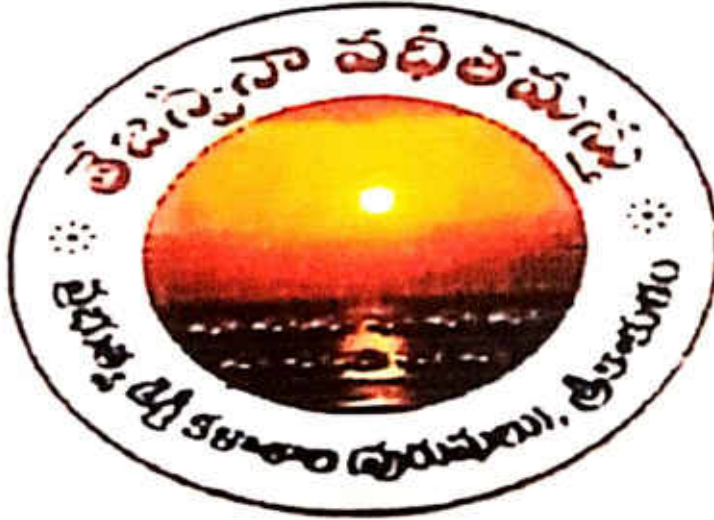


A PROJECT
ON
COMMUNITY SERVICE

Submitted in the partial fulfillment of the requirements for the award of
Bs.c degree

BY
PUTCHA.BHAVYASRI
2222001049072
Semester 2 (BZC)
Batch 2022-2025
Under the supervision of
D.Ravindra
Letchrer in Botany

GOVERNMENT DEGREE COLLEGE(Men), SRIKAKULAM



WEBSITE: WWW.gcmsklm.ac.in

ACKNOWLEDGEMENT

I would like to express my gratitude to all those who gave me the possibility to complete this Community Service Project. Special thanks to Mentor **D.Ravindra** sir who help me in stimulating suggestions and encouragement to complete this project.

I would like to thank all the staff from the **department of Botany** for their able guidance and support to complete this project

I would also like to express my gratitude to our principal madam for her tremendous support to complete this project.

DECLARATION

I hereby declare that the Community Service Project report entitled "FOOD HABITS" submitted by me to the Govt.Degree College (M), srikakulam in partial fulfillment of the requirement for the award of the degree of Bsc Cbz is a record of bonified project work carried out by me under the guidance of **D Ravindra** sir.I further declare that the work reported in this project has not been submitted and will not be submitted either in part or in full, for the award of any other degree in this institute or other institute or University.

Srikakulam
Date:.

P. Bhavya Sri
Signature of the candidate
Name: P. Bhavya Sri

CERTIFICATE

I certified that **Putchha.Bhavya sri** studying Bsc Cbz group has completed and submitted the project report on "FOOD HABITS" further partial fulfillment of the requirements for the award of Batchelor of science under my supervision during the academic year 2022-2023.

Date:
Place:

D. Ravindra

Project guide
D.Ravindra
Letchrer in Botany
GDC(M), srikakulam

CONTENTS

- 1.Introduction
- 2.Objectives
- 3.Methodology
- 4.Log book
- 5.Socio-economic survey
Report-Pics
- 6.Awareness program
- 7.Project
- 8.Conclusion

INTRODUCTION

Food habits and Nutritional Problems:

Food is essential for all humans for survival, Food Habits and imbalanced intake of diet by an individual results in the malnutrition or cause of many health problems. Especially women, children and pregnant women must be always cautious to take proper food intake with essential nutrients. Because poor diet and disease are caused by food insecurity. Sometime by causing diarrhoea and other illness.

There is a saying 'you are what you eat' seems to be proven true. It is important to know what food to eat in order to stay healthy. Health depends to a large extent on Nutrition and Nutrition on food we take. Hence Nutrition and Health are two sides of the same coin and food is the most important factor for health and fitness.

Healthy Food Habits:

Healthy Food habits includes a variety of foods in adequate amounts and correct proportions to meet the requirements of all essential nutrients such as proteins, carbohydrates, fats, vitamins, minerals, water and fibre. This also includes proper Schedule for the intake of light and heavy foods, when to take and when not to take, health condition of the individual. For example person who is suffering from kidney stones should not often take calcium rich foods. We have to take foods that suits our age and health. The most common eating idiosyncracies include skipping meals, consuming fast foods in a routine way, avoiding fruits, and vegetables, frequent snacking. Hence it is essential for each and every individual to adopt proper food habits.

OBJECTIVE

The aim and objective of this project is to find out in a closed community about the following food habits and to analyse whether they are adopted to healthy food habits and if not to incorporate sound eating habits by creating awareness in them to recognise good eating habits followed with regular exercise.

