

Name of the Faculty : **S. PRAVEENRAJ**

Department : **MEDICINE**

Registration Number : 116417

Designation	Name of the Institution	From DD/MM/YY	To DD/MM/YY	Total Experience in years & Months
Tutor 1 / JR 1	KARPAGAM FACULTY OF MEDICAL SCIENCES & RESEARCH, COIMBATORE - 32.	01.06.2016	TILL DATE	