



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



**STAFF PROFILE as on :**

1. Name of the Staff : **S.HEMALATHA**  
 2. Designation : ASSISTANT PROFESSOR IN PHYSICS  
 3. Academic Qualification :

Course	UG	PG	M.PHIL.	PH.D.
Year	1988-1991(B.SC)	1995-1997		
College & University	1.AVVAIYAR COLLEGE FOR WOMEN,KARAIKAL, PONDICHERRY UNIVERSITY 2.B.ED-MADRAS UNIVERSITY ,MADRAS(1992-1993) 3.B.L.I.S-MADRAS UNIVERSITY,MADRAS(1991-1992)	ANNAMALAI UNIVERISTY CHIDAMBARAM		

4. Date of Birth & Age : 03-08-1969 (49)

5. Date of Appointment : Self – Finance : 

D	D	M	M	Y	Y	Y	Y
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 FIP : 

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 Aided : 

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6. Total Service : 18 Years

7. Teaching Experience in completed years : UG  PG  M.Phil.

8. Residential Address : V.SOMASKANDAN  
NO,285/1,NANAYAKARACHETTY STREET,MELAVEETHI  
NEAR SIVAGANGAI GARDEN, THANJAVUR-1

Mobile Number : 9994815928

E-Mail Address : Malinikarthik69@gmail.com

9. No. of Orientation / Refresher Courses and Training Programmes attended : Orientation course Annexure – I  
Refresher course
10. Whether FDP availed, if yes, furnish details : 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 : 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	University

**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**