

FACULTY PROFILE



1. Name: G F Chakravarthi

2. Designation: Faculty Member

3. Qualification: Ph.D. pursuing

4. Area of Specialization: Production & Composite Materials

5. Awards/Recognitions: _____

6. Number of projects:

i) Completed

Sl. No.	Title of the project	Funding Agency	Amount	Year (From-To)

ii) On-going

Sl. No.	Title of the project	Funding Agency	Amount	Date of Commencement	Expected date of completion

7. Number of Ph.D candidates successfully completed: _____

8. Number of Ph.D candidates currently working: _____

9. Number of M.Phil candidates successfully completed: _____

10. Number of M.Phil candidates currently working: _____

11. Publications:

i) Books

Sl. No.	Author/s	Title	Publisher	Year of publication	Page No.

ii) Articles in Journals

Sl. No.	Title of Article	Journal	Year/Month

iii) Papers in Conference/Seminar/Proceedings

Sl. No.	Title of the paper	Title of conference/seminar volume	Year of publication	Publisher

iv) Paper as a part of book:

Sl. No.	Title of the paper	Title of the book	Publisher	Year of publication	Page No.

v) Monographs/Reports (if any) _____

12. Conference/Seminar/Workshop organized:

S. No.	Status as organizer	Title of the conference/seminar/Workshop	Date
1	Seminar	Challenges in Entrepreneurship – S C Mittal, MD, Instruments & Systems	September 2011
2	workshop	Geometric Dimensioning & Tolerance – CADD Centre	March 2012
3	Seminar	Nonconventional Machining & its applications – Mulik Rahul S, Asst. Prof., IIT Roorkee	November 2012
4	workshop	Latest trends in fuel injection system – Bosch	September 2013
5	workshop	Design improvements in Carburetor fuel injection system – Bosch	November 2014
6	Seminar	Latest Trends in FMS and its applications in Automation industry - MTAB	August 2015

13. Conference/Seminar chaired:

Sl. No.	Title of the seminar	Organized by	Date

14. Conference/Seminar participated:

Sl. No.	Title	Organized by	Year/Month	Only participated	Participated and presented the paper

15. Chairman/Member of Authority/Committee etc:

Sl. No.	Chairman/Member/Secretary	Committee/Authority	Year (From-To)

16. Membership to professional Organization/Associations:

Sl. No.	Name of the Association/Organizations	Life member/Ordinary member

17. Any other Information: _____

(SIGNATURE)