty code given by A.I.C.T.E.</b>	2299967963
<b>Date of Birth</b>	25-07-1981
<b>Age</b>	42
<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
U.G.	B.SC.	OTHERS - PHYSICS	2002	OTHERS - NESAMONI MEMORIAL CHRISTIAN COLLEGE MARTHANDAM	MANOMANIAM SUNDARAR UNIVERSITY	70.8	FIRST CLASS	
P.G.	M.SC.	OTHERS - PHYSICS	2004	OTHERS - NESAMONI MEMORIAL CHRISTIAN COLLEGE MARTHANDAM	MANOMANIAM SUNDARAR UNIVERSITY	63.8	FIRST CLASS	 
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS -	2007	OTHERS - MANOMANIAM SUNDARAR	MANOMANIAM SUNDARAR	55	SECOND CLASS	
* Upload Scanned copy of Original Degree Certificate.								
<b>I.a. Additional Qualification :-</b> NO ADDITIONAL QUALIFICATION Score : File :								
<b>II. Title of Ph.D. Thesis</b>								
<b>III. Faculty in which Ph.D. was awarded</b>								
<b>IV. Academic Experience :</b> ( 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
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	01-08-2013	19-05-2023	9	9	19
<b>Total</b>				9	9	23

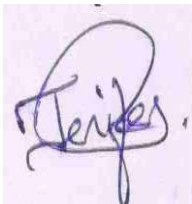
**V. Industrial Experience :**

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 :**

<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	MECHANICAL ENGINEERING
<b>Name of the Degree &amp; Course</b>	B.E.-MECHANICAL ENGINEERING
<b>Name of the faculty member</b>	MR. GODWIN G
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	3/70-3, SALATE NAGAR, VANIYA KUDIPOST, K.K.DIST
Line 2	629251
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	-
<b>Mobile number</b>	+91 - 7373633320
<b>Email</b>	GODWIN11G@GMAIL.COM
<b>Gender</b>	MALE
<b>Community</b>	BC
<b>PAN Number</b>	BTZPG4620D
<b>Passport Number</b>	
<b>Aadhar Number</b>	835643862970
<b>Faculty code given by C.O.E.</b>	9636078
<b>Faculty code given by A.I.C.T.E.</b>	3565753323
<b>Date of Birth</b>	11-01-1991
<b>Age</b>	32
<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
U.G.	B.E.	MECHANICAL ENGINEERING	2012	JEPPIAAR MAAMALAN ENGINEERING COLLEGE	ANNA UNIVERSITY	6.00	SECOND CLASS	
P.G.	M.E.	ENGINEERING DESIGN	2015	EASWARAR ENGINEERING COLLEGE (AUTONOMOUS)	ANNA UNIVERSITY	7.37	FIRST CLASS	

\* Upload Scanned copy of Original Degree Certificate.

**I.a. Additional Qualification :-** NO ADDITIONAL

QUALIFICATIONS

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
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	03-07-2017	18-05-2023	5	10	16
<b>Total</b>				5	10	21

**V. Industrial Experience :**

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
AUTO FINE INDUSTRIES	QUALITY ENGINEER	CHECKING	03-08-2015	31-05-2017	1	9	29
<b>Total</b>					1	9	2


**VI. C.O.E. Appointment Experience :****Capacity at which service is extended for the conduct of Exmination during the last year**



<b>AUR (No. of days)</b>	<b>Squad Member (No. of days)</b>	<b>External Examiner (Practical) (No. of days)</b>	<b>Central Evaluation(No. of scripts Evaluated)</b>	<b>Re-Evaluation (No. of scripts Evaluated)</b>
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It is certified that all the information provided are true to the best of my knowledge.

**Signature of the Faculty :**



<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	CIVIL ENGINEERING
<b>Name of the Degree &amp; Course</b>	B.E.-CIVIL ENGINEERING
<b>Name of the faculty member</b>	MS. NITHYA D R
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	4-6-57, KULATHADIVILAI VEEDU
Line 2	KUZHITHURAI POST- 629163
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	-
<b>Mobile number</b>	+91 - 9751796767
<b>Email</b>	NITHYACIVIL30@GMAIL.COM
<b>Gender</b>	FEMALE
<b>Community</b>	BC
<b>PAN Number</b>	AWWPN9189P
<b>Passport Number</b>	
<b>Aadhar Number</b>	822069024486
<b>Faculty code given by C.O.E.</b>	9636067
<b>Faculty code given by A.I.C.T.E.</b>	3385295761
<b>Date of Birth</b>	20-02-1992
<b>Age</b>	30
<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
U.G.	B.E.	CIVIL ENGINEERING	2014	ARUNACHALA COLLEGE OF ENGINEERING FOR WOMEN	ANNA UNIVERSITY	7.86 CGPA	FIRST CLASS	
P.G.	M.E.	CONSTRUCTION ENGINEERING AND MANAGEMENT	2016	ARUNACHALA COLLEGE OF ENGINEERING FOR WOMEN	ANNA UNIVERSITY	8.6 CGPA	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
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	03-10-2016	03-06-2022	5	8	1
Total				5	8	5

**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 Examination during the last year**



<b>AUR (No. of days)</b>	<b>Squad Member (No. of days)</b>	<b>External Examiner (Practical) (No. of days)</b>	<b>Central Evaluation(No. of scripts Evaluated)</b>	<b>Re-Evaluation (No. of scripts Evaluated)</b>
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It is certified that all the information provided are true to the best of my knowledge.



**Signature of the Faculty :**

<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	ELECTRICAL AND ELECTRONICS ENGINEERING
<b>Name of the Degree &amp; Course</b>	B.E.-ELECTRICAL AND ELECTRONICS ENGINEERING
<b>Name of the faculty member</b>	MS. SUSHMI T
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	D/O.P.THAVASI, VADAKOTTUVILAI, MADATHOORKONAM
Line 2	KULASEKHARAM - 629161
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	-
<b>Mobile number</b>	+91 - 8124115146
<b>Email</b>	SUSHMI200396@GMAIL.COM
<b>Gender</b>	FEMALE
<b>Community</b>	BC
<b>PAN Number</b>	BUZPT0065Q
<b>Passport Number</b>	
<b>Aadhar Number</b>	843170719386
<b>Faculty code given by C.O.E.</b>	9636092
<b>Faculty code given by A.I.C.T.E.</b>	
<b>Date of Birth</b>	20-03-1996
<b>Age</b>	27
<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
U.G.	B.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2017	RAJAS INSTITUTE OF TECHNOLOGY	ANNA UNIVERSITY	6.8 CGPA	FIRST CLASS	
P.G.	M.E.	EMBEDDED SYSTEM TECHNOLOGIES	2019	MARIA COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	8.44 CGPA	FIRST CLASS	

\* Upload Scanned copy of Original Degree Certificate.

**I.a. Additional Qualification :-** NO ADDITIONAL QUALIFICATIONS  
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
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	09-07-2019	04-06-2022	2	10	27
Total				2	10	2

**V. Industrial Experience :**

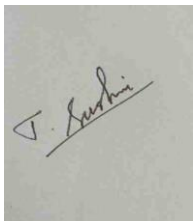
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days


**VI. C.O.E. Appointment Experience :****Capacity at which service is extended for the conduct of Exmination during the last year**





<b>AUR (No. of days)</b>	<b>Squad Member (No. of days)</b>	<b>External Examiner (Practical) (No. of days)</b>	<b>Central Evaluation(No. of scripts Evaluated)</b>	<b>Re-Evaluation (No. of scripts Evaluated)</b>
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It is certified that all the information provided are true to the best of my knowledge.

