

Faculty Profile



- **Name:** PRASANTA CHOWKIDAR
- **Designation:** SACT- I
- **Date of Joining:** 11-09-2018
- **E-mail:** prasantachowkidar@gmail.com
- **Phone no.:** 7063559565
- **Address (office):** BIRESWARPUR

➤ Educational Qualifications:

Course	Board/University	Passing year
10 th	WBBSE	2006
12 th	WBCHSE	2008
B.Sc/B.A/B.Com/any other equivalent	C.U.	2011
M.Sc/M.A/M.Com/any other equivalent	C.U.	2014
M.Phil		
Ph.D		
B.ED	C.U.	2017

- **Courses taught/teaching:** B.A.
- **Specialization/Research Interest:** KATHASAHITY
- **Teaching Experience:**

Affiliation	Designation	Tenure (years)
CALCUTTA UNIVERSITY	SACT-I	5 Years

➤ Research Experience:

Affiliation	Designation	Tenure (years)

➤ Industry Experience:

Name of the Organization	Designation	Tenure (years)

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➤ **Research projects:**

Project name	Funding Agency	Tenure	Status
N.A.			

➤ **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
PRASHANGO DESHBHAG: CHHOTOGALPE O SMRITIKATHAY	Edited By Dr. Mahuya Chakraborty Dr. Mousumi Chakraborty Dr. Swaraj Kumar Das	Seventy five years of partition and Indian Independence social and political perspectives, Platinam Jubilee Series	2023	First, Page number 141	ISBN - 978-93- 94744-80-6
PUTULNACHER ITIKATHAY ADIM PRABRITTI	Edited by Dr. Nirmalya Kumar Ghosh	Bhabchakra	2024		

➤ **Research Guidance:**

N.A

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/Seminars attended:

Total no. of workshops attended:

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	Occasion	Year

➤ **Membership of Professional/Academic Bodies:**

Member of	Duration