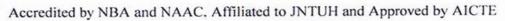


# Kommuri Pratap Reddy Institute of Technology

#### An UGC Autonomous Institution





### **DEPARTMENT OF CSE (AI&ML)**

## **2<sup>nd</sup> YEAR I SEMISTER SYLLABUS COVERAGE**

#### **DATE:**

| SNO | Name of the Faculty | Subject | SYLLABUS COVERAGE |         |         |         |                  | Unit<br>covered | Units to be covered | sign |
|-----|---------------------|---------|-------------------|---------|---------|---------|------------------|-----------------|---------------------|------|
|     |                     |         | Unit 1 %          | Unit 2% | Unit 3% | Unit 4% | Unit 5%          |                 |                     |      |
|     |                     |         |                   |         |         |         |                  |                 |                     |      |
|     |                     |         |                   |         |         |         |                  |                 |                     |      |
|     |                     |         |                   |         |         |         |                  |                 |                     |      |
|     |                     |         |                   |         |         |         |                  |                 |                     |      |
|     |                     |         |                   |         |         |         |                  |                 |                     |      |
|     |                     |         |                   |         |         |         |                  |                 |                     |      |
|     |                     |         |                   |         |         |         |                  |                 |                     |      |
|     |                     |         | Total             |         | Covered |         | To be<br>Covered |                 | sign                |      |
|     |                     |         | Total             |         | Covered |         | To be<br>Covered |                 | sign                |      |
|     |                     |         | Total             |         | Covered |         | To be<br>Covered |                 | sign                |      |
|     |                     |         |                   |         |         |         |                  |                 |                     |      |