**Signature of the Faculty :**



<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	MATHEMATICS
<b>Name of the Degree &amp; Course</b>	S&H-MATHEMATICS
<b>Name of the faculty member</b>	MRS. PRABHA A E
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	W/O SUDHEER, 15-191, LEELA BHAVAN, PAINKULAM
Line 2	PAINKULAM - 629173
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	-
<b>Mobile number</b>	+91 - 7598616832
<b>Email</b>	AEPRABHA@GMAIL.COM
<b>Gender</b>	FEMALE
<b>Community</b>	BC
<b>PAN Number</b>	CJSPP0498J
<b>Passport Number</b>	
<b>Aadhar Number</b>	220718160898
<b>Faculty code given by C.O.E.</b>	9615095
<b>Faculty code given by A.I.C.T.E.</b>	7446815688
<b>Date of Birth</b>	25-06-1987
<b>Age</b>	36
<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
U.G.	B.SC.	OTHERS - MATHEMATICS	2007	OTHERS - NESAMONY MEMORIAL CHRISTIAN COLLEGE	MANOMANIAM SUNDAR NAR UNIVERSITY	83.43	DISTINCTION	
P.G.	M.SC.	OTHERS - MATHEMATICS	2009	OTHERS - NESAMONY MEMORIAL CHRISTIAN COLLEGE	MANOMANIAM SUNDAR NAR UNIVERSITY	68.50	FIRST CLASS	 
OTHERS - M.PHIL	OTHERS - M.PHIL	OTHERS - MATHS	2011	OTHERS - NESAMONY MEMORIAL	MANOMANIAM SUNDAR NAR UNIVERSITY	68.20	FIRST CLASS	
* Upload Scanned copy of Original Degree Certificate.								
<b>I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION</b> Score : File :								
<b>II. Title of Ph.D. Thesis</b>								
<b>III. Faculty in which Ph.D. was awarded</b>								
<b>IV. Academic Experience :</b> <b>( Start from the Current working Experience ) *</b>								

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
SATYAM COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	25-06-2012	30-06-2013	1	0	6
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	10-07-2019	19-05-2023	3	10	10
MARIA COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	01-07-2013	08-07-2019	6	0	8
Total				10	10	29

#### V. Industrial Experience :

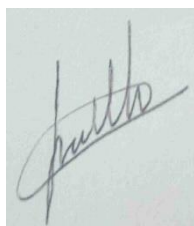
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

#### VI. C.O.E. Appointment Experience :


Capacity at which service is extended for the conduct of Examination 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) 10	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 :

<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	COMPUTER SCIENCE AND ENGINEERING
<b>Name of the Degree &amp; Course</b>	B.E.-COMPUTER SCIENCE AND ENGINEERING
<b>Name of the faculty member</b>	MS. GLADIS FLOWER L
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	1/74, KANCHIRAM KATTU VILAI
Line 2	POOTTETI POST - 629157
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	-
<b>Mobile number</b>	+91 - 9489392557
<b>Email</b>	GLADIS.FLOWER11@GMAIL.COM
<b>Gender</b>	FEMALE
<b>Community</b>	BC
<b>PAN Number</b>	ANCPL7237R
<b>Passport Number</b>	
<b>Aadhar Number</b>	626602496986
<b>Faculty code given by C.O.E.</b>	9636086
<b>Faculty code given by A.I.C.T.E.</b>	4728468822
<b>Date of Birth</b>	12-06-1990
<b>Age</b>	33
<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
U.G.	B.TECH.	INFORMATION TECHNOLOGY	2011	MARTHANDAM COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	81	FIRST CLASS	
P.G.	M.TECH.	INFORMATION TECHNOLOGY	2013	VEL TECH MULTITECH DR RANGARAJAN DR SAKUNTHALA ENGINEERING COLLEGE (AUTONOMOUS)	ANNA UNIVERSITY	8.5	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
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	02-07-2018	19-05-2023	4	10	18
VEL TECH MULTITECH DR RANGARAJAN DR SAKUNTHALA ENGINEERING COLLEGE (AUTONOMOUS)	ASSISTANT PROFESSOR	02-03-2015	25-06-2018	3	3	24


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



**Signature of the Faculty :**

<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	ELECTRONICS AND COMMUNICATION ENGINEERING
<b>Name of the Degree &amp; Course</b>	B.E.-ELECTRONICS AND COMMUNICATION ENGINEERING
<b>Name of the faculty member</b>	MS. DANIYA R
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	D.NO 6/79, KUNNAMVILAGAM, AYINKAMAM
Line 2	KALIYAKKAVILAI POST - 629153
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	-
<b>Mobile number</b>	+91 - 9025280771
<b>Email</b>	DANIYARAJAMONY@GMAIL.COM
<b>Gender</b>	FEMALE
<b>Community</b>	BC
<b>PAN Number</b>	GHUPR4227P
<b>Passport Number</b>	
<b>Aadhar Number</b>	674662636289
<b>Faculty code given by C.O.E.</b>	
<b>Faculty code given by A.I.C.T.E.</b>	AU1
<b>Date of Birth</b>	17-02-1999
<b>Age</b>	24
<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
U.G.	B.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2020	VINSCHRISTIAN COLLEGE OF ENGINEERING	ANNA UNIVERSITY	7.27	FIRST CLASS	
P.G.	M.E.	APPLIED ELECTRONICS	2022	MAR EPHRAIM COLLEGE OF ENGINEERING AND	ANNA UNIVERSITY	9.29	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
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	14-12-2022	19-05-2023	0	5	6

**V. Industrial Experience :**

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

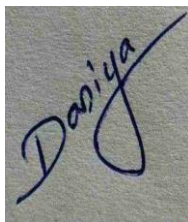
**VI. C.O.E. Appointment Experience :**


Capacity at which service is extended for the conduct of Examination 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)
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It is certified that all the information provided are true to the best of my knowledge.

**Signature of the Faculty :**

A handwritten signature in blue ink, appearing to read "Dasiya", is written over a light gray rectangular background.

<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	CIVIL ENGINEERING
<b>Name of the Degree &amp; Course</b>	B.E.-CIVIL ENGINEERING
<b>Name of the faculty member</b>	MR. ARUN S J
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	KERANOOR KUZHI HOUSE, PULIYOORSALAI,
Line 2	CHERUVALLOOR POST
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	04651 - 284873
<b>Mobile number</b>	+91 - 7502748843
<b>Email</b>	SJARUN2009@GMAIL.COM
<b>Gender</b>	MALE
<b>Community</b>	BC
<b>PAN Number</b>	BDBPA0966Q
<b>Passport Number</b>	
<b>Aadhar Number</b>	657867754951
<b>Faculty code given by C.O.E.</b>	9636068
<b>Faculty code given by A.I.C.T.E.</b>	3385070931
<b>Date of Birth</b>	08-11-1992
<b>Age</b>	31
<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
U.G.	B.E.	CIVIL ENGINEERING	2014	MAR EPHRAE M COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	74	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2016	PONJESLY COLLEGE OF ENGINEERING	ANNA UNIVERSITY	79	FIRST CLASS	

\* Upload Scanned copy of Original Degree Certificate.

**I.a. Additional Qualification :-** NO ADDITIONAL QUALIFICATIONS  
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
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	08-08-2016	19-05-2023	6	9	12
Total				6	9	16

**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**

<b>AUR (No. of days)</b>	<b>Squad Member (No. of days)</b>	<b>External Examiner (Practical) (No. of days)</b>	<b>Central Evaluation(No. of scripts Evaluated)</b>	<b>Re-Evaluation (No. of scripts Evaluated)</b>
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It is certified that all the information provided are true to the best of my knowledge.



