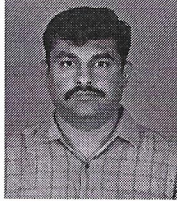





Name of the College	1128 - T J S ENGINEERING COLLEGE
Name of the Department	COMPUTER SCIENCE AND ENGINEERING
Name of the Degree & Course	M.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	DR. KANNAN S
Regular Or Adjunct	Regular
Image	
Present Designation	PROFESSOR
Residential Address Line 1	NO.35, GANAPATHI STREET,
Line 2	VALLIOOR, NELAI DIST - 627118
District	TIRUNELVELI
Telephone number	-
Mobile number	+91 - 6382906185
Email	KANNANCSE77@GMAIL.COM
Gender	MALE
Community	OC
PAN Number	BQFPK6718G
Passport Number	
Aadhar Number	891816285586
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	AU1
Date of Birth	25-07-1977
Age	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.	COMPUTER SCIENCE AND ENGINEERING	2001	JAYAMATHA ENGINEERING COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	65.45	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2008	THIAGARAJAR COLLEGE OF ENGINEERING (AUTONOMOUS)	ANNA UNIVERSITY	54	FIRST CLASS	
PH.D.	PH.D.	OTHERS - INFORMATION AND COMMUNICATION	2017	NATIONAL ENGINEERING COLLEGE (AUTONOMOUS)	ANNA UNIVERSITY	HIGHLY RECOMMENDED		

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis	MULTIMODEL BIOMETRIC AUTHENTICATION USING FUSION APPROACH
III. Faculty in which Ph.D. was awarded	FACULTY OF INFORMATION AND COMMUNICATION ENGINEERING
IV. Academic Excellence (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
M E T ENGINEERING COLLEGE	PROFESSOR	28-12-2018	31-12-2022	4	0	4
T J S ENGINEERING COLLEGE	PROFESSOR	24-04-2023	28-02-2024	0	10	5
SCAD COLLEGE OF ENGINEERING AND TECHNOLOGY	OTHERS - LECTURER	23-01-2009	16-07-2010	1	5	25
JOE SURESH ENGINEERING COLLEGE	ASSISTANT PROFESSOR	19-07-2010	06-06-2012	1	10	19
THAMIRABHARANI ENGINEERING COLLEGE	ASSISTANT PROFESSOR	15-06-2012	27-08-2014	2	2	13
JOE SURESH ENGINEERING COLLEGE	ASSOCIATE PROFESSOR	01-09-2014	24-11-2018	4	2	24
OTHERS - RAJA COLLEGE OF ENGINEERING AND TECHNOLOGY	OTHERS - LECTURER	01-08-2001	12-01-2009	7	5	12
Total				22	1	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 :

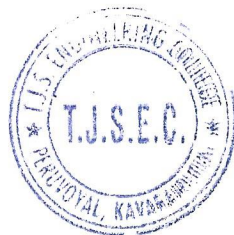
Capacity at which service is extended for the conduct of Exmination during the last year

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 :



(Handwritten signature in blue ink)

PRINCIPAL
T.J.S. ENGINEERING COLLEGE
Peruvoyal, Kavaraipeetai,
Gummidipoondi Taluk,
Thiruvallur Dist - 601 206.

Name of the College	1128 - T J S ENGINEERING COLLEGE
Name of the Department	COMPUTER SCIENCE AND ENGINEERING
Name of the Degree & Course	M.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MR. SHANMUGASUNDARAM M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	NO. 1044. 43RD STREET TVS COLONY ANNA NAGAR WESTERN EXTN
Line 2	TIRUVALLUR - 600101
District	TIRUVALLUR
Telephone number	-
Mobile number	+91 - 9790972638
Email	MSHANS@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	ANSPM6935F
Passport Number	
Aadhar Number	637221600587
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	19316211161
Date of Birth	16-07-1966
Age	58
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.	COMPUTER SCIENCE AND ENGINEERING	1988	NATIONAL ENGINEERING COLLEGE (AUTONOMOUS)	MADURAI KAMARAJ UNIVERSITY	70	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	1992	COLLEGE OF ENGINEERING GUINDY	ANNA UNIVERSITY	71	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
R M K COLLEGE OF ENGINEERING AND TECHNOLOGY (AUTONOMOUS)	ASSOCIATE PROFESSOR	17-06-2014	13-05-2019	4	10	27
OTHERS - KALASALINGAM UNIVERSITY	ASSOCIATE PROFESSOR	17-01-2000	20-01-2003	3	0	4
OTHERS - HINDUSTAN UNIVERSITY	ASSOCIATE PROFESSOR	10-02-2009	21-04-2011	2	2	12
PONDICHERRY UNIVERSITY	ASSISTANT PROFESSOR	05-08-1992	28-02-1995	2	6	27
OTHERS - CALEDONIAN COLLEGE OF ENGINEERING OMAN	OTHERS - FACULTY	05-03-2003	16-06-2006	3	3	12
Total				15	11	27

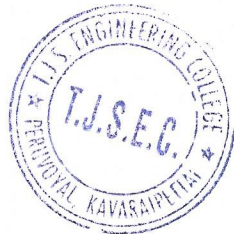
V. Industrial Experience :							
Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
MTECH MAHINDRA	SPECIALIST FACULTY	SPACIALIST FACULTY	01-08-2006	23-01-2009	2	5	23
Total					2	5	25

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)

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


M. Manjagan



Signature of the Faculty :



S. S. S.

PRINCIPAL
T.J.S. ENGINEERING COLLEGE
 Peruvoyal, Kavaraipettai,
 Gummidipoondi Taluk,
 Thiruvallur Dist - 601 206.

Name of the College	1128 - T J S ENGINEERING COLLEGE
Name of the Department	COMPUTER SCIENCE AND ENGINEERING
Name of the Degree & Course	M.E.-COMPUTER SCIENCE AND ENGINEERING
Name of the faculty member	MRS. AGNES J
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	NO. 1105, PRITHIV NAGAR,
Line 2	GUMMIDIPOONDI - 601201
District	TIRUVALLUR
Telephone number	-
Mobile number	+91 - 7904496805
Email	AGNES.PRAVIN@GMAIL.COM
Gender	FEMALE
Community	BC
PAN Number	BWOPA5052P
Passport Number	
Aadhar Number	443295630372
Faculty code given by C.O.E.	1128233
Faculty code given by A.I.C.T.E.	111054732021
Date of Birth	20-06-1984
Age	40
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.TECH.	INFORMATION TECHNOLOGY	2005	BHAJARANG ENGINEERING COLLEGE	ANNA UNIVERSITY	70	FIRST CLASS	
P.G.	M.E.	COMPUTER SCIENCE AND ENGINEERING	2011	G K M COLLEGE OF ENGINEERING AND TECHNOLOGY	ANNA 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
T J S ENGINEERING COLLEGE	ASSISTANT PROFESSOR	20-12-2021	28-02-2024	2	2	8
INDIRA INSTITUTE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	01-07-2011	30-05-2013	1	10	30
BHAJARANG ENGINEERING COLLEGE	OTHERS - LECTURER	01-07-2005	30-05-2008	2	10	30
Total				7	0	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 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 :

J. Agnu



J.S.A.

**PRINCIPAL
T.J.S. ENGINEERING COLLEGE
PERUVOYAL, GUMMIDIPOONDI T.K.
(NEAR KAVARAIPETTAI)
THIRUVALLUR DIST - 601 206**