# **Faculty Profile**

- > Name: MD ASIF MONDAL
- > Designation: STATE AIDED COLLEGE TEACHER (Category II)
- **Date of Joining: 16.07.2018**
- E-mail: md.asif160@gmail.com
- Phone no.: 8436638784
- > Address (office): Bireswarpur, South 24 pgs
- Educational Qualifications:



Course	Board/University	Passing year
10 <sup>th</sup>	W. B. B. S. E	2005
12 <sup>th</sup>	W. B. C. H. S. E	2007
B.Sc/B.A/B.Com/any	THE UNIVERSITY OF	2010
other equivalent	BURDWAN	
M.Sc/M.A./M.Com/any	THE UNIVERSITY OF	2013
other equivalent	BURDWAN	
PGDYE (PG Diploma in	CALCUTTA UNIVERSITY	2021
Yoga Education)		
PhD	<b>BINOD BIHARI MAHTO</b>	Pursuing
	KOYLANCHAL	
	UNIVERSITY	

> Courses taught/teaching: CC1, CC3, CC5, GE, DSE A1, DSE A2, SEC A1, SEC A2

### > Specialization/Research Interest: SOLIPSISM : A SOCIAL ENQUIRY

#### > Teaching Experience:

Affiliation	Designation	Tenure (years)

#### **Research Experience:**

Affiliation	Designation	Tenure (years)

#### > Industry Experience:

Name of the Organization	Designation	Tenure (years)

## > Research projects:

Project name	Funding Agency	Tenure	Status

### > Publications:

Total no. of publications in Journals:

Total no. of publications as Book chapters/Books:

#### List of Publications (Mention maximum 10 publications of your choice):

Paper title	Author(s)	Journal Name	Year	Volume and Page No.	ISSN/ISBN

## **Research Guidance:**

Total no. of Bachelors/Master's thesis guidance:

Role: Guide/Co-guide (keep whichever is applicable)

#### Total no. of PhD thesis guidance:

**Role: Guide/Co-guide** (keep whichever is applicable)

Conference/Seminars/Workshops attended:

Total no. of Conference/Seminarsattended:

Total no. of workshopsattended:

List of Conference/Seminars/Workshops (Mention maximum 10 of your choice):

Title of the presentation	Name of Conference/Seminars/Workshops	Organized by	Date

# > Conference/Seminars/Workshops organized

Name of Conference/Seminars/Workshops	Organized by	Convener/Organizing Committee member	Date

#### > Faculty Development program/Refresher course/Short term courses attended:

Type of the program	Name of the program	University/organization	Duration	Date

#### > Awards:

Name of the Award	Awarding body	Occassion	Year

> Membership of Professional/Academic Bodies:

Member of	Duration