

**INDIVIDUAL FACULTY DATA SHEET**


Name of the college : **SRI SAIRAM ENGINEERING COLLEGE**  
 Name of the Department : **LIBRARY**  
 Name of the Faculty Member : **N. Sivakami**  
 Staff Code : **ET95LI01**  
 AICTE Staff Id :  
 Sairam IRINS Url :  
 Aadhar Number : **443904607805**  
 Present Designation : **LIBRARIAN**  
 Residential Address : **12/166, SAI MEENA ILLAM, GANDHI NAGAR MAIN ROAD, KOVILAPPAKKAM**  
  
 Gender : **Female**  
 PAN Number : **ASNPS9912N**  
 Date Of Birth : **26/07/1969**  
 Land Line No : **--Nil--**  
 Mobile Number : **9176619124**  
 Email : **sivakami.lib@sairam.edu.in**  
 Passport Number :  
 Bank Account No : **1067314184**  
 UAN : **100246003169**  
 NITTT ID NO : **20211116430**  
 IEEE Membership : **92479727**  
 ABC ID :

**1. Particulars of Educational Qualification : (Only Completed)**

Category	Name Of the Degree	Specialization	Year Of Passing	Name Of The College	Name Of the University	% Of Marks /Grades	Class Obtained
UG	B.Sc	Zoology	09/04/1990	Lady Doak College Madurai	Madurai Kamaraj university	75	1st
PG	M.Phil	LIS	19/05/2006	Annamalai University	Annamalai university	60	1st
Phd	Completed	Scientometric s	15/09/2015	Alagappa universitu			

\*Enclose copies of certificates and testimonials duly attested by the faculty member and the principal as proff

**I.a.Additional Qualification**

i.GATE Score (In case of B.E./B.Tech.) :  
 ii.NET/SLET(In case of M.C.A./M.Sc./M.A.) :

II.Title of Ph.D. Thesis \* : **A Scientometric Analysis of Swine Influenza Research Output  
From 1990 To 2013**

III.Faculty in Which Ph.D.Was Awarded : **Library and Information Science**

**IV.ACADEMIC EXPERIENCE AS ON**

Name of the College	Designation	Joining Date	Relieving Date	Experience		
				Years	Months	Days
Total						

**V.INDUSTRIAL EXPERIENCE :**

Name of the organization	Designation	Nature of work	Joining Date	Relieving Date	Experience		
					Years	Months	Days
Sri Sai Ram Engineering College	Librarian	brary Manageme	11/09/1995	12/08/2022	26	11	12
Total					26	11	12

**VI.Other relevant information**

:

Signature of the Faculty

(Endorsement by the Principal)

( Inspector's use only)

**VII.Remarks of certificate verifying officer/charman of inspection committee:**

Eligible to hold the post of \_\_\_\_\_

Verifying Officers

CHAIRMAN  
Inspection Committee