

**ANNA UNIVERSITY  
CHENNAI – 600 025**



**INDIVIDUAL FACULTY DATA SHEET**  
[Details to be typed including Principal of the college]

Name of the College : JAYA ENGINEERING COLLEGE  
Name of the Department : TEXTILE TECHNOLOGY  
Name of the Degree & Course : B.TECH & TEXTILE TECHNOLOGY  
Name of the faculty member : V.VEENA SINDHUJA  
Regular or Adjunct : REGULAR  
Present Designation : ASSISTANT PROFESSOR  
Residential Address : BF 2, AJITH RESIDENCY, KAMBAR NAGAR EXTN,  
PERIYAR NAGAR, KOLATHUR, CHENNAI - 82.  
Contact Nos. : **Landline:** **Mobile:** 9677249138  
**Email:** vnatextile@gmail.com  
Gender : FEMALE  
Community : BC  
PAN No : AGBPV9899F **Passport Number:**  
Aadhar : 447208390219  
Date of Birth and Age : 27.07.1981 & 42  
Faculty code given by COE : 1108209 **Faculty ID given by AICTE:**  
Date of joining the present post : 26.06.2008  
Scale of pay :  
Present basic pay :  
Total salary :

**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	Class obtained
UG	B.TECH	TEXTILE TECHNOLOGY	2002	RVS COLLEGE OF ENGINNERING AND TECHNOLOGY	MADURAI KAMARAJ UNIVERSITY	81.6%	FIRST
PG	M.TECH	TEXTILE TECHNOLOGY	2004	KUMARAGURU COLLEGE OF TECHNOLOGY	ANNA UNIVERSITY CHENNAI	77%	FIRST
Ph.D.							

\* Enclose copies of certificates duly attested by the faculty member and the Principal as proof.

I.a. Additional Qualification :  
i. GATE Score (In case of B.E. / B.Tech.)  
ii. NET / SLET (In case of M.C.A. / M.Sc. / M.A.)

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

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

IV. Academic Experience:

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
JAYA ENGINEERING COLLEGE	ASSISTANT PROFESSOR	26.06.2008	TILL DATE	13	11	-
WOMENS POLYTECHNIC	LECTURER	12.06.2004	03.06.2006	1	11	21
<b>Total</b>				15	10	21

V. Industrial Experience:

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

VI. COE Appointment Experience:

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

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------	----------------------	----------------------

**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)

VI I. For Adjunct Faculty:

Details of current employer with full postal address:

Email:

Phone Number:

ii. No objection certificate from the current employer from the company official letter head

**Note - Principal eligibility as per AICTE norms**

Signature of the Principal  
(College Seal with Name of the Principal)