**Signature of the Faculty :**



<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	MECHANICAL ENGINEERING
<b>Name of the Degree &amp; Course</b>	B.E.-MECHANICAL ENGINEERING
<b>Name of the faculty member</b>	MR. ANANTHAPURI S.A
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	MUKTHI VATTAVILA
Line 2	KOTTUKAL POST - 695501
<b>District</b>	OTHERS - THIRUVANANTHAPURAM
<b>Telephone number</b>	-
<b>Mobile number</b>	+91 - 9495776001
<b>Email</b>	ASASUJIN4@GMAIL.COM
<b>Gender</b>	MALE
<b>Community</b>	BC
<b>PAN Number</b>	BXLPA0710J
<b>Passport Number</b>	
<b>Aadhar Number</b>	232443869482
<b>Faculty code given by C.O.E.</b>	9636057
<b>Faculty code given by A.I.C.T.E.</b>	2945088304
<b>Date of Birth</b>	04-09-1991
<b>Age</b>	32
<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
U.G.	B.E.	AERONAUTICAL ENGINEERING	2013	OTHERS - N I UNIVERSITY	OTHERS - N I UNIVERSITY	8.09 CGPA	FIRST CLASS	
P.G.	M.E.	THERMAL ENGINEERING	2015	PONJESLY COLLEGE OF ENGINEERING	ANNA UNIVERSITY	8.4 CGPA	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
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	10-08-2016	19-05-2023	6	9	10
<b>Total</b>				6	9	14

**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 Examination 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 :**

<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	COMPUTER SCIENCE AND ENGINEERING
<b>Name of the Degree &amp; Course</b>	B.E.-GENERAL ENGINEERING
<b>Name of the faculty member</b>	MRS. AARTHY AMSALEKHA SIVAKAMI S
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	20/140, OPP. BUS STAND,
Line 2	THUCKALAY POST - 629175
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	-
<b>Mobile number</b>	+91 - 8056417982
<b>Email</b>	LOURDES.MOUNT@GMAIL.COM
<b>Gender</b>	FEMALE
<b>Community</b>	BC
<b>PAN Number</b>	GAZPS5298P
<b>Passport Number</b>	
<b>Aadhar Number</b>	325928442227
<b>Faculty code given by C.O.E.</b>	
<b>Faculty code given by A.I.C.T.E.</b>	AU1
<b>Date of Birth</b>	30-06-1989
<b>Age</b>	34
<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
U.G.	B.E.	COMPUTER SCIENCE AND ENGINEERING	2011	NARAYAN AGURU COLLEGE OF ENGINEERING	ANNA UNIVERSITY	77	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2013	MARTHANDAM COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	8.46	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
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	01-12-2021	19-05-2023	1	5	19
<b>Total</b>				1	5	21

**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 Examination during the last year**




<b>AUR (No. of days)</b>	<b>Squad Member (No. of days)</b>	<b>External Examiner (Practical) (No. of days)</b>	<b>Central Evaluation (No. of scripts Evaluated)</b>	<b>Re- Evaluation (No. of scripts)</b>
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It is certified that all the information provided are true to the best of my knowledge.



**Signature of the Faculty :**

<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	ENGLISH
<b>Name of the Degree &amp; Course</b>	S&H-ENGLISH
<b>Name of the faculty member</b>	MRS. CARONA JASMINE P
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	14/75B, MADATHUVILAI,
Line 2	ATTOOR - 629177
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	-
<b>Mobile number</b>	+91 - 9443313012
<b>Email</b>	CARONAJASMINE@GMAIL.COM
<b>Gender</b>	FEMALE
<b>Community</b>	BC
<b>PAN Number</b>	FBYPP5025G
<b>Passport Number</b>	
<b>Aadhar Number</b>	953396468471
<b>Faculty code given by C.O.E.</b>	9636060
<b>Faculty code given by A.I.C.T.E.</b>	2733964270
<b>Date of Birth</b>	22-03-1990
<b>Age</b>	33
<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
U.G.	B.A.	ENGLISH	2010	OTHERS - N M C COLLEGE	MANOMANIAM SUNDAR NAR UNIVERSITY	57.9	SECOND CLASS	
P.G.	OTHERS - M A	OTHERS - ENGLISH LITERATURE	2013	OTHERS - N M C COLLEGE	MANOMANIAM SUNDAR NAR UNIVERSITY	71.8	FIRST CLASS	
P.G.	OTHERS - M PHIL	OTHERS - ENGLISH LITERATURE	2014	OTHERS - SREE AYYAPPA COLLEGE FOR WOMEN	MANOMANIAM SUNDAR NAR UNIVERSITY	79.2	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
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	01-02-2017	19-05-2023	6	3	19
Total				6	3	20

**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 Examination during the last year**

<b>AUR (No. of days)</b>	<b>Squad Member (No. of days)</b>	<b>External Examiner (Practical) (No. of days)</b>	<b>Central Evaluation(No. of scripts Evaluated)</b>	<b>Re-Evaluation (No. of scripts Evaluated)</b>
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It is certified that all the information provided are true to the best of my knowledge.

**Signature of the Faculty :**

<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	ELECTRONICS AND COMMUNICATION ENGINEERING
<b>Name of the Degree &amp; Course</b>	B.E.-ELECTRONICS AND COMMUNICATION ENGINEERING
<b>Name of the faculty member</b>	MR. BIFRIN SAMUEL Y B
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	14/75, MADATHUVILAI
Line 2	ATTOOR POST - 629177
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	04651 - 202281
<b>Mobile number</b>	+91 - 9488160281
<b>Email</b>	BIFJAI07@GMAIL.COM
<b>Gender</b>	MALE
<b>Community</b>	BC
<b>PAN Number</b>	CBGPB2987Q
<b>Passport Number</b>	
<b>Aadhar Number</b>	544087491405
<b>Faculty code given by C.O.E.</b>	9636024
<b>Faculty code given by A.I.C.T.E.</b>	2315560435
<b>Date of Birth</b>	03-12-1985
<b>Age</b>	38
<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
U.G.	B.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2008	JEPPIAAR ENGINEERING COLLEGE	ANNA UNIVERSITY	65	SECOND CLASS	
P.G.	M.TECH.	OTHERS - DIGITAL COMMUNICATION AND NETWORKING ENGINEERING	2014	OTHERS - KALASALINGAM UNIVERSITY	OTHERS - KALASALINGAM UNIVERSITY	8.19	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
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	01-09-2014	19-05-2023	8	8	19
Total				8	8	23

**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**



<b>AUR (No. of days)</b>	<b>Squad Member (No. of days)</b>	<b>External Examiner (Practical) (No. of days)</b>	<b>Central Evaluation(No. of scripts Evaluated)</b>	<b>Re-Evaluation (No. of scripts Evaluated)</b>
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It is certified that all the information provided are true to the best of my knowledge.



**Signature of the Faculty :**

<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	MECHANICAL ENGINEERING
<b>Name of the Degree &amp; Course</b>	B.E.-MECHANICAL ENGINEERING
<b>Name of the faculty member</b>	MR. SHAJI A
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	PERIYA VILAI HOUSE, KAIYALA VILAI
Line 2	VENCODE POST - 629171
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	-
<b>Mobile number</b>	+91 - 8973217460
<b>Email</b>	SHAJI.SHAJIN006@GMAIL.COM
<b>Gender</b>	MALE
<b>Community</b>	BC
<b>PAN Number</b>	CYFPS3874M
<b>Passport Number</b>	
<b>Aadhar Number</b>	236027011921
<b>Faculty code given by C.O.E.</b>	9636048
<b>Faculty code given by A.I.C.T.E.</b>	3217722740
<b>Date of Birth</b>	25-04-1989
<b>Age</b>	34
<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
U.G.	B.E.	MECHANICAL ENGINEERING	2010	VINCENTIAN COLLEGE OF ENGINEERING	ANNA UNIVERSITY	73	FIRST CLASS	
P.G.	M.E.	ENERGY ENGINEERING	2015	KALAIKANNAN S.K. COLLEGE OF ENGINEERING (FORMERLY KNSK COLLEGE OF ENGINEERING)	ANNA UNIVERSITY	72	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
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	08-08-2016	19-05-2023	6	9	12
Total				6	9	16

**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 Examination during the last year**

<b>AUR (No. of days)</b>	<b>Squad Member (No. of days)</b>	<b>External Examiner (Practical) (No. of days)</b>	<b>Central Evaluation(No. of scripts Evaluated)</b>	<b>Re-Evaluation (No. of scripts Evaluated)</b>
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It is certified that all the information provided are true to the best of my knowledge.



