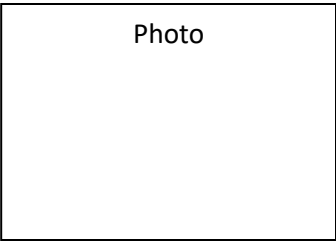


Faculty Information

Brief Profile of Faculty in Less than 500 words

Photo



Faculty Information**Detailed CV**

Photo

1. Personal Details

Name of the faculty	BHARATHI
Gender	FEMALE
Department	INFORMATICS
PAN	CEKPB3993K
Designation	ASSISTANT PROFESSOR (PART TIMER)
Qualification	MCA, PGDST,M.Tech & (P.hd)
Date of Joining (Submit Appointment Letter)	DEC 21 ST 2010
Date of Birth	03/06/1983
Category	SC-B (MADHIGA)
Mobile Number	7330903884
E-Mail Id	Maseed.bharathi@gmail.com
Address	

2. Academic details:

Degree	Qualificatio n	Month and Year of Passing	Division	% of Marks	Univ/Board/ Institution with State
PG (M.A./M.Com/ M.Sc/M.Tech/ MBA/ MCA/Any other)	MCA	2008	I-DIVISION	68%	OSMANIA UNIVERSITY
CSIR/UGC-NET /SELT/Any other	M.Tech	2014	I-DIVISION	83%	JNTU- HYDERABAD
Any other	PGDST	2009	I-DIVISION	93%	DOEAC-CENTER CALICUT- KERALA
Research details	Title of Thesis			Month and Year of award	Univ/Board/ Institution with State
M.Phil				PURSUING	OSMANIA UNIVERSITY
Ph.D	LTE CORE NETWORK EVOLUTION				
Post Doctorial/ D.Sc./D.Litt.					
Any other					
*Please provide the scanned copies of certificates					

3. Teaching Experience: Total : 8 yrs UG: 8 yrs PG : 8 yrs

4. Academic Promotions:

Designation	Month and Year of Promotion
Associate Professor	-
Professor	-
* Please provide order copies	

5. Resource persons:

Guest Lectures/ Extension Lectures	No. of Lectures	Name of Program	Organization / Institution	Date and Year
-	-	-	-	-
-	-	-	-	-
* Please provide the certificates or letter of invitation				

6. Carrier Development Programs: Orientation Course/ Refresher courses/Short Term Course/Faculty Development Programme

Course attended	Institution /University	Title of the Professional Development Programme	Duration	
			From	To
PGDST	DOEAC-CENTER KERALA	SOFTWARE TECHNOLOGY	FEB-2009	AUGUST-2009
* Please provide the certificates				

7. Research Details:

Research Experience (No. of years):	PURSUING			
Area of research :	LTE CORE NETWORK EVOLUTION			
Supervisor for M.Phil/P.hd (Guideship Letter)				
No of students working/Registered	Ph.D:			
	F:	M:		
No. of students with fellowship (JRF)	M:	F:	Total:	
No. of students with fellowship (SRF)	M:	F:	Total:	
No. of students with fellowship (Project fellow)	M:	F:	Total:	
No. of students with any other fellowship	M:	F:	Total:	
No of students working for M.Phil.	M:	F:	Total:	
No of students working as Post.docs.	M:	F:	Total:	
No of students working as RA	M:	F:	Total:	
No. of M.Phil/Ph.D. Produced	Ph.D:		M.Phil:	
	M:	F:	Total:	M: F: Total:
Name of Students awarded. M.Phil/Ph.D	Title of Thesis	Month and Year of Registration		Month and Year of Award

1.			
2.			
* Please provide the list of students registered, along with their category and fellowship details			

8. Total No. of Research Publications:

International:

National:

8.1 List of publications(## If possible use MS-Excel file which is attached as separate file)

SN o	Title of Paper	Name of the Authors	Name of the Journal	Vol um e and Pag e No	Month and Year of Public ation	Peer reviewed / Non Peer reviewed	Impact factor	National/ International	ISSN No.	UGC Journal No	Ci ta ti o n in de x (S C I, /S C O P U S/ W eb of Sc ie nc e/ I C I	No . of cit ati on exc lud ing sel f cit ati on	h- ind ex	Institutional affiliation as mentioned in publication
1	A STUDY ON CONGESI ON ROUTING IN AD HOC NETWOR KS	BHARA THI	A STUDY ON CONGESI ON ROUTIN G IN AD HOC NETWOR KS	VO L- 2, Pg- 6	MAR CH - 3 RD 2015			INTERNAT IONAL	p- ISSN: 2348- 6848e -2348- 795X	AVAIAL BLE AT https://ed upediapub lications.o rg/journal s/index.ph p/IJR/				INTERNATI ONAL JOURNAL RESEARCH

* please provide the PDF or scanned copy of the articles along with ISSN no. and DOI

9. List of Publication in Conference proceedings:

SNo	Title of Paper	Name of Conference	Name of the Publisher	Month and Year of Publication	ISBN No.	State/National /International	Affiliated institute at the time of publication
1							
2							
* please provide the PDF or scanned copy of the articles along with ISBN no. and DOI							

10. List of Books Published:

S.No	Title of Book/Chapter	Edited/ Authored	Name of the Publisher	Month and Year of Publication	ISBN No.	State/National /International	Affiliated institute at the time of publication
1							
2							
* please provide the PDF or scanned copy of the first page along with ISBN no.							

