SRI VENKATESWARA COLLEGE OF PHARMACY

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Format of Faculty CV



1.	Name	T JASMINE
2.	Designation	Assistant Professor
3.	Mobile and Email	T JASMINE rgroups.msd@gmail.com
	Gender (Male / Female)	Female
4.	Department	Pharmaceutics
5.	Date of Birth / Age	11/02/1993 & 28 Yrs
6.	Gen/SC/ST/OBC/Others	BC E
7.	Education Qualifications	M.Pharm
8.	Experience	3
9.	List of Publications (Published in National and International Journals) Please specify: Journal Name, Title, Author Name as appeared in the Journal, Volume No., Page No., Year of Publication	01
10.	List of Conference Publications (National and International) Attended	02
11.	List of sponsored projects undertaken from DST, DBT, AICTE, UGC, etc.	Nil