**Signature of the Faculty :**

<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	MECHANICAL ENGINEERING
<b>Name of the Degree &amp; Course</b>	B.E.-MECHANICAL ENGINEERING
<b>Name of the faculty member</b>	MR. PRABAKAR C.D
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	1-228 KODAL VILAI, MELMIDALAM
Line 2	UDAYAMARTHANDAM POST - 629178
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	-
<b>Mobile number</b>	+91 - 9944778592
<b>Email</b>	PRABAKAR.CD@GMAIL.COM
<b>Gender</b>	MALE
<b>Community</b>	BC
<b>PAN Number</b>	DCHPP8142N
<b>Passport Number</b>	
<b>Aadhar Number</b>	893096638485
<b>Faculty code given by C.O.E.</b>	9636031
<b>Faculty code given by A.I.C.T.E.</b>	2468669963
<b>Date of Birth</b>	14-05-1986
<b>Age</b>	37
<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
U.G.	B.E.	AERONAUTICAL ENGINEERING	2011	OTHERS - NOORUL ISLAM COLLEGE OF ENGINEERING	ANNA UNIVERSITY	63	SECOND CLASS	
P.G.	M.E.	CAD/CAM	2014	CENTRAL INSTITUTE OF PETROCHEMICALS ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	8.1 CGPA	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
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	07-01-2015	19-05-2023	8	4	13
<b>Total</b>				8	4	15

**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**



<b>AUR (No. of days)</b>	<b>Squad Member (No. of days)</b>	<b>External Examiner (Practical) (No. of days)</b>	<b>Central Evaluation(No. of scripts Evaluated)</b>	<b>Re-Evaluation (No. of scripts Evaluated)</b>
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It is certified that all the information provided are true to the best of my knowledge.



**Signature of the Faculty :**

<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	CIVIL ENGINEERING
<b>Name of the Degree &amp; Course</b>	B.E.-CIVIL ENGINEERING
<b>Name of the faculty member</b>	MR. PRAVEESH J
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	4/78, YASH BHAVAN , VILATHIVILAI
Line 2	KAPPUKADU POST
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	-
<b>Mobile number</b>	+91 - 9488674100
<b>Email</b>	LOURDES.MOUNT@GMAIL.COM
<b>Gender</b>	MALE
<b>Community</b>	BC
<b>PAN Number</b>	CXVPP1462M
<b>Passport Number</b>	
<b>Aadhar Number</b>	639318634567
<b>Faculty code given by C.O.E.</b>	9636077
<b>Faculty code given by A.I.C.T.E.</b>	AU1
<b>Date of Birth</b>	13-12-1986
<b>Age</b>	37
<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
U.G.	B.E.	CIVIL ENGINEERING	2009	AMRITA COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	68	FIRST CLASS	
P.G.	M.E.	CONSTRUCTION ENGINEERING AND MANAGEMENT	2013	ST XAVIER'S CATHOLIC COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	75	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
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	22-02-2021	19-05-2023	2	2	26
NARAYANAGURU COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	03-07-2013	12-05-2017	3	10	10
<b>Total</b>				6	1	7

**V. Industrial Experience :**

					<b>Experience</b>
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Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Years	Months	Days
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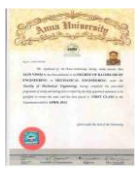

**VI. C.O.E. Appointment Experience :****Capacity at which service is extended for the conduct of Examination during the last year**

<b>AUR (No. of days)</b>	<b>Squad Member (No. of days)</b>	<b>External Examiner (Practical) (No. of days)</b>	<b>Central Evaluation (No. of scripts Evaluated)</b>	<b>Re- Evaluation (No. of scripts)</b>
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It is certified that all the information provided are true to the best of my knowledge.

**Signature of the Faculty :**

<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	MECHANICAL ENGINEERING
<b>Name of the Degree &amp; Course</b>	B.E.-MECHANICAL ENGINEERING
<b>Name of the faculty member</b>	MR. ALIN VINOJ A
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	SALATE NAGAR
Line 2	VANIYAKUDI POST - 629251
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	-
<b>Mobile number</b>	+91 - 9940801452
<b>Email</b>	ATHVINOJ@GMAIL.COM
<b>Gender</b>	MALE
<b>Community</b>	BC
<b>PAN Number</b>	BRNPA0052M
<b>Passport Number</b>	
<b>Aadhar Number</b>	378843974834
<b>Faculty code given by C.O.E.</b>	9636051
<b>Faculty code given by A.I.C.T.E.</b>	3220059958
<b>Date of Birth</b>	15-12-1990
<b>Age</b>	33
<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
U.G.	B.E.	MECHANICAL ENGINEERING	2012	THANGAVELU ENGINEERING COLLEGE	ANNA UNIVERSITY	6.56 CGPA	FIRST CLASS	
P.G.	M.E.	ENERGY ENGINEERING	2015	ST XAVIER'S CATHOLIC COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	6.5 CGPA	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
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	04-07-2016	19-05-2023	6	10	16
SIVAJI COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	01-07-2015	01-07-2016	1	0	1
<b>Total</b>				7	10	22

**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**



<b>AUR (No. of days)</b>	<b>Squad Member (No. of days)</b>	<b>External Examiner (Practical) (No. of days)</b>	<b>Central Evaluation(No. of scripts Evaluated)</b>	<b>Re-Evaluation (No. of scripts Evaluated)</b>
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It is certified that all the information provided are true to the best of my knowledge.



**Signature of the Faculty :**

<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	CIVIL ENGINEERING
<b>Name of the Degree &amp; Course</b>	B.E.-CIVIL ENGINEERING
<b>Name of the faculty member</b>	MS. ABISHAMOL V
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	PAMMAM, MARTHANDAM
Line 2	629165
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	-
<b>Mobile number</b>	+91 - 7598411842
<b>Email</b>	ABISHAMOLV@GMAIL.COM
<b>Gender</b>	FEMALE
<b>Community</b>	BC
<b>PAN Number</b>	DNLPA8201A
<b>Passport Number</b>	
<b>Aadhar Number</b>	221099028013
<b>Faculty code given by C.O.E.</b>	9636093
<b>Faculty code given by A.I.C.T.E.</b>	AU1
<b>Date of Birth</b>	07-03-1995
<b>Age</b>	28
<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
U.G.	B.E.	CIVIL ENGINEERING	2016	BETHLAHEM INSTITUTE OF ENGINEERING	ANNA UNIVERSITY	7.28	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2019	BETHLAHEM INSTITUTE OF ENGINEERING	ANNA UNIVERSITY	8.07	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
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	16-12-2019	19-05-2023	3	5	4
Total				3	5	6

**V. Industrial Experience :**

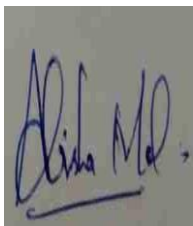
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

**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 :**

A handwritten signature in blue ink, appearing to read "Disha M.", is positioned to the right of the text "Signature of the Faculty :".

<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	ELECTRICAL AND ELECTRONICS ENGINEERING
<b>Name of the Degree &amp; Course</b>	B.E.-ELECTRICAL AND ELECTRONICS ENGINEERING
<b>Name of the faculty member</b>	MRS. NISHA M
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	7-144 B, PULLICHUVILAI HOUSE, PIRACODE,
Line 2	FATHIMA NAGAR POST, KANYAKUMARI DISTRICT - 629160
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	04651 - 240011
<b>Mobile number</b>	+91 - 9486912501
<b>Email</b>	M.NISHAEEEE@GMAIL.COM
<b>Gender</b>	FEMALE
<b>Community</b>	BC
<b>PAN Number</b>	BEIPN2885P
<b>Passport Number</b>	
<b>Aadhar Number</b>	710464767739
<b>Faculty code given by C.O.E.</b>	9636069
<b>Faculty code given by A.I.C.T.E.</b>	3384893744
<b>Date of Birth</b>	13-08-1992
<b>Age</b>	31
<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
U.G.	B.E.	ELECTRICAL AND ELECTRONICS ENGINEERING	2014	MOHAMED SATHAK ENGINEERING COLLEGE	ANNA UNIVERSITY	8.64 CGPA	DISTINCTION	
P.G.	M.E.	POWER ELECTRONICS AND DRIVES	2016	BETHLAHEM INSTITUTE OF ENGINEERING	ANNA UNIVERSITY	8.71 CGPA	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
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	01-09-2016	19-05-2023	6	8	19
Total				6	8	23

**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.

A handwritten signature in blue ink, appearing to read 'M. Nisha', with a long horizontal flourish extending from the bottom right.

