



**A.V.V.M. SRI PUSHPAM COLLEGE  
(AUTONOMOUS),**

**POONDI - 613503, THANJAVUR - DT.**

**STAFF PROFILE as on : 01.06.2018**



1.	Name of the Staff	:	MISS.P.MUHIL						
2.	Designation	:	Assistant Professor in Chemistry						
3.	Academic Qualification	:	M.Sc.,M.Phil.,						
	<b>Course</b>		<b>UG</b>	<b>PG</b>	<b>M.PHIL.</b>	<b>PH.D.</b>			
	<b>Year</b>		<b>2014</b>	<b>2016</b>	<b>2018</b>	<b>Doing</b>			
	<b>College &amp; University</b>		<b>AVVM SriPushpam College, Bharathidasan University</b>	<b>AVVM SriPushpam College, Bharathidasan University</b>	<b>AVVM SriPushpam College, Bharathidasan University</b>	<b>AVVM SriPushpam College, Bharathidasan University</b>			
4.	Date of Birth & Age	:	02.04.1994 &24yrs						
5.	Date of Appointment	:			Duration	Year	Months	Days	
			S.F	:	02.08.2017	01	05		
			FIP	:	-	-	-	-	
			Aided	:	-	-	-	-	
6.	Total Service	:				<b>01</b>	<b>05</b>		
7.	Teaching Experience in completed years	:	UG -1 year						
8.	Residential Address	:	West street,Thirunallur,Orathanadu[TK], Thanjavur[DT] 614626.						
9.	Adhar No	:	8830 4901 7634						
	Mobile Number, E-Mail Address	:	8220414635,muhilchemistry24@gmail.com						
10.	No. of Orientation / Refresher Courses and Training Programmes attended	:	NIL						
11.	Whether FDP availed, if yes, furnish details	:	No						
12.	No. of Seminars attended	:	02						
13.	No. of Papers Presented	:	01						
14.	No. of Papers Published	:	NIL						
15.	No. of Books Published	:	NIL						
16.	No. of Guest Lectures delivered in other institutions	:	NIL						
17.	No. of Research Projects undertaken	:	NIL						
18.	No. of Seminars organised	:	NIL						
19.	No. of. M.Phil. Scholars Guided	:	NIL						
20.	No. of. Ph.D. Scholars Guided	:	NIL						
21.	Participation in Academic Research Bodies in other institutions	:	NIL						
22.	Service rendered in academic / Extra Curricular/ Extension activities within the College other than teaching	:	NIL						
23.	Service rendered in Professional bodies outside the College	:	NIL						
24.	Honors / Awards received	:	NIL						

*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– No.

## 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	Research Methodology, Scientific Writing & Statistical data Analysis	State	IQAC & RAC for A.V.V.M. Sri Pushpam College, Poondi	05 and 06 <sup>th</sup> October 2018
2	Orientation programme for Assistant Professors	State	A.V.V.M. Sri Pushpam College, Poondi Bharathidasan University	31 October 2017 to 1 <sup>st</sup> November 2017

## 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	A study on the physic – phyto chemical properties, antimicrobial activities, antioxidant potentials and separation of flavanoids	State	A.V.V.M. Sri Pushpam College, Poondi	29.08.2017

## ANNEXURE – V

## RESEARCH PAPERS PUBLISHED:

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

## ANNEXURE – VII

## GUEST LECTURES DELIVERED:

Sl. No.	Title of the Guest Lecture	Place	Date

## 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

## ANNEXURE – XI

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

Sl. No.	Name of the Scholar	Title of the Thesis/Area of research	Year of Study	University	Status

## ANNEXURE – XII

**PARTICIPATION IN ACADEMIC RESEARCH BODIES IN OTHER INSTITUTIONS:**

(Mention the period in the relevant column)

Name of the Institution	Period	BOS	Research committee	Academic Audit committee	Any other (specify)

## ANNEXURE – XIII

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

Sl. No.	Name of the Activity	Period