## PROFORMA FOR BIODATA

1. Name : S. SUJATHA

2. Designation : Assistant Professor

3. Department : Department of Information Technology

4. Correspondence Address : National College (Autonomous), Tiruchirappalli

5. Email and Contact number: sujacholan@gmail.com / 8508060097

6. Date of Birth : 05.10.1987

7. Gender : Female

8. Category : BC

9. Whether differently abled : No

10. Academic Qualification

S.No.	Degree	Year	Subject	University/Institution	% / Grade of Marks
1	B.Sc.	2006	Computer Science	Cauvery College for Women,  Trichy. /  Bharathidasan University	First Class with Distinction (D+ Grade)
2	M.Sc.	2009	Information Technology	Cauvery College for Women,  Trichy. /  Bharathidasan University	First Class with Distinction (D+ Grade)
3	M.Phil.	2011	Computer Science	Cauvery College for Women,  Trichy. /  Bharathidasan University	First Class with Distinction (D++ Grade)
4	B.Ed.	2020	Computer Science	Sri Adhisankarar College of Education Tiruchirappalli. INDIA	First Class with Distinction

11. Ph.D thesis title : -NA-

Guide's Name : Institution / University : Year of Award : -



12. Work Experience

**Position held** 

S.

: 3.3 years

**Name of the Institute** 

No	_ 02-1-0-1	1 (41-12) 02 02-10 2-10 00000	2 2 0222	_ 0	I wy source		
1.	Assistant Professor	National College (A), Tiruchirappalli, TN, India	02.07.2013	30.06.2016	₹5000 to 10000		
2.	Assistant Professor	National College (A), Tiruchirappalli, TN, India	03.06.2024	Till Date	₹15000 ₹18500		
13. Pr	ofessional Recogn	nition/ Award/ Certificate/ F	ellowship rece	ived by the app	olicant: - Nil		
14. Pu	blications	:	Nil				
15. De	etails of patents	:	Nil				
16. Bo	ooks/ Reports/Cha	:	Nil				
17. Research guidance							
	Ph.D.	: Awarded		:	Nil		
		Submitted		:	Nil		
		On going		:	NII		
	M.Phil.	: Awarded		:	NII		
	M.Sc. Dissertat	:	Nil				
18. Lis	st of Completed/O	:	NII				
(b)	) Up-to date Tech	:	Nil				
19. Me	embership	:	Nil				
20. Co	ountries visited	:	Nil				

To

From

**Pay Scale** 

Nil

:

## **DECLARATION: -**

21. Any other Information

I certify that the foregoing information is correct and complete to the best of my knowledge and belief.

Place:	
Date:	Signature