**Signature of the Faculty :**

<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	COMPUTER SCIENCE AND ENGINEERING
<b>Name of the Degree &amp; Course</b>	B.E.-COMPUTER SCIENCE AND ENGINEERING
<b>Name of the faculty member</b>	MRS. KALPANA K
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	111/J1, MUKKADU JUNCTION
Line 2	THICKANAMCODE
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	-
<b>Mobile number</b>	+91 - 7738045500
<b>Email</b>	KALPANACLEMENT23@GMAIL.COM
<b>Gender</b>	FEMALE
<b>Community</b>	BC
<b>PAN Number</b>	BFGPK6857K
<b>Passport Number</b>	
<b>Aadhar Number</b>	679929259481
<b>Faculty code given by C.O.E.</b>	9636075
<b>Faculty code given by A.I.C.T.E.</b>	3566498113
<b>Date of Birth</b>	25-09-1984
<b>Age</b>	39
<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
U.G.	B.TECH.	INFORMATION TECHNOLOGY	2006	MUTHAYAMMAL COLLEGE OF ENGINEERING	ANNA UNIVERSITY	76.2	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2012	OTHERS - STPETER'S UNIVERSITY	OTHERS - ST PETERS UNIVERSITY	74	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
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	01-12-2016	19-05-2023	6	5	19
GNANAMANI COLLEGE OF TECHNOLOGY	ASSISTANT PROFESSOR	01-06-2012	09-12-2014	2	6	9

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



**Signature of the Faculty :**

<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	COMPUTER SCIENCE AND ENGINEERING
<b>Name of the Degree &amp; Course</b>	B.E.-COMPUTER SCIENCE AND ENGINEERING
<b>Name of the faculty member</b>	MRS. BERIN SELVA BENNETLIN S K
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	7-69, PARAMBU VILAI
Line 2	KEEZHKULAM POST
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	-
<b>Mobile number</b>	+91 - 7358427059
<b>Email</b>	LOURDES.MOUNT@GMAIL.COM
<b>Gender</b>	FEMALE
<b>Community</b>	BC
<b>PAN Number</b>	MXZPS3623K
<b>Passport Number</b>	
<b>Aadhar Number</b>	309019159261
<b>Faculty code given by C.O.E.</b>	
<b>Faculty code given by A.I.C.T.E.</b>	AU1
<b>Date of Birth</b>	04-02-1990
<b>Age</b>	33
<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
U.G.	B.TECH.	INFORMATION TECHNOLOGY	2012	VINSCHRISTIAN COLLEGE OF ENGINEERING	ANNA UNIVERSITY	81	FIRST CLASS	
P.G.	M.TECH.	INFORMATION TECHNOLOGY	2014	VINSCHRISTIAN COLLEGE OF ENGINEERING	ANNA UNIVERSITY	82.7	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
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	17-11-2021	19-05-2023	1	6	3
VINSCHRISTIAN COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	02-06-2014	31-03-2016	1	9	29
	OR					
<b>Total</b>				3	4	4

**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 Examination during the last year**



<b>AUR (No. of days)</b>	<b>Squad Member (No. of days)</b>	<b>External Examiner (Practical) (No. of days)</b>	<b>Central Evaluation(No. of scripts Evaluated)</b>	<b>Re-Evaluation (No. of scripts Evaluated)</b>
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It is certified that all the information provided are true to the best of my knowledge.



**Signature of the Faculty :**

<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	ELECTRONICS AND COMMUNICATION ENGINEERING
<b>Name of the Degree &amp; Course</b>	B.E.-ELECTRONICS AND COMMUNICATION ENGINEERING
<b>Name of the faculty member</b>	MRS. JESLINE JEME V
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	5-36E,KOLLENVILLAI,MARUTHOORKURICHY
Line 2	PALLIYADI,629169
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	-
<b>Mobile number</b>	+91 - 9488829757
<b>Email</b>	JESJENI94@GMAIL.COM
<b>Gender</b>	FEMALE
<b>Community</b>	BC
<b>PAN Number</b>	BSTPJ9223J
<b>Passport Number</b>	
<b>Aadhar Number</b>	565821302514
<b>Faculty code given by C.O.E.</b>	9636081
<b>Faculty code given by A.I.C.T.E.</b>	4719852234
<b>Date of Birth</b>	01-05-1994
<b>Age</b>	29
<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
U.G.	B.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2016	ST XAVIER'S CATHOLIC COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	8.09 CGPA	FIRST CLASS	
P.G.	M.E.	APPLIED ELECTRONICS	2018	MAR EPHRAEM COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	8.49 CGPA	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
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	02-07-2018	19-05-2023	4	10	18
<b>Total</b>				4	10	23

**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 Examination 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.

A handwritten signature in black ink, appearing to read "V. John", is centered within a light gray rectangular box.

**Signature of the Faculty :**



<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	COMPUTER SCIENCE AND ENGINEERING
<b>Name of the Degree &amp; Course</b>	B.E.-COMPUTER SCIENCE AND ENGINEERING
<b>Name of the faculty member</b>	MRS. ANSHA RUBY J M
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	31-67, PANANKACHI VILAI, MELANGALAM
Line 2	PUDUKADAI POST - 629171
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	-
<b>Mobile number</b>	+91 - 9995444505
<b>Email</b>	LOURDES.MOUNT@GMAIL.COM
<b>Gender</b>	FEMALE
<b>Community</b>	BC
<b>PAN Number</b>	DSNPA0671R
<b>Passport Number</b>	
<b>Aadhar Number</b>	230167910138
<b>Faculty code given by C.O.E.</b>	
<b>Faculty code given by A.I.C.T.E.</b>	AU1
<b>Date of Birth</b>	13-06-1993
<b>Age</b>	30
<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
U.G.	B.E.	COMPUTER SCIENCE AND ENGINEERING	2015	ST XAVIER'S CATHOLIC COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	78.60	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2018	VINSC CHRISTIAN COLLEGE OF ENGINEERING	ANNA UNIVERSITY	82.80	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
ARUNACHALA COLLEGE OF ENGINEERING FOR WOMEN	ASSISTANT PROFESSOR	11-10-2018	31-05-2019	0	7	21
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	08-11-2021	19-05-2023	1	6	12
<b>Total</b>				<b>2</b>	<b>2</b>	<b>4</b>

**V. Industrial Experience :**

Experience					

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Years	Months	Days
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**VI. C.O.E. Appointment Experience :****Capacity at which service is extended for the conduct of Examination during the last year**



<b>AUR (No. of days)</b>	<b>Squad Member (No. of days)</b>	<b>External Examiner (Practical) (No. of days)</b>	<b>Central Evaluation (No. of scripts Evaluated)</b>	<b>Re- Evaluation (No. of scripts)</b>
--------------------------------------	---	--	--	--

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



**Signature of the Faculty :**

<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	COMPUTER SCIENCE AND ENGINEERING
<b>Name of the Degree &amp; Course</b>	B.E.-COMPUTER SCIENCE AND ENGINEERING
<b>Name of the faculty member</b>	MRS. MAZHIL SAHAYA SWEETY D
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	SUNDAVILAI
Line 2	NATTALAM SOUTH - 629165
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	-
<b>Mobile number</b>	+91 - 7598601105
<b>Email</b>	VENUMAZHIL1.8@GMAIL.COM
<b>Gender</b>	FEMALE
<b>Community</b>	BC
<b>PAN Number</b>	CINPM6058F
<b>Passport Number</b>	
<b>Aadhar Number</b>	245283928304
<b>Faculty code given by C.O.E.</b>	9636061
<b>Faculty code given by A.I.C.T.E.</b>	2945407328
<b>Date of Birth</b>	19-07-1991
<b>Age</b>	32
<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
U.G.	B.TECH.	INFORMATION TECHNOLOGY	2012	RAJAS ENGINEERING COLLEGE	ANNA UNIVERSITY	70	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2015	DMI ENGINEERING COLLEGE	ANNA UNIVERSITY	78	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
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	06-06-2016	19-05-2023	6	11	14
<b>Total</b>				6	11	19

**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 Examination 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.

A handwritten signature in black ink on a light purple background. The signature appears to be 'D. Mazhil' with a horizontal line underneath the name.

