Faculty Details Proforma for DU Web-site

Photograph

1	Title	First Name	Middle	Last
			Name	Name
	DR.	RUPLEKHA		KHULLAR
2	Designation	ASSOCIATE PROFESSOR		
3	Permanent	PERMANENT		
	Temporary/ Ad-hoc (Please specify)			
	Work Experience (Years of experience)	39 YEARS		
4	Address:	C-92, OAKWO AKASHNEEM GURGAON, H	MARG, DLF	2,
5	Phone No: Office			
	College Email			
6	Educational Qualifications (Highest Degree)	PHD		
7	Orientation/ Refresher/ FDP/ any other	4		
	Participation in Workshops	5		
8	Administrative Assignments			
	Department (in the last two years)			
	College (in the last two years)	BUILDING & I GRIEVANCE (TIME-TABLE,	COMMITTEE	*
	University (In the entire tenure)	UGCC & PGC	C	
9	Areas of Interest / Specialization	FEMINISM, A		ILOSOPHY,
10	Subjects Taught (in the last three years)	FEMINISM, A		

		MAKING, SYMBOLIC LOGIC		
11	Research Guidance	ADDITIONAL SUPERVISION OF PHD CANDIDATE		
12	Publications Profile			
	Authored Books (Single/ Co-authored)			
	Edited Books (Single/ Co-edited)			
	Chapter in book (Single/ Co-edited) (Please specify whether National or International)	CHAPTER ON "LIBERTY", IN CO-EDITED BOOK, <i>ETHICS</i>		
	Article in Peer-reviewed Journal (Single/ Co-edited) (Please specify whether National or International, UGC Listed)			
	Conference Proceedings (or any other form of published content)			
	Creative Writing			
	Translation			

13	Conference Participation (in the last three years) [Please specify whether National or International]	
	Papers Presented	
	Sessions Chaired	
	Discussant or any other	1
14	ICT enabled teaching-learning	

	Development of e-content (Please specify if it is e-lesson, e-quizzes, e lectures; also mention the Institution for which the same has been prepared)			
	Development of MOOCs			
15	Contribution to development of Syllabi	DEVELOP MENT OF LOCF COURSES- ANALYTIC PHILOSOP HY, FEMINISM		
16	Research Projects	Major Grants	Research Collaboration	UGC Funded Research Projects
17	Awards and Distinctions			
18	Association With Professional Bodies			
19	Other Activities			

This is to certify that the information provided by me is correct and to the best of my knowledge
Signature of Faculty Member:
Name and Designation: