






Name of the College	7304 - ERODE SENGUNTHAR ENGINEERING COLLEGE (AUTONOMOUS)
Name of the Department	CIVIL ENGINEERING
Name of the Degree & Course	B.E.-CIVIL ENGINEERING
Name of the faculty member	DR. BALAMURUGAN P
Regular Or Adjunct	Regular
Image	
Present Designation	ASSOCIATE PROFESSOR
Residential Address Line 1	L-39,TNHB,RAJIVE GANDHI NAGAR,SOWRIPALAYAM POST
Line 2	641028
District	COIMBATORE
Telephone number	-
Mobile number	+91 - 9940740262
Email	BALAMURUGAN.GEO@GMAIL.COM
Gender	MALE
Community	SC
PAN Number	ARKPB5140M
Passport Number	
Aadhar Number	440215686772
Faculty code given by C.O.E.	7304013
Faculty code given by A.I.C.T.E.	410939421
Date of Birth	10-06-1981
Age	42
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.SC.	OTHERS - GEOGRAPHY	2003	OTHERS - GOVERNMENT ARTS COLLEGE	BHARATHI YAR UNIVERSITY	58	SECOND CLASS	
P.G.	M.SC.	OTHERS - APPLIED GEOGRAPHY	2005	OTHERS - GOVERNMENT ARTS COLLEGE	BHARATHI YAR UNIVERSITY	62	FIRST CLASS	
P.G.	M.TECH.	OTHERS - GIS	2009	OTHERS - BHARATHI DASAN UNIVERSITY	BHARATHI DASAN UNIVERSITY	72	FIRST CLASS	
PH.D.	PH.D.	GEO INFORMATICS ENGINEERING	2019	OTHERS - BHARATHI YAR UNIVERSITY	BHARATHI YAR UNIVERSITY	Y		

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

ASSESSMENT OF GROUNDWATER QUALITY AND IMPROVEMENT TECHNIQUES USING GEOINFORMATICS A CASE STUDY ON COIMBATORE CITY

III. Faculty in which Ph.D. was awarded

OTHERS

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
ERODE SENGUNTHAR ENGINEERING COLLEGE (AUTONOMOUS)	ASSISTANT PROFESSOR	27-07-2009	31-01-2019	9	6	5
ERODE SENGUNTHAR ENGINEERING COLLEGE (AUTONOMOUS)	ASSOCIATE PROFESSOR	01-02-2019	26-05-2023	4	3	26
Total				13	10	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 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 : 