## K.S.RANGASAMY COLLEGE OF TECHNOLOGY, TIRUCHENGODE - 637215 (Autonomous)

## **Faculty Profile**



Name of the faculty : S.CHRISTOPHER AMALA DASS

**Department** : English

**Designation** : ASSISTANT PROFESSOR

**Date of Joining** : 09/09/2023

**Residential Address** : 323 / 70 E, ANBU NAGAR, HASTHAM PATTI, SALEM(DT) - 636 007.

Contact Nos. : Landline :- Mobile :9080109583

**E-Mail** : christopheramaladass@ksrct.ac.in

Gender : Male

**Community** : OC / BC / MBC / SC / ST

PAN Number : AHQPC3507M Aadhar Number: 574223680454

Date of Birth and Age : 07/06/1973 & 51 years

I. Particulars of Educational Qualification : (only Completed)

Category	Name of the Degree	Specialization	Month & Year of Pass	Name of the College	Name of the University	% of Marks / Grades obtained	Class obtained
UG	B.A	English	1995 1995	G.T.N ARTS COLLEGE DINDUGAL	Madurai Kamaraj University	73	First Class
PG	M.A	English	1997 1997	Madura College	Madurai Kamaraj University	68	First Class

<sup>\*</sup> Enclose copies of certificates and testimonials 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 as on May,2024

Name of the Callege	Designation	Date of	Date of	Experience		
Name of the College	Designation	Joining	Relieving	Years	Months	Days
K.S.Ranagasamy College of Technology-	Assistant Professor	09/09/2023	03/11/2023	0	2	5
Sri Shanmugha College of Engineering Technology, Sankari-	Assistant Professor	12/09/2022	08/09/2023	1	0	3
Muthayammal College Engineering, Rasipuram-	Assistant Professor	02/04/2014	09/09/2022	8	5	8
SRM University Chennai-	Assistant Professor	09/07/2009	31/05/2014	4	10	23
CMS College Engineering, Eranapuram Namakkal-	Sr. Lecturer	24/02/2008	05/07/2009	1	5	18
SUDHASAN Engineering, Puthukottai-	Lecturer	06/06/2002	30/05/2003	0	11	25
Total					11	22

## V. Industrial Experience

Ī	Name of the Organization	Designation			Date of Relieving	Experience			
	Name of the Organization					Years	Months	Days	
- Nil -									

VI. Other Relevant Information

: - Nil -