



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



1. Name of the Staff : **P. RAJAGOWRI**  
 2. Designation : **Assistant Prof. of Mathematics**  
 3. Academic Qualification : **M.Sc.,**

Course	UG	PG	M.PHIL.	PH.D.
Year	2010-2013	2013-2015		
College & University	Bon secours college for women, bharatisadan	A.V.V.M. Sri pushpam college, poondi bharatidasan		

4. Date of Birth & Age : **09.02.1992 & 27 Yrs.**

5. Date of Appointment	:	Self – Finance	:	D	D	M	M	Y	Y	Y	Y
				0	9	0	7	2	0	1	8
				FIP	:						
		Aided	:								

6. Total Service : 7 months

7. Teaching Experience in completed years : UG **1year** PG **6month** M.Phil. **yr**

8. Residential Address : 3160/1 Mothirappa chavady pattukottai road thanjavur,

Mobile Number : 7358924277

E-Mail Address : prakashgowrinov1@gmail.com

9. No. of Orientation / Refresher Courses and Training Programmes attended : - Annexure – I
10. Whether FIP availed, if yes, furnish details : NO Annexure – II
11. No. of Seminars attended : - Annexure – III
12. No. of Papers Presented : - Annexure – IV
13. No. of Papers Published : - Annexure – V
14. No. of Books Published : Nil Annexure – VI
15. No. of Guest Lectures delivered in other institutions : - Annexure – VII
16. No. of Research Projects undertaken : Minor - Major --- Others (Specify) --- Annexure – VIII
17. No. of Seminars organised : Annexure – IX
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 : - Annexure – XII
21. Service rendered in academic / Extra Curricular/ Extension activities within the College other than teaching : - Annexure – XIII
22. Service rendered in Professional bodies outside the College : - Annexure – XIV
23. Honors / Awards received : -- Annexure – XV

**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
-	-	-	-	-

## 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
-	-	-	-	-

## ANNEXURE – V

## RESEARCH PAPERS PUBLISHED:

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

## 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
-	-	-	-

## 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
-	-	-	-

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

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

**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
-	-	-

**ANNEXURE – XIV****MEMBERSHIP IN PROFESSIONAL BODIES**

Name of the Professional Body	National/International	Period
-	-	-

**ANNEXURE – XV****HONORS AND AWARDS RECEIVED : ---**