- About the type of foods most people are interested to take
- Food intake in regular Time intervals.
- Main meal/ in view of the majority of the people;
- Whether interested to take fresh food or cooked & preserved food.
- Taking fresh fruits and vegetables.
- Sweets/junk foods.
- Whether drinking sufficient quantity of water.
- Regular weight check up.
- Monitoring individual food behaviour.
- Any form of eating disorders.
- Effect of socio-economic status on food habits.

GOVT. DEGREE COLLEGE(M), SRIKAKULAM
COMMUNITY SERVICE PROJECT
LOG BOOK

Name of the student : P. Bhayya Sri

Group : BSC. BZC

Registration Number : 2222001049032

Name of the Mentor : D. Ravindra

Name of the Project : Socio-Economic Survey

Date & Day	Activity done	Number of Hours Spent	Signature of the student
Tuesday 09/05/2023	Socio-Economic Survey	5 hrs	P. Bhayya Sri
Wednesday 10/05/2023	Socio-Economic Survey	6 hrs	P. Bhayya Sri
Thursday 11/05/2023	Socio-Economic Survey	6 hrs	P. Bhayya Sri
Friday 12/05/2023	Socio-Economic Survey	5 hrs	P. Bhayya Sri
Saturday 13/05/2023	Socio-Economic Survey	7 hrs	P. Bhayya Sri
Sunday 14/05/2023	Socio-Economic Survey	7 hrs	P. Bhayya Sri
Monday 15/05/2023	Socio-Economic Survey	6 hrs	P. Bhayya Sri
Tuesday 16/05/2023	Socio-Economic Survey	6 hrs	P. Bhayya Sri

D. Ravindra
Signature of the Mentor

GOVT. DEGREE COLLEGE(M), SRIKAKULAM
COMMUNITY SERVICE PROJECT
LOG BOOK

Name of the student : P. Bhavya Sri

Group : BSc. B2C

Registration Number : 2222001049072

Name of the Mentor : D. Ravindra

Name of the Project : Awareness program

Date & Day	Activity done	Number of Hours Spent	Signature of the student
wednesday 17/05/2023	Awareness Program	5 hrs	P. Bhavya Sri
Thursday 18/05/2023	Awareness Program	6 hrs	P. Bhavya Sri
Friday 19/05/2023	Awareness Program	7 hrs	P. Bhavya Sri.

D. Ravindra
Signature of the Mentor

GOVT. DEGREE COLLEGE(M), SRIKAKULAM
COMMUNITY SERVICE PROJECT

LOG BOOK

Name of the student : P. Bhavya Sri

Group : BSC. BZC

Registration Number : 2222001049072

Name of the Mentor : D. Ravindra

Name of the Project : Food habits

Date & Day	Activity done	Number of Hours Spent	Signature of the student
Saturday 20/05/2023	Food habits	6 hrs	P. Bhavya Sri
Sunday 21/05/2023	Food habits	5 hrs	P. Bhavya Sri
Monday 22/05/2023	Food habits	6 hrs	P. Bhavya Sri
Tuesday 23/05/2023	Food habits	6 hrs	P. Bhavya Sri
Wednesday 24/05/2023	Food habits	6 hrs	P. Bhavya Sri
Saturday 25/05/2023	Food habits	7 hrs	P. Bhavya Sri
Sun day 26/05/2023	Food habits	6 hrs	P. Bhavya Sri
Saturday 27/05/2023	Food habits	6 hrs	P. Bhavya Sri
Sunday 28/05/2023	Food habits	6 hrs	P. Bhavya Sri

D. Ravindra

Signature of the Mentor

GOVT. DEGREE COLLEGE(M), SRIKAKULAM
COMMUNITY SERVICE PROJECT

LOG BOOK

Name of the student : P. Bhayya Sri

Group : BSc. BZC

Registration Number : 2222001040072

Name of the Mentor : D. Ravindra

Name of the Project : Project writing

Date & Day	Activity done	Number of Hours Spent	Signature of the student
Monday 29/05/2023	Project writing	10:30hrs	P. Bhayya Sri
Tuesday 30/05/2023	Project writing	7:00hrs	P. Bhayya Sri
Wednesday 31/05/2023	Project writing	3:00hrs	P. Bhayya Sri
Thursday 01/05/2023	Project writing	3:00hrs	P. Bhayya Sri
Friday 02/05/2023	Project writing	3:00hrs	P. Bhayya Sri
Saturday 03/05/2023	Project writing	4:00hrs	P. Bhayya Sri
Sunday 04/05/2023	Project writing	3:30hrs	P. Bhayya Sri
Monday 05/05/2023	Project writing	5:00hrs	P. Bhayya Sri
Tuesday 06/05/2023	Project writing	7:00hrs	P. Bhayya Sri
Saturday 07/05/2023	Project writing	2:30hrs	P. Bhayya Sri

