S	r. No.	Name of School	Name of Department	Programme Code	IProgramme name	lYear of	CBCS / elective course system (Yes/No)	1 '	Year of revision (if any)	the syllabus during last 5 years, Percentage of content added or	Link to the relevant document
	1	School of Technology	Mathematics	BSCM	B.Sc. Mathematics	2016	Yes	2016	2020	0%	