

## FACULTY PROFILE



1. Name (Block Letters) : SHANKAR MADAWALE
2. Date of Birth : 22.07.1964
3. Mother tongue : KANNADA
4. Blood Group : B + VE
5. Present Designation : ASSOCIATE PROFESSOR
6. Category : G M
7. Residential Address : 13, CHAITANYA NAGAR  
GOKUL ROAD HUBBALLI – 580030
8. Permanent Address : AT POST – KALLOL 591282  
TQ CHIKODI DT BELAGAVI
9. Phone Numbers : 9448340336
- Residence Phone No. :
- Mobile No. : 944834036
- E.Mail. : madawale.shankar@gmail.com

### 10. Academic Qualification.

Sl.No.	Qualification	University	Year of Passing	Class

- 2 -

### Service Particulars.

Sl.No.	Position	Year		Name of the Institution
		From	To	
1	LECTURER	29.01.1992	24.05.2004	B K COLLEGE CHKODI

2	ASSOCIATE PROFESSOR	25.05.2004	14.06.2014	J T COLLEGE GADAG
3	ASSOCIATE PROFESSOR	14.06.2014	TILL DATE	G H COLLEGE HAVERI

11. Research :

a) Title of Research : “ KINETICS OF OXIDATION OF  
SOME ORGANIC AND  
INORGANIC SUBSTRATES ”

b) Projects applied / ongoing :

c) Projects completed / Submitted :

d) Publications :

Journals Details :

12. Participation in Symposia, Seminars, Conferences and Workshops.

National	International	Total
08	03	11

Give Details:

Sl.No.	Participation	Date & Place

3

13. Presentation of Papers in Seminars, Symposia, Seminars,  
Conferences.

National	International	Total
12	03	15

14. Details of Presentations: Topic, place date etc.

Sl.No.	Paper, Author Details	Place, Date Details.
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15. Participation in Orientation and Refresher Courses :

Sl.No.	Programme / Course	Duration	Name of the University.

16. Teaching Innovations :

17. Extracurricular activities :

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18. Important responsibilities held :

19. Computer literacy :

20. Proficiency in languages :

21. Memberships – Academic /  
Professional / Social :

22. Duties / responsibilities assigned  
at the college. :

23. Sports and Hobbies :

### **DECLARATION**

Above given information is correct and true to the best of my  
knowledge.

Signature of Employee

Signature of HOD

Signature of Principal