D. Ravindra
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM
COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY CONSOLIDATION REPORT

Name of the student : P. Bhavya Sir

Group : BSc. BZC

Name of the Mentor : P. Ravindra

Name of the Project : Food habits

Ward/ Habitat Mandal	Panchayat	District	Post Office	Pin Code
36 ward				
Srikakulam		Srikakulam		
			Gujaratipeta	532001

1. Total Number of Houses in the Habitat/Ward: 25 houses

2. Number of Houses Caste-wise:

SC 25 ST ___ OC ___ BC-A ___ BC-B ___ BC-C ___ BC-D ___

3. Common Health problems in the Habitat/Ward:

(i) cold

(ii) Viral fevers

(iii)

4. Number of White Ration Cards: 25

5. Number of Illiterates in the Ward/Habitat/Village: 15

6. Number of Graduates in the Ward/Habitat/Village: 5

7. Number of Job Holders: 3

8. Number of PWD People: NO

9. Number of DWACRA Groups in the Ward/Habitat/Village: 3 groups

10. Road connectivity to the Ward/Habitat/Village: Yes/No

11. Bus facility available: Yes/No

12. Problems identified in the Ward/Habitat/Village:

(i) lot of diseases caused by mosquitoes

(ii) Improper drainage system

(iii) water problems in every street

(iv)

P. Ravu

Signature of the Mentor

P. Bhavya Sir

Signature of the Student



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM
COMMUNITY SERVICE PROJECT
SOCIO - ECONOMIC SURVEY

Name of the Student : P. Bhayya Sri

Group : BSC. BZC

Registration Number : 2222001049072

Area of the Survey conducted: P.N. colony

House No.	Habitat Ward	Panchayat /Municipality
179		
Post office	Mandal	District
Gujjara Palle	Srikakulam	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
①	M. Dola	M	55	10th class	-	90,000
②	M. Lakshmi	F	53	5th class	-	
③	M. Nani	F	29	Grader	-	

2. Social Status details:

(i) Community: SC/ST/BC-A-B-C-D/OC (ii) Sub-Caste: Mala (iii) Religion: Hindu

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented): Own

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: X Acres

(vi) Livestock resources: Cows X Oren X Buffaloes X Sheep/Goats X.

- (vii) Do you have own toilet? Yes/No ✓
 (viii) Type Cooking fuel used: LPG/Kerosene/Wood/ others specify _____
 (ix) Do you have white Ration Card? Yes/No ✓
 (x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle ✓

4. Health Details:

- (i) Ailments in family: ✓
 (ii) Treatment in which Hospital: Govt/Private ✓
 (iii) Any PWD Persons in family: Yes/No ✓

S.No.	Name of the Person	Gender	Age	Nature of Disability

- (iv) Do you have Govt. Arogya Sri Card: Yes/No ✓

5. Other Details:

- (i) Do You have TV: Yes/No ✓
 (ii) Do you have Mobile: Yes ✓
 (iii) Mobile Number: 9959276185 ✓
 (iv) Do you have Computer/Laptop: Yes/No ✓
 (v) Is internet available at home: Yes/No ✓

6. Any specific problems identified in the village/ Ward:

- (i) diseases causes by mosquitoes
 (ii) water problems
 (iii) Improper Drilling system

Place: P.N.colony

Date: 09/05/2023

P. Bhagavathi
 Signature of the Student

D-Ravi
 Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO – ECONOMIC SURVEY

Name of the Student : P. Bhavya Srip

Group : BSC - BZC

Registration Number : 2222001049072

Area of the Survey conducted: P. N. Colony

House No.	Habitat /Ward	Panchayat /Municipality
178		
Post office	Mandal	District
Gujjara thipeta	Srikakulam	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
①	Gr. Prasad	M	28	10th class	workless	
②	Gr. Hanatha?	F	26	6th class	housewife	30,000

