Name of the College	9523 - PSN ENGINEERING COLLEGE				
Name of the Department	CIVIL ENGINEERING				
Name of the Degree & Course	B.ECIVIL ENGINEERING				
Name of the faculty member	MS. MAKESHWARI N				
Regular Or Adjunct	Regular				
Image Sector Sec					
Present Designation	ASSISTANT PROFESSOR				
Residential Address 2/7, MARIAMMAN KOVIL NORTH STRI Line 1 2/7, MARIAMMAN KOVIL NORTH STRI					
Line 2	T K KULAM PETTAI -627010				
District	TIRUNELVELI				
Telephone number	-				
Mobile number	+91 - 8220653704				
Email	SRCEMAHESHWARI@GMAIL.COM				
Gender	FEMALE				
Community	BC				
PAN Number	BHLMN3116K				
Passport Number					
Aadhar Number	924103249666				
Faculty code given by C.O.E.					
Faculty code given by A.I.C.T.E.					
Date of Birth	12-08-1987				
Age	36				
I. Particulars of Educational Qualification : (only completed)					

Category			Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificat e
U.G.	B.E.	CIVIL ENGINEE RING	2012	SARDAR RAJA COLLEGE OF ENGINEE RING	ANNAMAL AI UNIVERSI TY	79	FIRST CLASS	A second se
P.G.	M.E.	STRUCTU RAL ENGINEE RING	2017	SARDAR RAJA COLLEGE OF ENGINEE RING	ANNA UNIVERSI TY	81	FIRST CLASS	

* 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	Experience		
Name of the Coneye	Designation	Joining Date	Working Institutions	Years	Months	Days
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	12-06-2019	09-02-2023	3	7	28
PSN ENGINEERING COLLEGE	ASSISTANT PROFESSOR	06-09-2012	12-03-2014	1	6	7
	•	•	Total	5	2	6

V. Industrial Experience :

Name of the	Desimution	Nature of Morie	Isining Data	Relieving Date	Experience		
Organisation	Designation	Nature of Work	Joining Date			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)

N. Mundament

Signature of the Faculty :