




Name of the College	7304 - ERODE SENGUNTHAR ENGINEERING COLLEGE (AUTONOMOUS)
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	B.E.-GENERAL ENGINEERING
Name of the faculty member	MR. BALA KUMARAN A
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	38 NILIGRIS GARDEN , VENDIPALAYAM, SRINIVASARAO STREET
Line 2	ERODE-638002
District	ERODE
Telephone number	-
Mobile number	+91 - 9600812511
Email	VICHU432@GMAIL.COM
Gender	MALE
Community	BC
PAN Number	BKKPB9206N
Passport Number	
Aadhar Number	810556577111
Faculty code given by C.O.E.	
Faculty code given by A.I.C.T.E.	7461886527
Date of Birth	22-06-1991
Age	31
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.	MECHANICAL ENGINEERING	2012	THE KAVERY COLLEGE OF ENGINEERING	ANNA UNIVERSITY	84.3	FIRST CLASS	
P.G.	M.E.	CAD/CAM	2015	KUMARAGURU COLLEGE OF TECHNOLOGY (AUTONOMOUS)	ANNA UNIVERSITY	86.7	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
EXCEL COLLEGE OF ENGINEERING AND TECHNOLOGY	ASSISTANT PROFESSOR	15-06-2015	24-04-2018	2	10	10
ERODE SENGUNTHAR ENGINEERING COLLEGE (AUTONOMOUS)	ASSISTANT PROFESSOR	03-06-2019	18-02-2022	2	8	16
Total				5	6	0

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
SABARI MURUGAN ENGINEERING WORKS	ASST MANAGER	MANAGING	01-05-2018	31-05-2019	1	0	31
Total					1	1	1

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)
<p>It is certified that all the information provided are true to the best of my knowledge.</p>				

Signature of the Faculty :