2. Social Status details:

(i) Community: SC/ST/BC-A-B-C-D/OC (ii) Sub-Caste: mala (iii) Religion: Hindu

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented): Rented

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection ✓

(iv) Availability of Agricultural land: Yes/ No ✓

(v) Extent of Agricultural land: X Acres

(vi) Livestock resources: Cows X Oxen X Buffaloes X Sheep/Goats X

(vii) Do you have own toilet? Yes/No

(viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify _____

(ix) Do you have white Ration Card? Yes/No

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/ Private

(iii) Any PWD Persons in family: Yes/No

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No

5. Other Details:

(i) Do You have TV: Yes/No

(ii) Do you have Mobile: Yes

(iii) Mobile Number: 8897313713

(iv) Do you have Computer/Laptop: Yes/No

(v) Is internet available at home: Yes/No

6. Any specific problems identified in the village/ Ward:

(i) Lot of diseases caused by mosquitoes

(ii) water problems

(iii)

Place: P.N. colony

Date: 09/05/2023

P. Bhagwati
Signature of the Student

D. Ray
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Bhayya Sri

Group : BSC. CBZ

Registration Number : 22220010249072

Area of the Survey conducted: P. Nicolamy

House No.	180	Habitat /Ward	3B	Panchayat /Municipality	
Post office	Gujjwathipeta	Mandal	Srikakulam	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
①	K. Srinu	M	35	10th class	Autodriver	} 20,000
②	K. Pavani	F	33	Tnter	house wife	
	K. Rashma	F	12	6th class	-	
	K. Shashitha	F	10	5th class	-	
	K. Manikaja	M	8	3 class	-	

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: mala (iii) Religion: Hindu

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented): own

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: X Acres

(vi) Livestock resources: Cows X Oxen X Buffaloes X Sheep/Goats X

(vii) Do you have own toilet? Yes/No ✓

(viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify _____ ✓

(ix) Do you have white Ration Card? Yes/No ✓

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle ✓

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private ✓

(iii) Any PWD Persons in family: Yes/No ✓

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No ✓

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number: 7075320234

(iv) Do you have Computer/Laptop: Yes/No ✓

(v) Is internet available at home: Yes/No ✓

6. Any specific problems identified in the village/ Ward:

(i) water problems

(ii) viral fevers

(iii)

Place: P.N.colony

Date: 09/05/2023

P. Bhayadri
Signature of the Student

D. Ravi
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Bhayya Sri
Group : BSC. CBZ
Registration Number : 2222001049072
Area of the Survey conducted: P. N. colony

House No.	182	Habitat /Ward	35	Panchayat /Municipality	Srikakulam
Post office	Aujouthipeta	Mandal	Srikakulam	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
①	B. Ganesh	M	55	3rd class	farmer	?
②	B. Revanama	F	50	-	Housewife	10,000
③	B. Sai	M	25	Inter	-	

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: Mala (iii) Religion: Hindu

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented): Own

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: X Acres

(vi) Livestock resources: Cows 5 Oxen X Buffaloes X Sheep/Goats X

(vii) Do you have own toilet? Yes/No ✓

(viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify _____

(ix) Do you have white Ration Card? Yes/No ✓

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle ✓

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private ✓

(iii) Any PWD Persons in family: Yes/No ✓

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No ✓

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number: 90703687540

(iv) Do you have Computer/Laptop: Yes/No ✓

(v) Is internet available at home: Yes/No ✓

6. Any specific problems identified in the village/ Ward:

(i) water problem

(ii) lot of disses by mosquitoes

(iii)

Place: P.N.colony

Date: 10/05/2023

P. Bhargava
Signature of the Student

D. Raw
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Bhavya Soni
Group : BSC. CBZ
Registration Number : 2222001049072
Area of the Survey conducted: P.N. colony

House No.	183	Habitat /Ward	35	Panchayat /Municipality	Srikakulam
Post office	Gujaratpeta	Mandal	Srikakulam	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
①	B. Ganesh	M	50	2nd class	daily labour	} 20,000
②	B. kavika	F	23	degree	Nurse	
③	B. kavri	M	26	degree	-	

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: mala (iii) Religion: Hindu

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented): own

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: X Acres

(vi) Livestock resources: Cows X Oxen 2 Buffaloes X Sheep/Goats X

(vii) Do you have own toilet? Yes/No ✓

(viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify _____

(ix) Do you have white Ration Card? Yes/No ✓

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private ✓

(iii) Any PWD Persons in family: Yes/No ✓

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No ✓

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number: 7396324828

(iv) Do you have Computer/Laptop: Yes/No ✓

(v) Is internet available at home: Yes/No ✓

6. Any specific problems identified in the village/ Ward:

(i) viral fevers

(ii) water problems

(iii)

Place: P. Nicolany

Date: 10/05/2023

P. Thangabari
Signature of the Student

D. Ravi
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Bhavya Sarf
Group : BSC. B2C
Registration Number : 2222001049072
Area of the Survey conducted: P. N. Colony

