

FULL NAME : Dr.BINI A

DEPARTMENT : Physical Education

DESIGNATION : Assistant Professor

EMAIL I D : biniindu@gmail.com

QUALIFICATION : Mphil, Ph.D
(Choose all options)

DATE OF JOINING SERVICE : 6/4/2012

AREA OF EXPERTISE : Sports

AWARDS/ RECOGNITIONS :

ACADEMIC ACHIEVMENTS :
(If required) IN 100 WORDS

RESEARCH ACHIEVEMENTS/ : MPhil, phd
EXPERIENCE