

Name of the College	3118 - MOHAMED SATHAK A J COLLEGE OF ENGINEERING (AUTONOMOUS)
Name of the Department	SCIENCE AND HUMANITIES
Name of the Degree & Course	S&H-MATHEMATICS
Name of the faculty member	MRS. ZULAIHA MARYAM M
Regular Or Adjunct	Regular
Image	
Present Designation	ASSISTANT PROFESSOR
Residential Address Line 1	8093 SOBHA MERITA APARTMENT
Line 2	KELAMBAKKAM
District	KANCHEEPURAM
Telephone number	-
Mobile number	+91 - 9875691362
Email	ZULAIHAMOHJDEEN07@GMAIL.COM
Gender	FEMALE
Community	MBC
PAN Number	ACPPZ6937L
Passport Number	
Aadhar Number	927130301380
Faculty code given by C.O.E.	3118285
Faculty code given by A.I.C.T.E.	17400741358
Date of Birth	07-12-1992
Age	32
I. Particulars of Educational Qualification : (only completed)	


 PRINCIPAL
 MOHAMED SATHAK A.J.COLLEGE OF ENGINEERING
 34, Rajiv Gandhi Road (OMR), Siruseri, IT Park
 Chennai-603 103.

Category	Name of the Degree	Specialization	Year of Passing	Name of the College	Name of the University	% of Marks / Grades obtained / Ph.D. Awarded (Y/N)	Class obtained	Certificate
U.G.	B.SC.	OTHERS - MATHS	2013	OTHERS - STMARRYS COLLEGE	MANOMANIAM SUNDARNAR UNIVERSITY	80	DISTINCTION	
P.G.	OTHERS - MPHIL	OTHERS - MPHIL	2016	OTHERS - MADRAS UNIVERSITY COLLEGE	ANNA UNIVERSITY	80	FIRST CLASS	
P.G.	M.SC.	OTHERS - MATHS	2015	OTHERS - ANNA ADARSH COLLEGE FOR WOMEN	UNIVERSITY OF MADRAS	74	FIRST CLASS	

* Upload Scanned copy of Original Degree Certificate.

I.a. Additional Qualification :- NO ADDITIONAL QUALIFICATION

Score :

File :

II. Title of Ph.D. Thesis

III. Faculty in which Ph.D. was awarded

IV. Academic Experience :

(Start from the Current working Experience) *

Name of the College	Designation	Joining Date	Relieving Date / Current Date for Presently Working Institutions	Experience		
				Years	Months	Days
MOHAMED SATHAK A J COLLEGE OF ENGINEERING (AUTONOMOUS)	ASSISTANT PROFESSOR	13-10-2018	04-06-2024	5	7	23
AALIM MUHAMMED SALEGH COLLEGE OF ENGINEERING	ASSISTANT PROFESSOR	11-07-2016	30-11-2017	1	4	21
Total				7	0	14

V. Industrial Experience :

Name of the Organisation	Designation	Nature of Work	Joining Date	Relieving Date	Experience		
					Years	Months	Days

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VI. C.O.E. Appointment Experience :**Capacity at which service is extended for the conduct of Exmination during the last year**

AUR (No. of days)	Squad Member (No. of days)	External Examiner (Practical) (No. of days)	Central Evaluation (No. of scripts Evaluated)	Re-Evaluation (No. of scripts Evaluated)
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It is certified that all the information provided are true to the best of my knowledge.



Signature of the Faculty :



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