1.	Basic Information:	
	Name:	Dr.R.PERIYANAYAGI
	Designation:	ASSISTANT PROFESSOR
	Department:	ZOOLOGY
	Specialization:	MARINE BIOLOGY
	Mobile No:	9655584726
	Email:	
2.	Membership in Professional bodies	
	1.	-
	2.	-
	3.	-
	4.	-
3.	<b>Project Details:</b>	
	Title:	-
	Duration:	-
	Funding Agency:	-
	Amount	-
	Sanctioned:	
4.	Publications:	
	Number Of Papers/Books published:	
	(i) Papers:	4
	(ii) Books:	-
Number of Seminar/ Conference/ Workshop		ar/ Conference/ Workshop
	(i) Organized	-
	(ii) Participated	11
5.	Research Guidance	
	M.Phil	Guided: - Guiding: -
	Ph.D	Guided: -Guiding: -