

Multanimal Modi College

Modinagar-201204 (U.P.)

(Affiliated to Ch. Charan Singh University, Meerut) (For Teaching Staff)

Title	First Shrikant Name	LastName Gaut	tam Photograph
Designation	Assistant Professo	pr l	
Department	Zoology		
Address (Campu	Department of Zo	ology	
epartment)	268, Kidvaee naga modinagar	ur-2	
(Residence)			
PhoneNo(Campus	s) 9140792161		
(Residence)option	al		
Mobile			
Fax			
Email	Shrikantgautam20	013@gmail.com	
Web-Page			the state

EDUCATIONAL QUALIFICATIONS

Subject	Institution	Year	Details
Hindi, English,	JNV Jaunpur	1996	Passed with IInd division
science, maths, sst			
Hindi, English, phy,	JNV Jaunpur	1998	Passed with IInd division
chem, biology			
Zoology, chem., bot	University of allahabad	2009	Passed with IInd division
Zoology	BHU	2011	Passed with Ist division
		·	
CSIR-UGC NET	CSIR-UGC	Dec2011	JRF with rank 376
GATE	IIT Madras	2012	qualified

CAREERPROFILE

Organisation/ Institution	Designation	Duration	Role(s)			
Multanimal Modi College,	Assistant Professor	April,2019 to	Teaching, ANO-NCC, Member IQAC,			
Modinagar		till	Member Proctorial board etc.			
ResearchInterests/Specialization:						
Developmental Neurotoxicity, Stress physiology						

TeachingExperience(Subjects/CoursesTaught):more than 3 years

		Training Course, RC, OC					
S. No.	Programme	Duration	Organized by	Any other			
onors&Awar	ds: NA						
ublications(L	astFIVE(05) YearPublications,	NA					
Year	Title	Journal/B	book(s) Co-	A (1 ()			
ofPublicatio				Author(s)			
				Author(s)			
ofPublicatio				Author(s)			
ofPublicatio				Autnor(s)			

Conference Presentations: National / International

	Paper Pres	sented in C	onferences/S	eminars/	Workshops/S	ymposia
S. No.	Title of Paper Presented	Title of Conferen ce, Seminar etc.	Organized by	Date	National/In ternational	Any other
	NA					
	J					
l Publi	cation Profile:NA					
<u>cs</u>						
			Boo	ok(s)		

Publications inIndexed/Peer ReviewedJournals:NA				
Year	<u>Title</u>	Journal	<u>Author</u>	
<u>ofPublicatio</u>				
<u>n</u>				

PublicService/UniversityService/ConsultingActivity					
NA					
ProfessionalSocietiesMemberships					
NA					
Projects(MajorGrants/Collaborations)					
NA					
Name(s) & Number(s)					
ofPhDStudentsSupervisedandAwarded with					
year:NA					
S.No. Name of Ph.D Date of Registration	Date of Award	Title of Thesis			
Scholar					
Any other information(s):					

(Signature of Faculty Member)

(Signature & Stamp of Teacher In-Charge/Principal)

The point which is not desirable/applicable, strike out or delete.