**Signature of the Faculty :**

<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	COMPUTER SCIENCE AND ENGINEERING
<b>Name of the Degree &amp; Course</b>	B.E.-COMPUTER SCIENCE AND ENGINEERING
<b>Name of the faculty member</b>	MRS. ANISHA VERGIN M
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	254, II CROSS STREET, PONAPPANADAR COLONY,
Line 2	NAGERCOIL - 629004
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	-
<b>Mobile number</b>	+91 - 9488767558
<b>Email</b>	ANISHA.VERGIN@GMAIL.COM
<b>Gender</b>	FEMALE
<b>Community</b>	BC
<b>PAN Number</b>	GQPPM4279C
<b>Passport Number</b>	
<b>Aadhar Number</b>	281622977491
<b>Faculty code given by C.O.E.</b>	9636025
<b>Faculty code given by A.I.C.T.E.</b>	2301295793
<b>Date of Birth</b>	15-03-1991
<b>Age</b>	32
<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
U.G.	B.TECH.	INFORMATION TECHNOLOGY	2012	PSN ENGINEERING COLLEGE	ANNA UNIVERSITY	67	FIRST CLASS	
P.G.	M.TECH.	INFORMATION TECHNOLOGY	2014	FRANCIS XAVIER ENGINEERING COLLEGE (AUTONOMOUS)	ANNA UNIVERSITY	78	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
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	04-08-2014	19-05-2023	8	9	16
<b>Total</b>				8	9	20

**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 Examination 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.

A handwritten signature in blue ink, appearing to be 'D. H.', with a horizontal line underneath.

**Signature of the Faculty :**

<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	MATHEMATICS
<b>Name of the Degree &amp; Course</b>	S&H-MATHEMATICS
<b>Name of the faculty member</b>	MR. RAJAN D
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	2-103A, MEAKKEVILAGAM HOUSE, KANNATHANKUZH
Line 2	POOTTETI POST - 629157
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	-
<b>Mobile number</b>	+91 - 9487116933
<b>Email</b>	D.RAJANMATHS@GMAIL.COM
<b>Gender</b>	MALE
<b>Community</b>	BC
<b>PAN Number</b>	AUGPR8859L
<b>Passport Number</b>	
<b>Aadhar Number</b>	472232204685
<b>Faculty code given by C.O.E.</b>	9636007
<b>Faculty code given by A.I.C.T.E.</b>	2299679384
<b>Date of Birth</b>	10-04-1971
<b>Age</b>	52
<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
U.G.	B.SC.	OTHERS - MATHEMATICS	1991	OTHERS - NESAMONY MEMORIAL CHRISTIAN COLLEGE MARTHANDAM	MADURAI KAMARAJ UNIVERSITY	77	FIRST CLASS	
P.G.	OTHERS - M. PHIL	OTHERS - MATHEMATICS	2010	OTHERS - SIVANTHAR ADITANAR COLLEGE	MANOMANIAM SUNDARAR UNIVERSITY	61	FIRST CLASS	
P.G.	M.SC.	OTHERS -	2007	OTHERS - SCOTT CHRISTIAN	MANOMANIAM SUNDARAR UNIVERSITY	70	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
MARIA COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	26-03-2012	25-06-2013	1	2	31
UDAYA SCHOOL OF ENGINEERING	OTHERS - LECTURER	19-08-2009	24-03-2012	2	7	6
OTHERS - ST MARYSSCHOOL OF TECHNOLOGY PEERIMADE	OTHERS - LECTURER	04-06-2007	25-07-2008	1	1	22
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	01-08-2013	19-05-2023	9	9	19
<b>Total</b>				14	9	22

#### V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
THAKUR VAIDYANATH AIYAR AND CO CHENNAI	AUDIT ASSISTANT	AUDITING	28-08-1991	05-11-1993	2	2	9
RAMBAHADUR THAKUR LIMITED PEERMADE	JUNIOR ASSISTANT	CLERICKAL	01-03-1994	18-01-2002	7	10	18
<b>Total</b>					10	0	27


#### VI. C.O.E. Appointment Experience :

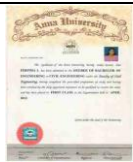

Capacity at which service is extended for the conduct of Exmination during the last year

AUR (No. of days) 12	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation(No. of scripts Evaluated) 5	Re-Evaluation (No. of scripts Evaluated)

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

Signature of the Faculty :

<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	CIVIL ENGINEERING
<b>Name of the Degree &amp; Course</b>	B.E.-CIVIL ENGINEERING
<b>Name of the faculty member</b>	MRS. FEBITHA L
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	A D J COTTAGE, THETTAI,
Line 2	KATTATHURAI - 629158
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	-
<b>Mobile number</b>	+91 - 9597213354
<b>Email</b>	LFEBITHA@GMAIL.COM
<b>Gender</b>	FEMALE
<b>Community</b>	BC
<b>PAN Number</b>	ACXPF3572H
<b>Passport Number</b>	
<b>Aadhar Number</b>	555711219700
<b>Faculty code given by C.O.E.</b>	9636049
<b>Faculty code given by A.I.C.T.E.</b>	3209726895
<b>Date of Birth</b>	09-06-1989
<b>Age</b>	34
<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
U.G.	B.E.	CIVIL ENGINEERING	2012	C S I INSTITUTE OF TECHNOLOGY	ANNA UNIVERSITY	7.86 CGPA	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2016	SATYAM COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.78 CGPA	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
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	04-07-2016	19-05-2023	6	10	16
Total				6	10	21

**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 Examination 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.

A handwritten signature in black ink, appearing to be 'A. E.', is written over a light pink rectangular stamp.

**Signature of the Faculty :**



<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	ELECTRONICS AND COMMUNICATION ENGINEERING
<b>Name of the Degree &amp; Course</b>	B.E.-ELECTRONICS AND COMMUNICATION ENGINEERING
<b>Name of the faculty member</b>	MRS. BINU JEYA SCHAFFTAR C
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	3/83 A, EDAIYAN VILAI, VADAKKANKARAI
Line 2	KAPPIYARAI POST - 629156
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	-
<b>Mobile number</b>	+91 - 7373379965
<b>Email</b>	BINUJEYA@YAHOO.COM
<b>Gender</b>	FEMALE
<b>Community</b>	BC
<b>PAN Number</b>	CERP B1460A
<b>Passport Number</b>	
<b>Aadhar Number</b>	421402538827
<b>Faculty code given by C.O.E.</b>	9636059
<b>Faculty code given by A.I.C.T.E.</b>	2898841007
<b>Date of Birth</b>	01-10-1989
<b>Age</b>	34
<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
U.G.	B.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2011	PONJESLY COLLEGE OF ENGINEERING	ANNA UNIVERSITY	80	FIRST CLASS	
P.G.	M.E.	APPLIED ELECTRIC	2013	NELLAI COLLEGE OF ENGINEERING	ANNA UNIVERSITY	8.71 CGPA	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
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	04-07-2016	19-05-2023	6	10	16
<b>Total</b>				6	10	21

**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 Examination 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.

A handwritten signature in purple ink, appearing to be 'D. Rao', is written over a light blue grid background.

**Signature of the Faculty :**

<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	ELECTRICAL AND ELECTRONICS ENGINEERING
<b>Name of the Degree &amp; Course</b>	B.E.-ELECTRICAL AND ELECTRONICS ENGINEERING
<b>Name of the faculty member</b>	MRS. BENILA MARY B L
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	10/53 POTTAI HOUSE, VIRIVILAI
Line 2	KANJAMPURAM POST - 629154
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	-
<b>Mobile number</b>	+91 - 9698785827
<b>Email</b>	BENI.JB22@GMAIL.COM
<b>Gender</b>	FEMALE
<b>Community</b>	BC
<b>PAN Number</b>	CFBPB3494P
<b>Passport Number</b>	
<b>Aadhar Number</b>	472470824917
<b>Faculty code given by C.O.E.</b>	9636033
<b>Faculty code given by A.I.C.T.E.</b>	2665478245
<b>Date of Birth</b>	19-12-1990
<b>Age</b>	33
<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
U.G.	B.E.	ELECTRICAL AND ELECTRONICS ENGINEERING	2012	MARTHANDAM COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	7.9 CGPA	FIRST CLASS	
P.G.	M.E.	HIGH VOLTAGE ENGINEERING	2014	COLLEGE OF ENGINEERING GUINDY	ANNA UNIVERSITY	7.21 CGPA	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
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	01-07-2015	19-05-2023	7	10	19
<b>Total</b>				7	10	24

**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 Examination 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.

