



**A.V.V.M. SRI PUSHPAM COLLEGE (AUTONOMOUS),  
POONDI – 613503, THANJAVUR – DT.**



**STAFF PROFILE 2017-18**

1. Name of the Staff : **Dr. N. Rathikala**  
 2. Designation : **Assistant Professor**  
 3. Academic Qualification : **M.Com., B.Ed., M.Phil., Ph.D.**

Course	UG	PG	M.PHIL.	PH.D.
Year	2003	2005	2006	Sep 2015
<b>College &amp; University</b>	<b>Ponnaiya Ramajayam College, Thanjavur Bharathidasan University</b>	<b>A.V.V.M. Sri Pushpam College (Autonomous), Poondi Bharathidasan University</b>	<b>A.V.V.M. Sri Pushpam College (Autonomous), Poondi Bharathidasan University</b>	<b>A.V.V.M. Sri Pushpam College (Autonomous), Poondi Bharathidasan University</b>

4. Date of Birth & Age : 05.07.1979
5. Date of Appointment : Self – Finance : 

D	D	M	M	Y	Y	Y	Y
2	4	0	7	2	0	0	9
FIP :							
Aided :							
6. Total Service : 8 Years 5 Months
7. Teaching Experience in completed years : UG  PG  M.Phil.
8. Residential Address : East Thirubuvanam, Saliyamangalam (Po), Thanjavur(Dt)  
 Mobile Number : 8940282902  
 E-Mail Address : [rathikala09@gmail.com](mailto:rathikala09@gmail.com)
9. No. of Orientation / Refresher Courses and Training Programmes attended : 01
10. Whether FDP availed, if yes, furnish details :
11. No. of Seminars attended : 03 Annexure – I
12. No. of Papers Presented : 02 Annexure – II
13. No. of Papers Published : 02 Annexure – III
14. No. of Books Published :
15. No. of Guest Lectures delivered in other institutions :
16. No. of Research Projects undertaken : Minor \_\_\_\_\_ Major \_\_\_\_\_ Others (Specify) \_\_\_\_\_ Annexure – VIII
17. No. of Seminars organised : Annexure – VI
18. No. of. M.Phil. Scholars Guided : Completed \_\_\_\_\_ Ongoing \_\_\_\_\_ Annexure – X
19. No. of. Ph.D. Scholars Guided : Awarded \_\_\_\_\_ Ongoing \_\_\_\_\_ Annexure – XI
20. Participation in Academic Research Bodies in other institutions :
21. Service rendered in academic / Extra Curricular/ Extension activities within the College other than teaching :
22. Service rendered in Professional bodies outside the College :
23. Honors / Awards received :

***Signature of the Staff***

**ANNEXURE – I****DETAILS OF ORIENTATION, REFRESHER COURSES AND TRAINING PROGRAMMES ATTENDED:**

SL. NO.	COURSE	UNIVERSITY	PERIOD	TITLE
1.				

**ANNEXURE – II****WHETHER FDP AVAILED, IF YES, FURNISH DETAILS**

Name of the institution	Period of Study	Date of submission	awarded

**ANNEXURE – III****SEMINARS/CONFERENCES, SYMPOSIA, WORKSHOPS, ETC ATTENDED**

Sl. No.	Title of the Seminars/Conferences, Symposia, Workshops	Level (State / National / International)	Sponsoring Agency and Name of the Institution	Date
1.				

**ANNEXURE – IV****PAPERS PRESENTED IN SEMINARS/CONFERENCES, SYMPOSIA, WORKSHOPS, ETC**

Sl. No.	Title of the Paper	Level (State / National / International)	Sponsoring Agency and Name of the Institution	Date
1				

**ANNEXURE – V****RESEARCH PAPERS OR ARTICLES PUBLISHED:**

Sl. No.	Title of the Paper	JOURNAL			Page Number
		Name	Volume	Year / Month of Publication	
1					

**ANNEXURE – VI****BOOKS PUBLISHED:**

Sl. No.	Name of the Book / Title of the Article / Book / Editor	Publisher	Place and Year of Publication

**ANNEXURE – VII****GUEST LECTURES DELIVERED:**

Sl. No.	Title of the Guest Lecture	Place	Date
1.			

**ANNEXURE – VIII****RESEARCH PROJECTS – ONGOING AND COMPLETED:**

SL. No.	Title of the project	Minor/ Major	Name of the Funding Agency	Period	Amount Sanctioned	UC Submitted If Yes, Date and Year

## ANNEXURE – IX

**SEMINARS, CONFERENCES, SYMPOSIA, WORKSHOPS ORGANIZED:**

Sl. No.	Title of the Seminar/Conference/Symposia Workshop	Name of the Sponsoring Agency	Amount Sanctioned	Period	UC submitted If Yes, Date and Year

## ANNEXURE – X

**Research Experience (M.Phil.) – Guided and Guiding**

Sl. No.	Name of the Scholar	Title of the Dissertation	Year of Study	University
1.				

## ANNEXURE – XI

**Research Experience (Ph.D.) – Awarded, Submitted and Guiding**

Sl. No.	Name of the Scholar	Title of the Thesis	Year of Study	University
1.				

## ANNEXURE – XII

**PARTICIPATION IN ACADEMIC RESEARCH BODIES IN OTHER INSTITUTIONS:  
(Mention the period in the relevant column)**

Name of the Institution	Academic Council	BOS	Research committee	Academic Audit committee	Member in University committee	Any other (specify)

## ANNEXURE – XIII

**SERVICE IN ACADEMIC / EXTRA CURRICULAR/ EXTENSION ACTIVITIES**

Sl. No.	Name of the Activity	Period
1.		

## ANNEXURE – XIV

**MEMBERSHIP IN PROFESSIONAL BODIES**

Name of the Professional Body	National/International	Period

## ANNEXURE – XV

**HONORS AND AWARDS RECEIVED**