Name of the College	1101 - AALIM MUHAMMED SALEGH COLLEGE OF ENGINEERING		
Name of the Department	SCIENCE AND HUMANITIES		
Name of the Degree & Course	B.EGENERAL ENGINEERING		
Name of the faculty member	DR. TITUS SMITH T		
Regular Or Adjunct	Regular		
Image			
Present Designation	ASSISTANT PROFESSOR		
Residential Address Line 1	A2 SUBHAM APARTMENTS, UNITED INDIA COLONY, 3RD, MAIN ROAD, KODAMBAKKAM		
Line 2	CHENNAI - 600 024		
District	CHENNAI		
Telephone number	-		
Mobile number	+91 - 9940084845		
Email	TITUSPHSMITH@GMAIL.COM		
Gender	MALE		
Community	BC		
PAN Number	AQIPT4100E		
Passport Number			
Aadhar Number	600100629973		
Faculty code given by C.O.E.	1101		
Faculty code given by A.I.C.T.E.	143390119209		
Date of Birth	18-04-1976		
Age	48		
I. Particulars of Educational Qualification : (only completed	1)		

Category	Name of the Degree	Specializ ation	Year of Passing	Name of the College	Name of the Universit y	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.A.	OTHERS - TAMIL	1996	OTHERS - VHNSN COLLEGE VIRUDHU NAGAR	MADURAI KAMARAJ UNIVERSI TY	48.81	OTHERS - THIRD CLASS	Zichurai Ramani Initersoly
P.G.	OTHERS - M.A	OTHERS - TAMIL	1999	OTHERS - ARYA NADAR JANAKI AMMAL COLLEGE SIVAKASI	MADURAI KAMARAJ UNIVERSI TY	75.56	DISTINCT ION	Madural America Interesting
PH.D.	PH.D.	OTHERS - TAMIL	2005	OTHERS - ARYA NADAR JANAKI AMMAL COLLEGE SIVAKASI	MADURAI KAMARAJ UNIVERSI TY	Y		The second secon

<sup>\*</sup> Upload Scanned copy of Original Degree Certificate.

## I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score : File :

II. Title of Ph.D. Thesis	TAMIL WORKS OF PROF S SHANMUGASUNDARAM
III. Faculty in which Ph.D. was awarded	FACULTY OF SCIENCE AND HUMANITIES
IV. Academic Experience :	

## IV. Academic Experience : (Start from the Current working Experience) \*

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently	Experience		
Name of the Conege	Designation	Johning Date	Working Institutions	Years	Months	Days
AALIM MUHAMMED SALEGH COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	01-03-2023	14-02-2024	0	11	14
			Total	0	11	19

V. Industrial Experience :	
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Name of the	Designation Nature of Work		Joining Date	Relieving Date	Experience		
Organisation	Designation	Work	Joining Date		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	Squad	External Examiner	Central Evaluation	Re-Evaluation
(No. of	Member	(Practical)	(No. of scripts	(No. of scripts
days)	(No. of days)	(No. of days)	Evaluated)	Evaluated)

It is certified that all the information provided are true to the best of my knowledge.



**Signature of the Faculty:**