11. Member on editorial board or referee for national/international

S.No.	Name of the Journal	Status on the editorial Board	ISSN Number	Periodicity of Publication	Month and Year of Inception of Journal	Impact factor

* Please provide the certificates or e-Copy of letter from editor or editorial board

12. No. of Papers Presented in Conference/workshop/seminars: (Oral/Poster)

SNo	Title of the paper	Name of Conference/ workshop/ Seminars	Oral/Pos ter	Organized by	Date and year	State/National /International	Oral/ Poster
1	Organization of students for innovation, Aesthetics & Culture	Organization of students for innovation, Aesthetics & Culture		Rhythm'09	July 2009	National	
2							
		* Please provide the certificates					

17. Consultancy Projects:

Name of the Consultant	Name of the Consultancy Project	Consulting/Sponsoring Agency with Contact Details	Month and Year	Funds earned/ Revenue generated during last five years (in Rs.)*
RECSOL TECHNOLOGIES	QUALITY OF SERVICES ON AD HOC NETWORKS	#1628,SOUTH END 'A' MAIN ROAD , 9 TH BLOCK. JAYA NAGAR , BANGLORE-59.	20 TH JULY 2018	3,00000/- PER ANNUM
* Audited statement of accounts indicating the revenue generated through consultancy				

18. Collaboration activities for research:

Title of the collaborative activity	Name of the Collaborating agency with contact details	Source of financial support	Month and Year of collaboration	Duration	Nature of activity
* Audited statement of accounts indicating the revenue generated through consultancy					

19. Students Projects:

Total No.of Student Projects Guided:

S.No	Name of the student	Course	Title of the Project	Duration of the Project	Month & Year of the Award
1	BHARATHI	MCA	JOB-MILLER	6 MONTHS	FEB -2008- AUG 2008
2	BHARATHI	PGDST	1.ONLINE TOURS & TRAVELS MANAGEMENT 2.JOB MILLER	6 MONTHS	FEB 2009- AUG 2009
3	BHARATHI	M.Tech	1.MOBI-SYNC EFFICIENT TIME SYNC FOR MOBILE UNDER WATER SENSOR NETWORKS	6 MONTHS	AUG 2014 – DEC 2014
* please provide copy of certificate page or certificate from Head/Principal					

20. Faculty visit abroad on academic purpose:

Institution Visited & Period of Visit	Country	Sponsoring of agency	Activity undertaken	Month and Year of Visit

* please provide invitations/sanction letters/grant received letter	
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21. Awards / distinction received if any

Name of the award Received	International/ National/ State/University/District/College level	Nature of Award	Month & Year of the Award
* please provide copy of certificate			

22. International fellowship for advanced studies/research received if any

Name of the award	Month and Year of Award	Awarding agency
* please provide copy of certificate		

23. Faculty Distinction/Nominations to University/State/National/International bodies.

Membership / Distinction earned	Organization	University/State/ National/International Level	Month and Year
*please provide copy of offer letters/appointment orders			

24. Collaborative programs if any other University / Organization/ Industries

Name of Program	Nature of Collaboration	Collaborating organization and Country	Objectives of MOU	Month and Year
SIMULATION OF WIRELESS & MOBILE NETWORKS USING NetSIM	TETCOS,BANGALORE	JNTU HYD COLLEGE OF ENGINEERING		2 ND & 3 RD 2012
* please provide copy of MoU letter				

25. Innovation adopted in Teaching (If any, provide details.):

26. Participation in Curriculum design/BOS etc. (copy of minutes of meeting)

27. List of ICT modules prepared (Please provide soft copies of modules, url link/videos):

28. Social outreach programs conducted (If any, proof as photographs, videos, certificate of appreciation, etc):

29. Life Members of any bodies (provide membership details):

- 30.** Extension activities and institutional social responsibility (If any, provide proof)
- 31.** Contribution to environmental awareness and protection (If any, provide proof)
- 32.** Please provide the details if any MoUs/Linkages (If any, provide MoU letter):
- 33.** Any another relevant information:

SIGNATURE