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| **FULLNAME** | **:Dr. Sreelekshmi S.** |
| **DEPARTMENT** | **: History** |
| **DESIGNATION** | **: Guest Lecturer** |
| **EMAIL ID** | **: vijirajesh33@gmail.com** |
| **QUALIFICATION (Choose all options)** | **: M. A., M. Phil, Ph.D** |
| **DATE OF JOINING SERVICE** | **: 29/07/2025** |
| **AREA OF EXPERTISE** | **:** |
| **AWARDS/RECOGNITIONS** | **:** |
| **ACADEMIC ACHIEVMENTS (If required) IN 100 WORDS** | **:** |
| **RESEARCH ACHIEVEMENTS/ EXPERIENCE** | **:** |