
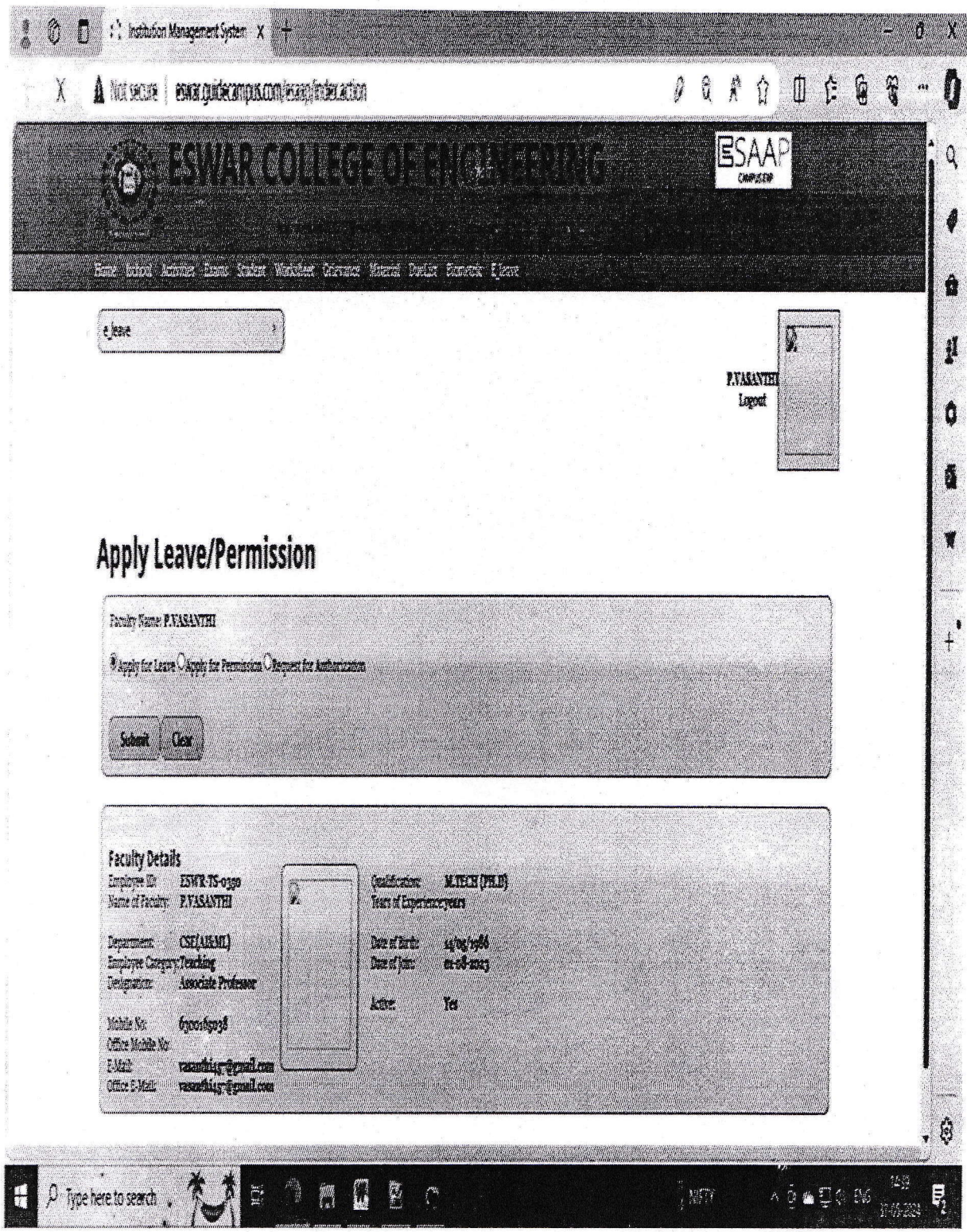



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e leave

P.VASANTHI
Logout

Apply Leave/Permission

Faculty Name: P.VASANTHI

Apply for Leave
 Apply for Permission
 Request for Authorization

Faculty Details	
Employee ID:	ESWR-TS-039
Name of Faculty:	P.VASANTHI
Department:	CSE(AI&ML)
Employee Category/Teaching:	
Designation:	Associate Professor
Mobile No:	8900869938
Office Mobile No:	
E-Mail:	vasanthi@gmail.com
Office E-Mail:	vasanthi@gmail.com
Qualification:	M.TECH (PH.D)
Years of Experience:	years
Date of Birth:	14/06/1984
Date of Join:	01-08-2013
Active:	Yes

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ESAA

Biometric Attendance Information

Faculty Details

Faculty ID: 201610001
 Name: [Redacted]
 Qualification: B.TECH (IT)
 Designation: Assistant Professor
 Date of Birth: [Redacted]
 Mobile No: [Redacted]
 Email: [Redacted]

Sl No	Employee ID	Name of Faculty	Month	Attendance	Remarks	Leave Status	Result
1	201610001	[Redacted]	01/2016	Present			
2	201610001	[Redacted]	02/2016	Present			
3	201610001	[Redacted]	03/2016	Present			
4	201610001	[Redacted]	04/2016	Present			
5	201610001	[Redacted]	05/2016	Present			
6	201610001	[Redacted]	06/2016	Present			
7	201610001	[Redacted]	07/2016	Present			

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biometric | Biometric Attendance

P.VASANTHI
Logout

Biometric Attendance Information

Faculty Name: P.VASANTHI

Month: Current Month v

Attendance Status: Any Status v

Submit Clear

Faculty Details

Employee ID:	ESWR 75-0390		Qualification:	M.TECH (PILD)
Name of Faculty:	P.VASANTHI		Years of Experience:	years
Department:	CS (AIMML)	Date of Birth:	14/08/1986	
Employee Category:	Teaching	Date of Join:	01-08-2003	
Designation:	Associate Professor	Active:	Yes	
Mobile No:	930086936			
Office Mobile No:	vasanthi.g@gmail.com			
E-Mail:	vasanthi.g@gmail.com			
Office F-Mail:	vasanthi.g@gmail.com			

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Leave Request Information

Department:

Faculty Name:

Leave Period:

Month:

Leave Type:

Leave Status:

ESAPC: No action to be selected

Faculty Details

Employee ID:

Name of Faculty:

Department:


Employee Category:

Designation:

Mobile No:

Office Address No:

Office E-Mail:



Qualification:

Years of Experience:

Date of Birth:

Date of Join:

Active:

Request ID	Department	Name of Faculty	Leave Type	Start Date	End Date	Status	Approved By	Approved Date	Remarks
123456	Computer Engg	DR.M. ANNA	Sick	11/03/2014	11/03/2014	Pending			

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41°C Sunny 10:42 11/03/2014

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