Benita

**Signature of the Faculty :**

<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	CIVIL ENGINEERING
<b>Name of the Degree &amp; Course</b>	B.E.-CIVIL ENGINEERING
<b>Name of the faculty member</b>	MR. AHINO M P
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	CHETTICHATHALA VILAI VEEDU, NEDIASALAI
Line 2	ARUMANAI
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	-
<b>Mobile number</b>	+91 - 8807717434
<b>Email</b>	LOURDES.MOUNT@GMAIL.COM
<b>Gender</b>	MALE
<b>Community</b>	BC
<b>PAN Number</b>	BZYPP0423Q
<b>Passport Number</b>	
<b>Aadhar Number</b>	693522596919
<b>Faculty code given by C.O.E.</b>	9636050
<b>Faculty code given by A.I.C.T.E.</b>	AU1
<b>Date of Birth</b>	26-04-1992
<b>Age</b>	31
<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
U.G.	B.E.	CIVIL ENGINEERING	2013	NARAYAN AGURU COLLEGE OF ENGINEERING	ANNA UNIVERSITY	65	FIRST CLASS	
P.G.	M.E.	STRUCTURAL ENGINEERING	2016	MARIA COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA UNIVERSITY	76	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
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	22-02-2021	19-05-2023	2	2	26
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	04-07-2016	20-06-2018	1	11	17
<b>Total</b>				<b>4</b>	<b>2</b>	<b>14</b>

**V. Industrial Experience :**

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



n							
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**VI. C.O.E. Appointment Experience :****Capacity at which service is extended for the conduct of Exmination during the last year**



<b>AUR (No. of days)</b>	<b>Squad Member (No. of days)</b>	<b>External Examiner (Practical) (No. of days)</b>	<b>Central Evaluation (No. of scripts Evaluated)</b>	<b>Re- Evaluation (No. of scripts)</b>
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It is certified that all the information provided are true to the best of my knowledge.



**Signature of the Faculty :**

<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	ELECTRONICS AND COMMUNICATION ENGINEERING
<b>Name of the Degree &amp; Course</b>	B.E.-GENERAL ENGINEERING
<b>Name of the faculty member</b>	MS. SUJITHRA B S
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	CHITHRA BHAVAN, THERIPPURAM,
Line 2	PALUKAL POST
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	-
<b>Mobile number</b>	+91 - 9496091924
<b>Email</b>	SUJITHRAUNNIBS@GMAIL.COM
<b>Gender</b>	FEMALE
<b>Community</b>	MBC
<b>PAN Number</b>	JKPPS0856G
<b>Passport Number</b>	
<b>Aadhar Number</b>	668838197655
<b>Faculty code given by C.O.E.</b>	9636087
<b>Faculty code given by A.I.C.T.E.</b>	4725823197
<b>Date of Birth</b>	15-05-1995
<b>Age</b>	28
<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
U.G.	B.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2016	NARAYAN AGURU COLLEGE OF ENGINEERING	ANNA UNIVERSITY	70.3	FIRST CLASS	
P.G.	M.E.	APPLIED ELECTRONICS	2018	NARAYAN AGURU COLLEGE OF ENGINEERING	ANNA UNIVERSITY	7.7 CGPA	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
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	06-07-2018	19-05-2023	4	10	14

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

A handwritten signature in purple ink, appearing to read 'S. Singh', is positioned above a horizontal line.

**Signature of the Faculty :**

<b>Name of the College</b>	9636 - LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY
<b>Name of the Department</b>	ELECTRICAL AND ELECTRONICS ENGINEERING
<b>Name of the Degree &amp; Course</b>	B.E.-ELECTRICAL AND ELECTRONICS ENGINEERING
<b>Name of the faculty member</b>	MS. UMA S
<b>Regular Or Adjunct</b>	Regular
<b>Image</b>	
<b>Present Designation</b>	ASSISTANT PROFESSOR
<b>Residential Address</b> Line 1	PLOT NO 25-15B/1, THIVANDAKOTTAI,
Line 2	AMMANDIVILAI
<b>District</b>	KANYAKUMARI
<b>Telephone number</b>	-
<b>Mobile number</b>	+91 - 9443953280
<b>Email</b>	UMARETHNA18@GMAIL.COM
<b>Gender</b>	FEMALE
<b>Community</b>	BC
<b>PAN Number</b>	AFHPU7647H
<b>Passport Number</b>	
<b>Aadhar Number</b>	911112914893
<b>Faculty code given by C.O.E.</b>	
<b>Faculty code given by A.I.C.T.E.</b>	AU1
<b>Date of Birth</b>	18-11-1989
<b>Age</b>	34
<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
U.G.	B.E.	ELECTRONICS AND COMMUNICATION ENGINEERING	2011	NATIONAL ENGINEERING COLLEGE (AUTONOMOUS)	ANNA UNIVERSITY	74	FIRST CLASS	
P.G.	M.E.	APPLIED ELECTRONICS	2013	NATIONAL ENGINEERING COLLEGE (AUTONOMOUS)	ANNA UNIVERSITY	8.32	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
LOURDES MOUNT COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	22-02-2021	19-05-2023	2	2	26
Total				2	2	27

**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 Examination during the last year**

<b>AUR (No. of days)</b>	<b>Squad Member (No. of days)</b>	<b>External Examiner (Practical) (No. of days)</b>	<b>Central Evaluation(No. of scripts Evaluated)</b>	<b>Re-Evaluation (No. of scripts Evaluated)</b>
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It is certified that all the information provided are true to the best of my knowledge.



**Signature of the Faculty :**



**Fee:****Number of Scholarships offered by the Institution, duration and amount:**

BC Minority Scholarship – 45000 – 4years

Sc scholarship – 50000 – 4 years

First generation graduate – 50000 – 4 years

Number of seats sanctioned with the year of approval: 210 (2023 – 2024)

**Information of Infrastructure and other resources available:**

Room No.	Room type (mention Class Room/Laboratory/Toilet,etc.)
Clas15	Classroom
Clas16	Classroom
Clas17	Classroom
Clas18	Classroom
Clas19	Classroom
Clas20	Classroom
Class1	Classroom
Class2	Classroom
Class3	Classroom
Class4	Classroom
Class5	Classroom
Class6	Classroom
Class7	Classroom
Class8	Classroom
Class9	Classroom
Draw	CAD Center
Lab 40	Laboratory
Lab1	Laboratory
Lab10	Laboratory
Lab11	Laboratory
Lab12	Laboratory
Lab13	Laboratory
Lab14	Laboratory
Lab15	Laboratory
Lab16	Laboratory
Lab17	Laboratory
Lab18	Laboratory
Lab19	Laboratory
Lab2	Laboratory
Lab20	Laboratory
Lab21	Laboratory
Lab22	Laboratory
Lab23	Laboratory
Lab24	Laboratory
Lab25	Laboratory

Lab26	Laboratory
Lab27	Laboratory
Lab28	Laboratory
Lab29	Laboratory
Lab3	Laboratory
Lab30	Laboratory
Lab31	Laboratory
Lab32	Laboratory
Lab33	Laboratory
Lab34	Laboratory
Lab35	Laboratory
Lab36	Laboratory
Lab37	Laboratory
Lab38	Laboratory
Lab39	Laboratory
Computer Center	155
Language Laboratory	132
Library&Reading Room	420

## Admission Procedure

A pass in the HSC (Academic) or its equivalent with a minimum average percentage in Mathematics, Physics and Chemistry put together.

Lateral Entry:

The minimum eligibility marks for admission to second year B.E/B.Tech degree courses under Lateral entry for Diploma and B.Sc candidates.

+The candidate who have passed SSLC + 3 year Diploma (any stream) recognized by Central/State Governments.

