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

## **Faculty Profile**



Name of the faculty : K.KAVITHA

Department : Mathematics

**Designation** : ASSISTANT PROFESSOR

**Date of Joining** : 14/06/2021

Residential Address : 10/18 ANGALAMMAN KOVIL STREET, VENNANDUR(PO),

RASIPURAM(TK), NAMAKKAL(DT).

Contact Nos. : Landline :- Mobile : 9600933007

E-Mail : kavithak@ksrct.ac.in

Gender : Female

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

PAN Number : GKFPK8561P Aadhar Number : 498796029599

Date of Birth and Age : 09/05/1985 & 39 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.Sc	Mathematics	May 2005	Mahendra Arts and Science College	Periyar University	63	First
PG	M.Sc	Mathematics	November 2007	Vivekanandha College of Arts and Science women	Periyar University	65	First
PG	M.Phil	Mathematics	December 2015	Mahendra Arts and Science College	Periyar University	75	First

<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

Nome of the College	Designation	Date of	Date of	Experience		
Name of the College	Designation	Joining	Relieving	Years	Months	Days
K.S.Rangasamy College of Technology, Tiruchengode	Assistant Professor	14/06/2021	-	2	11	18
Vivekanandha College of Arts and Science for women (Autonomous)-	Assistant Professor	03/06/2016	16/04/2019	2	10	14
K.S.R. Polytechnic College, Tiruchengode	Lecturer	22/06/2011	30/06/2014	3	0	9
Sri Venkateshwara Polytechnic College Vennandur -	Lecturer	03/06/2008	01/03/2010	1	9	1
	Total	10	7	12		

## V. Industrial Experience

Ī	Name of the Organization	Designation		1	Date of Relieving	Experience				
	Name of the Organization					Years	Months	Days		
	- Nil -									

VI. Other Relevant Information

: - Nil -