

NAME		P.REVATHY			
Designation		ASSITANT PROFESSOR			
Address for communication with E-Mail & Mobile No.		#45, Middle Street, New Saram Pondicherry – 605013. revathisathish13@gmail.com 9894382155			
Educational Qualifications (from UG Level onwards)	Degree	Institution/University		Month & Year of Passing	
	B.sc (CS)	Pondicherry University		2004	
	M.sc (CS)	Annamalai University		2006	
	M.Phil.	Prist University		2013	
Teaching Experience		UG:	Years: 6 Months: 6	PG:	Years: Months:
Research Experience/Area of Specialisation					
No. of Papers Presented in Conference/ Seminars/ Symposia		National:		International:	
No. of Papers Published in Journals/Books		National:		International:	
No. of Conference/ Seminars/Symposia Organized		Workshop:	Seminar:	Conference:	
No. of Conference/ Seminars/Symposia Attended		Workshop:	FDP:	Conference:	1
Refresher course attended					
Orientation course attended					
Service Particulars	Position	Year		Name of the Institution	
		From	To		

<p>Details of Papers Published in Journals/Books</p>	<p>National: 1 2 3</p> <p>International: 1 2 3</p>			
<p>Details of Conference/ Seminars/Symposia Attended</p>	<p>National: 1 2 3</p> <p>International: 1 2 3</p>			

Details of Refresher
course attended

Details of Orientation
course attended

Other relevant
information, if
any
(Achievements,
Awards, etc.)