## 11. Admission Quota

Admission Quota	: Engineering & Technology
Entrance test / admission criteria	: No entrance test in TamilNadu.
Admission based on the marks obtained in +2 examinations:(Physics+chemistry+mathematics)	
Fees in rupees	: Rs.50,000/-year
Number of Fee Waivers offered	: Not applicable
Admission calendar	: May to June
PIO Quota	: No

## 12. Academic Sessions

Academic Sessions	: Engineering & Technology
Examination System, Year/Semester	: Semester Pattern @ Two semester per year
Period Of declaration of results	: Per semester

## 13. Counselling / Monitoring

Counselling/Monitoring

Career Counselling

Medical Facilities

### Barrier free Built environment for disabled and elderly persons:



### Fire and Safety Certificate:

TAMIL NADU FIRE - RESCUE SERVICE  
FIRE -LICENSE  
(See Section 13)

L.Dis.No: 509/ A / 2024 Date: 23.01.2024

License is hereby granted under section 13 of the Tamil Nadu Fire Service Act, 1985 to for Running Engineering College in the name of "M/s. Lourdes Mount College of Engineering & Technology" within the Jurisdiction Vilavancode Taluk at the Premises Sy.No: 431/1A, 439/2B, 5A2, 5B, 6, 7, 440/1, 2A, 2B, 3, 4, 5, 6, 7, 8, 9, 441/27, 445/9A2, 445/14A of Nattalam A Village, Nattalam Village Panchayath, Vilavancode Taluk, Kanyakumari District. Subject to the Condition noted thereon and such other condition as may be prescribed.

This Fire License is valid for one year from the date of issue of this license.

CONDITIONS:

- 1) The Installed Fire Fighting Equipments should be maintained in good condition at all times.
- 2) As per Tamil Nadu Combined building development Rules-2019 Setback area of all around the Building and other rules should be followed otherwise regularization of the deviated building should be obtained approval within six months from competent authority (DTCP).
- 3) All exits should be free of obstructions. Exits should be clearly visible and the routes to reach the exit shall be clearly marked.
- 4) Trained Fire personnel should be available to operate the Fire Fighting Equipments in case of any emergency
- 5) Mock Drill Should be conducted periodically and the date of conduction should be informed to this office well in advance to enable the team to make suggestions if any
- 6) Dumping of waste materials anywhere should be avoided. Dust bin should be cleared frequently
- 7) Any erection of permanent or temporary structure should be intimated to this department.
- 8) Do's Don'ts in time of emergencies should be available in a laminated hanging card.
- 9) In Compliance to section 3.2 of BIS 12459:1988-code of practice for fire safety in cable regularization, a transparent fire retardant coating of 3 meter shall be applied on all electrical cables at both sides of termination points in every electrical panel and all the cables in the distribution box.

Office Seal with Date: 23 JAN 2024

To: The Managing Director, M/s. Lourdes Mount College of Engineering & Technology, Mullakanjavai, Nattalam, Kanyakumari District, 629 195.

District Officer  
Fire & Rescue Services  
Kanyakumari District, Nagercoil

**CRUZANTO NY AUGUSTINE** Digitally signed by CRUZANTONY AUGUSTINE Date: 2024.03.05 14:56:25 +05'30'

## 14. Students Activity Body

**Sports Activities** –Facilities available in the sports are

### 1. Outdoor Games

Football, Kabaddi , Ball badminton,  
Tennikoit, Cricket, Volley ball

### 2. Indoor Games

Carrom, Chess

## Teaching learning Process:

Our institution constituted a committee to suggest modalities for implementation of the training policy for technical teachers. The committee comprised of following experts as members:

1. Dr. S.S Vinsley (Principal, LMCET) Chairperson
2. Dr. S.R Breesha(HOD/EEE) Member
3. Mrs. Kalpana (HOD/CSE) Member
4. Mr. Rajan (HOD/S&H) Member
5. Mr. Arun (HOD/CIVIL) Member
6. Mr. GODWIN M (HOD/MECH) Member

To suggest modalities for implementation of the scheme of Training Policy for Technical Teachers and scheme for starting a mandatory certificate course for teachers at the entry level.

## Short video of Infrastructure and facilities available w.r.t the courses in website:

<https://youtu.be/llPX1n8Ca7Y>

## Innovation Cell:

Innovation Cell will assist students and also encourage young talented minds by providing them a perfect platform for showcasing their talents, working together as teams and participate in various competitions. It will also serve to provide the students a platform to excel in their specialized area of interest.

**Staff Coordinator** : Mrs.Nisha, AP

**Student Coordinator:** Aromal.V (III / CSE)

### Members:

Mrs.Aarthy Amsalekha Sivakami, AP / CSE  
Mr.Godwin G AP / Mech  
Mrs.Jenila AP/Maths

## Social Media Cell:

Social media cell is an initiative taken by the Lourdes Mount College of Engineering and Technology to create a platform for students and faculty to interact and engage on social media. The Cell helps to connect with the students, create digital campaigns, and share the latest developments and achievements of the institute.

**Staff Coordinator** : Mrs.Anamol A J

### Members:

1. Mrs.Jenisha Sherin AP/CSE
2. Mrs.Daniya AP/ECE
3. Dr.Prabha AP/Maths
4. Mrs.Abisha AP/Civil
5. Mr.Alin Vinoj AP/ Mech

**Placement Details of Students:**  
**CSE department:**

963619104001	Annie R	Foxconn India Pvt. Ltd. (2.25 p.a.)
		SL Lumax Ltd. (2.5p.a.)
		Career Labs(2.25p.a.)
963619104002	Asheem Bruce D	SL Lumax Ltd. (2.5p.a.)
963619104006	Christal Sowmia D V	Career Labs (2.25 p.a.)
963619104008	Jebin C	SL Lumax Ltd. (2.5p.a.)
963619104010	Mukesh R	SL Lumax Ltd. (2.5p.a.)
963619104011	Nivehitha D S	Foxconn India Pvt. Ltd. (2.25 p.a.)
		SL Lumax Ltd.(2.5p.a.)
963619104013	Prakash H k	SL Lumax Ltd. (2.5p.a.)

**ECE department:**

963619105001	Anu S V	RSM Autocast LTD.(2 p.a.),JBM Auto(2.25 p.a.)
		JBM Auto(2.25 p.a.)
963619105002	Arun Kumar S	RSM Autocast LTD.(2 p.a.),JBM Auto(2.25 p.a.)
		JBM Auto(2.25 p.a.)
963619105003	Biju V V	RSM Autocast LTD.(2 p.a.),JBM Auto(2.25 p.a.)
		JBM Auto(2.25 p.a.)
963619105004	Keerthinlal C J	RSM Autocast LTD.(2 p.a.),JBM Auto(2.25 p.a.)
		JBM Auto(2.25 p.a.)
963619105005	Prasanth L	RSM Autocast LTD.(2 p.a.),JBM Auto(2.25 p.a.)
		JBM Auto(2.25 p.a.)
963619105006	Shane S S Swetha	RSM Autocast LTD.(2 p.a.),JBM Auto(2.25 p.a.)
		JBM Auto(2.25 p.a.)

**EEE department:**

963619106001	Asbin Das D S	RSM Autocast LTD.(2 p.a.)
		JBM Auto(2.25 p.a.)
963619106002	Ashlin Asok A	Foxconn India Pvt. Ltd.(2.25 p.a.)
		SL Lumax Ltd (2.25 p.a.)
963619106003	Biju P	RSM Autocast LTD.(2 p.a.)
		JBM Auto(2.25 p.a.)
963619106005	Tellma J	Foxconn India Pvt. Ltd.(2.25 p.a.)
		SL Lumax Ltd (2.25 p.a.)

**List of Mous:**

1. Chandra Motors – 28<sup>th</sup> August 2021 to Till Date
2. D.G.Motors - 28<sup>th</sup> August 2021 to Till Date
3. J.C.C.Constructions – 31<sup>st</sup> August to Till Date
4. Nanchil Control System (P) Ltd - 28<sup>th</sup> August 2021 to Till Date
5. Power Pack Systems - 28<sup>th</sup> August 2021 to Till Date

**15. Name of the information officer for RTI**

Name of the information officer for RTI :Dr.S.S.Vinsley

Designation : Principal

Phone number with STD code : 04651-266744

Fax number with STD code : 04651-267733