

FACULTY INFORMATION

Name : **MRS. SHYAMALA DEVI**
Date of Birth : **Jul 03, 1975**
Present Designation : **Lecturer**
Department : **Biochemistry**
College : **A.J. Institute of Medical Sciences & Research Centre**
City : **Mangaluru**



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Date of joining present institution : **May 02, 2002** as **Tutor**

Qualifications :

Qualification	College	University	Year	Registration No. of UG & PG with date	Name of the State Medical Council
M.Sc. (Medical Bio- Chemistry)	Kasturba Medical College, Mangalore,	Manipal Academy of Higher Education	1996- 1999	----	----

Details of the teaching experience

Designation	Department	Name of Institution	From DD/MM/YY	To DD/MM/YY	Total Experience in years & months
Tutor	Biochemistry	A.J. Institute of Medical Sciences, Mangalore	02/05/ 2002	30/09/ 2008	6 Years 5 Months
Lecturer	Biochemistry	A.J. Institute of Medical Sciences, Mangalore	01/10/ 2008		