

**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 : P.VIJAYAKUMAR

Regular or Adjunct : REGULAR

Present Designation : ASSISTANT PROFESSOR

Residential Address : D.NO: 3, 10 TH STREET, ANJANEYA PURAM, KAKALUR - 602003, THIRUVALLUR.

Contact Nos. : **Landline:**                      **Mobile:** 9788456060  
: **Email:** vijayakumar.emailbox@gmail.com

Gender : MALE

Community : BC

PAN No : AIEPV8853C                      **Passport Number:**

Aadhar : 757414759593

Date of Birth and Age : 25.02.1988 & 34

Faculty code given by COE : 1108269                      **Faculty ID given by AICTE:** 1-3188702287

Date of joining the present post : 20.06.2016

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
DIPLOMA	DK.TECH	KNITTING TECHNOLOGY	2008	ERODE INSTITUTE OF TECHNOLOGY	DOTE	86%	FIRST
UG	B.TECH	TEXTILE TECHNOLOGY	2011	KSR COLLEGE OF TECHNOLOGY	ANNA UNIVERSITY CHENNAI	8.56	FIRST
PG	M.TECH	TEXTILE TECHNOLOGY	2006	PSG COLLEGE OF TECHNOLOGY	ANNA UNIVERSITY CHENNAI	8.14	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	20.06.2016	TILL DATE	05	11	10
<b>Total</b>				05	11	10

**V. Industrial Experience:**

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
SOFINCO INDUSTRIES PVT LTD	FACTORY MANAGER	MANAGEMENT & ADMINISTRATION	01.04.2013	12.06.2016	03	02	11
<b>Total</b>					03	02	11

**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)