# Information Sheet (Required for NAAC and College Website)



Name: Manas Ranjna Chaudhuri

## Present Address:

VILL- Dumkal

P.O- Dumkal

PS- Dumkal

DIST.- Murshidabad

STATE- West Bengal

PIN- 742303

## Permanent Address:

VILL- Dasnagar

P.O- Dasnagar

PS- Dasnagar

DIST.- Howrah

STATE- West Bengal

PIN- 711105

**Contact Number:** 9775181181

Email ID: chaudhurimr@gmail.com

Paste your recent color photo. (For College ID

## 1. ACADEMIC QUALIFICATION:

Examination	Year of passing	Board/ Council
M.A. /M. Sc /M.Com.	1995	The University of Calcutta
B.Ed.	NA	NA
B.A./BSc/B.Com.	1993	The University of Calcutta
Higher Secondary	1989	West Bengal Council of Higher Secondary Education
Secondary	1987	West Bengal Board of Secondary Education

# 2. OTHERS EDUCATIONAL QUALIFICATION: Name of the Exam. Vear of Qualification UGC-NET/NTA- NET/CSIR-NET etc. (Strike out whichever is not applicable) SET/SLET (Strike out whichever is not applicable) SLET - 1998 applicable)

<b>3.</b>	Ph.D. /M.Phil	l. Etc:		
	Degree	Institution	Year	Title of Thesis
	Ph.D	Swami Vevekananda University	Continuing	The Syntax and Semantics of Specificational Copular Clauses in Bangla

## 4. AWARDS:

Sl. No.	Year of the Award	Name of the Award	Name of the Organization

# 5. DETAILS OF TEACHING/ACADEMIC EXPERIENCE (If any): Designation Associate Professor of English Dumkal College 2000 NA

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7.	PUBI	ISHED PAPER	RS IN JOURNALS (If	any):				
	Sl. No.	Title	Name of the Journal	Vol., Issue,	ISSN	Whe	ther	Year of Publication
	110.		oour nar	Page (s) No.		Peer Reviewed	Care Listed	1 ubilcation
	01							

8.	RESEARCH PAPERS PRESENTED IN SEMINARS/WEBINARS (If any):						
	Sl.	Title of the Paper	Title of the conference/seminar/ webinar	Organizing body	Whether International/ National/ State Level	Date	
	01				Ecver		

9.	BOOK PUBLISHED AS AN EDITOR (If any):					
	Sl.	Title with page No. (s)	ISBN No.	Name of the	Year of	
	No.			Publisher	<b>Publication</b>	
	1.					
	2					
	2.					

10.	OP/FDP/RC/WORKSH	OPS ATTENDED(If	any):	
Sl. No.	Title of OP/FDP/RC/ workshop	Duration (From date-To date)	Academic Session	Institution
1				
2				
3				

11. OTHERS CERTIFICATE COURSE ATTENDED (If	any	):
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Sl.	Title of the Course	Duration	Institution
No.		(From date-To date)	
01			

<b>12.</b>	<b>MEMBERSHIP</b>	/ ASSOCIATION WITH THE	E ACADEMIC BODIES/	ORGANIZATION	(If anv	):
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## 13. ADMINISTRATIVE EXPERIENCE (If any):

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## 14. AREAS OF ACADEMIC INTEREST (If any):

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# 15. SKILL AND EXTRA CURRICULAR ACTIVITY (If any):

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- •

## **16. PERSONAL INFORMATIONS:**

Father's Name: Gajendra Nath Chaudhuri

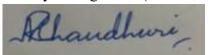
Mother's Name: Sabita Chaudhuri

Sex: Male

Category: General
Religion: Hindu
Nationality: Indian

Languages known: Bengali and English

Insert your Signature (For College ID Purpose)



East HOD and
For HOD only
Write about your Department for uploading in the College Website.
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