



**Faculty Profile**

<b>Title:</b>	Dr.	<b>First Name:</b> Triveni	<b>Last Name:</b>
<b>Designation:</b>	Assistant Professor		
<b>Department:</b>	Commerce		
<b>Address:</b>	6/62 Sec 2 Rajender Nagar, Sahibabad, Ghaziabad, UP - 201005		
<b>Email:</b>	<a href="mailto:triveni.du@gmail.com">triveni.du@gmail.com</a> , <a href="mailto:triveni.comm@shyamlal.du.ac.in">triveni.comm@shyamlal.du.ac.in</a>		
<b>Web-Page:</b>			

Educational Qualifications (from Bachelor's Degree):			
Degree	Subject	University/ College/Institution	Year
BA H Economics	Economics	Ramjas College DU	2006
MCOM	Commerce	Ramjas College DU	2010
PhD	International Business	DSE DU	2019
UGC NET JRF	Commerce	UGC	2010

Experience:					
	Name of the University/College/ Institute/Organisation	Designation & Status (Permanent/A d-hoc)	From	To	Effective Time Period
Teaching	Shaheed Bhagat Singh Eve College DU	Assistant professor	02-08-2011	03-05-2023	12 years approx
Research/ Corporate					
Consultancy					

Teaching - Learning Process (During the Academic Year 2019-2020)		
Are You using ICT (LMS, E-Resources)?	If Yes, Please give the details below:	
	Name	Total Numbers
E- Resources Techniques and Platforms	Ms Office, Excel, Ms Word, Power Point Presentations, Google Classrooms	

Career Advancement and Contribution to College Corporate Life ( Last three years till June 2020):				
	Name of the Committee/ Centre/ Society/ Cell	Designation	From	To
Convenor/Member of Committees	Admission Committee, Debating Society, Enterpreneurship Cell, Commerce Association,	Member	2017	2020
Any Other Administrative Responsibility (Bursar, Coordinator, Superintendent etc.)				

Areas of Interest/Specialisation:	
S.No.	Areas of Interest/ Specialisation
1	Economics
2	International Business
3	Business Mathematics

Subjects Taught (During the Academic Year 2019-2020)			
S.No.	Subject	S.No.	Subject
1	Business Mathematics		
2	Entrepreneurship		





**Association with the Professional Bodies:**

	Name of the Organisation <sup>1</sup>	Year
Membership	YEAR, ERMAI	Life time Membership
Any Other		

**Development of E-Learning Delivery Process/Material:**

S.No	Title of the Module	Recognised by/Submitted at/ Delivered at any government setup

**Refresher/ Orientation Programme/ FDP / Other Specialised Courses:**

S.No.	Topic	Name of the Organiser	Place	Duration and Year

**Declaration**

I do hereby solemnly declare that the information given and the statements made by me are correct and true to the best of my knowledge

<b>Dr. Triveni</b>
<b>Signature with Full Name</b>