

1.	Basic Information:	
	Name:	Dr.G.CHINNADURAI
	Designation:	ASSISTANT PROFESSOR
	Department:	ZOOLOGY
	Specialization:	NEMATODE TAXONOMY
	Mobile No:	9442382913
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2.	Membership in Professional bodies	
	1.	-
	2.	-
	3.	-
	4.	-
3.	Project Details:	
	Title:	-
	Duration:	-
	Funding Agency:	-
	Amount Sanctioned:	-
4.	Publications:	
	Number Of Papers/Books published:	
	(i) Papers:	-6
	(ii) Books:	-
	Number of Seminar/ Conference/ Workshop	
	(i) Organized	-
	(ii) Participated	-9
5.	Research Guidance	
	M.Phil	Guided: Guiding: -
	Ph.D	Guided: -Guiding: -