(fill the following tables with relevant data and upload this excel file in session 2.3.3 in the provided google form)

NAME OF THE SCHOOL/DEPARTMENT: SCHOOL OF ARTIFICIAL INTELLIGENCE AND ROBOTICS

Approved Mentor List (latest completed academic year)

Sl.No.	Name of mentor/faculty members(only full time teachers)
1	Dr. Bindu V R
2	Dr. Ivy Prathap
3	Ms. Jissy Liz Jose
4	Dr. Sharon Susan Jacob
Total	4

Total Students/Mentee Assigned to each faculty/Mentor during the last academic year(2021-22) (Issues raised and resolved)

Please fill all the columns

Programn	ne	MSc.Artif	icial Inte	elligence a	nd Machine Learnin	g			
Sl. No	Name of Mentor/Faculty members	Sl. No	Level of the programme PG			Total	Topics/issues* raised/Discuss ed during Mentoring	Action /resolutionTaken**	Descripton of action taken
			Male Female Name						
1	Dr. Bindu V R	1	1	Temme	Vishnu V C	2	Academic/ Professional/Pe rsonal	Conducted several dis	Encouraged him to explore his potential and come up with new ideas, guided him to attend IEDC summit and Entreprenurial activities, gave an orientation towards research
		2		1	Maisa Veeran T P		Academic/ Professional/Pe rsonal	Conducted several disa	Gave suggestions on how to improve her academic performance and introduced her to the career options related to Artificial Intelligence
2	Dr. Ivy Prathap	1	1		Samvith S Nair	1	Academic. Professional	Career Counseling	Motivated him to explore opportunities in Robotics.
3	Ms. Jissy Liz Jose	1	1		Alen Jacob	1	Personal, Academic	Personal counseling	Advised him to concentrate more on studies.
4	Dr. Sharon Susan Jacob	1		1	Betty Thomas	1	Personal, Academic	Personal counseling	Advised her to improve her programming skills.

^{*1.} Academic, 2. Professional, 3. Personal, 4. Any other(mention)

^{** 1.} Career Counseling, 2. Personal counseling, 3. Advised for medical Support, 4. Asked to meet /consult expert, 5. Any other(mention)