



**S.A.RAJA PHARMACY COLLEGE  
VADAKKANGULAM- 627116**



**Staff Pro-forma**

1. Name of the faculty : V. MAHALAKSHMI
2. Designation : Assoc. Professor
3. Department : Pharmaceutics
4. Date of joining : 01-02-2016
5. Contact Number : 9842285197
6. E-mail : mahakesavan2005@gmail.com
7. Council Register Number : 13842 A1
8. Qualification (year of passing)

B.PHARMACY	M.PHARMACY	Ph.D	Post Doc.
2005	2010	-	-

9. Total Experience in years

After B.Pharm	After M.Pharm	After Ph.D	After Post Doc
-	4	-	-

10. Papers Published

National	International
-	-

11. Project guided

B.Pharm	M.Pharm	Ph.D
8	-	-

12. Books published/IPRs/Patent : -
13. Professional Membership : PCI
14. Consultancy activities : -
15. Awards : -
16. Grants fetched : -

**Signature**