

DECLARATION FORM : 2018-19 - FACULTY

(Note : It is responsibility of Dean, HOD & faculty to submit only the declaration form of faculty who has not appeared for assessment in any other college during the academic year and working as full time)

1.(a) Name : **Dr. T. Raveendran**

1.(b) Date of Birth & Age : **01-06-1949, 69 Years**

1.(c) Submit Photo ID proof issued by Govt. Authorities :

Photo ID submitted :

Passport copy / PAN Card / Voter ID / Aadhar Card

Number XXXXXXXXXX Issued by **Govt. of India**



Note: 1) Without Photo ID, Declaration form will be rejected and will not be considered as teaching faculty. 2) Original Certificates are mandatory for verification. All Certificates/Documents/Certified Translations, must be in English

1.(d) i. Present Designation : **Professor**

1.(d)(i)a Certified copies of present appointment order at present institute attached.

1.(d)ii. Department : **Respiratory Medicine**

1.(d) iii. College : **Pondicherry Institute of Medical Sciences**

1.(d)iv. City : **Pondicherry**

1.(d) v. Nature of appointment: (a) Regular / Contractual / Adhoc : **Regular**
(b) Full time /Part time /Honorary : **Full time**
(c) With or Without Private Practice: **Without**

1.(d)vi. Date of appearance in Last MCI - ~~UG/PG/Any Other Assessment~~ **9th & 10th July 2018** in which college **Pondicherry Institute of Medical Sciences**

1.(d)vii Whether appeared and accepted in Last MCI - UG/PG Assessment in the same Institute - Yes/No

1.(d)viii Whether appeared and accepted in Last MCI - UG/PG Assessment on same Designation - Yes/No

1.(d)ix Whether you have retired from Government medical college - **Yes / No** If Yes, Designation _____

3 (a). Details of the teaching experience till date.

Designation	Department	Name of Institution	From DD/MM/YY	To DD/MM/YY	Total Experience in years & months
Junior Resident	Respiratory Medicine	Govt. Medical College, Madras Medical College	01-08-1981	31-03-1984	3 years
Senior Resident					
Tutor					
Assistant Professor	Respiratory Medicine	Madras Medical College, Chennai	01-04-1984	12-04-1988	4yrs 18 days
		Stanley Medical College, Chennai	08-03-1993	23-12-1993	9ms 14 days
		Mohan Kumaramangalam Medical College, Salem	24-12-1993	07-10-1994	9ms 13 days
Associate Professor	Respiratory Medicine	Kilpauk Medical College, Chennai	08-10-1994	06-06-1999	4 yrs 8 ms
Professor	Respiratory Medicine	Kilpauk Medical College, Chennai	07-06-1999	06-01-2005	5 yrs
		Stanley Medical College, Chennai	07-01-2005	16-10-2005	9 ms
		K A P Viswanathan Govt. Medical College, Trichy	17-10-2005	20-03-2006	5 ms
		Theni Govt. Medical College, Theni	22-03-2006	02-02-2007	5 ms
		Stanley Medical College, Chennai	03-02-2007	31-05-2007	10 ms
		Sri Venkateswar Medical College Hospital & Research Institute, Puducherry	09-01-2008	30-07-2011	3 yrs 6 ms
		Sri Muthukumaran Medical College Hospital & Research Institute	12-08-2011	20-02-2018	6 yrs 6 ms
		Pondicherry Institute of Medical Sciences	21-02-2018	Till date	

Note:- Tutor / Resident working in Anesthesia and Radio-diagnosis must have 3 years teaching experience in the respective departments in a recognized/permited medical institute to be consider as senior resident.

3(b). To be filled in by Ex Army Personnel only: NOT APPLICABLE

S.No.	Designation	Institution	Period	
			From	To
1.	Graded Specialist			
2.	Classified Specialist			
3.	Advisor			

Note: Have you been considered in any UG/PG inspection at any other institution/medical college during last 3 years. If yes, please give details. NO

4. Before joining present institution I was working at Sri Muthukumaran Medical College Hospital & Research Institute as **Professor** and relieved on 20-02-2018 after resigning.