

**K.S.RANGASAMY COLLEGE OF TECHNOLOGY, TIRUCHENGODE - 637215  
(Autonomous)**

**Faculty Profile**



**AICTE ID** : 1-1471330170 **Emp ID : CTECF016**  
**Anna University ID** : 262658  
**Name of the faculty** : S.S.THAMILSELVI  
**Department** : Electronics and Communication Engineering  
**Designation** : ASSISTANT PROFESSOR  
**Date of Joining** : 14/11/1997  
**Residential Address** : RESI ADDRESS 126,SND ROAD,TIRUCHENGODE-637211.  
**Contact Nos.** : **Landline** : - **Mobile** : 9865979439  
**E-Mail** : sstamilselvi@ksrct.ac.in  
**Gender** : Female  
**Community** : ~~OC~~ / BC / ~~MBC~~ / SC / ST  
**PAN Number** : ACPPT7223H **Aadhar Number** : 803488162448  
**Date of Birth and Age** : 11/15/1975 & 49 years  
**I. Particulars of Educational Qualification** : (only Completed)

Category	Name of the Degree	Specialization	Month & Year of Pass	Name of the College	Name of the University	% of Marks / Grades obtained	Class obtained
UG	B.E	Electronics and Communication Enggineering	April 1997	Kumaraguru College of Technology, Coimbatore	Bharathiar University, Coimbatore	73	First Class
PG	M.E	Applied Electronics	June 2004	K.S.Rangasamy College of Technology, Tiruchengode	Anna University, Chennai	81	First Class With Distinction

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

**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 \*** : -

**III. Faculty in which Ph.D. was awarded** : -

## IV. Academic Experience as on May,2025

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Name of the College	Designation	Date of Joining	Date of Relieving	Experience		
				Years	Months	Days
K.S.Rangasamy College of Technology, Tiruchengode	Assistant Professor	06/06/2012	-	12	11	26
K.S.Rangasamy College of Technology, Tiruchengode	Lecturer	01/06/2004	31/10/2005	1	5	1
K.S.Rangasamy College of Technology, Tiruchengode	Lecturer	14/11/1997	31/03/2002	4	4	18
Total				18	9	15

## V. Industrial Experience

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Name of the Organization	Designation	Nature of Work	Date of Joining	Date of Relieving	Experience		
					Years	Months	Days
- Nil -							

## VI. Other Relevant Information

: - Nil -