House No.	173-1A	Habitat /Ward	36	Panchayat /Municipality	Srikakulam
Post office	Gujarathipeta	Mandal	Srikakulam	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
①	M. Ravanama	F	30	-	farmer	20000
	M. Raju Rao	M	29	-	Housewife	
	M. Santho	M	16	Inter	-	
	M. getha	F	17	B.Tech	-	

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: mala (iii) Religion: Hindu

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented): Own

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: X Acres

(vi) Livestock resources: Cows 2 Oxen X Buffaloes X Sheep/Goats X

(vii) Do you have own toilet? Yes/No ✓

(viii) Type Cooking fuel used: LPG/Kerosene/Wood/ others specify _____

(ix) Do you have white Ration Card? Yes/No ✓

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle ✓

4. Health Details:

(i) Ailments in family: ✓

(ii) Treatment in which Hospital: Govt/Private ✓

(iii) Any PWD Persons in family: Yes/No ✓

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No ✓

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number: 9701233872 ✓

(iv) Do you have Computer/Laptop: Yes/No ✓

(v) Is internet available at home: Yes/No ✓

6. Any specific problems identified in the village/ Ward:

(i) cdd

(ii) Viral fever

(iii) lot of disease causes by mosquitoes

Place: P.N. colony

Date: 10/05/2023

P. Bhargava
Signature of the Student

D. Ravi
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM
COMMUNITY SERVICE PROJECT
SOCIO - ECONOMIC SURVEY

Name of the Student : P. Bhayya Sri

Group : BGC. CBZ

Registration Number : 2222001049072

Area of the Survey conducted: P.N. Colony [M.V.P]

House No.	Habitat /Ward	Panchayat /Municipality
181		
Post office	Mandal	District
Beyyarthipala	Sri Pakulam	Sriakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
①	B. Nagnaru	M	36	10th class	Labour	}
②	B. Ramanama	F	35	10th class	House wife	
③	B. Igaru	M	15	9th class	-	}
④	B. Harani	F	14	7th class	-	
⑤	B. Rajesh	M	17	-	-	

2. Social Status details:

(i) Community: SC/ST/BC-A-B-C-D/OC (ii) Sub-Caste: mala (iii) Religion: Hindu

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented): own

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: X Acres

(vi) Livestock resources: Cows X Oxen X Buffaloes X Sheep/Goats X

(vii) Do you have own toilet? Yes/No ✓

(viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify _____

(ix) Do you have white Ration Card? Yes/No ✓

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle ✓

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private ✓

(iii) Any PWD Persons in family: Yes/No

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No ✓

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number: 8977234836

(iv) Do you have Computer/Laptop: Yes/No ✓

(v) Is internet available at home: Yes/No ✓

6. Any specific problems identified in the village/ Ward:

(i) Lot of diseases by mosquitoes

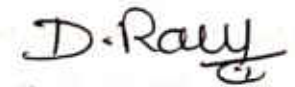
(ii) water problems

(iii)

Place: P. N. colony

Date: 11/05/2023


Signature of the Student


Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Bhavya Sri

Group : BSC. BZC

Registration Number : 2222001049072

Area of the Survey conducted: P.N. colony

House No.	176	Habitat /Ward	35	Panchayat /Municipality	
Post office	Gujarathi Peta	Mandal	Srikakulam	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
①	Gr. Mallash	M	35	10th class	Driver	} 20,000
②	Gr. Sujatha	F	33	9th class	Housewife	
③	Gr. Charan	M	13	7th class	-	
④	Gr. Sahasra	F	12	6th class	-	

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: mala (iii) Religion: Hindu

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented): own

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: X Acres

(vi) Livestock resources: Cows X Oxen X Buffaloes X Sheep/Goats X

(vii) Do you have own toilet? Yes/No ✓

(viii) Type Cooking fuel used: LPG/Kerosene/Wood/ others specify _____ ✓

(ix) Do you have white Ration Card? Yes/No ✓

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle ✓

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private ✓

(iii) Any PWD Persons in family: Yes/No ✓

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No ✓

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number: 9989290059 ✓

(iv) Do you have Computer/Laptop: Yes/No ✓

(v) Is internet available at home: Yes/No ✓

6. Any specific problems identified in the village/ Ward:

(i) viral fevers

(ii) water problems

(iii) disease causes by mosquitoes

Place: P.N. Colony

Date: 11/05/2023


Signature of the Student


Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Bhavya Sri

Group : BSC. CBZ

Registration Number : 2222001049072

Area of the Survey conducted: P.N. colony

House No.	184/10/A	Habitat /Ward	3B	Panchayat /Municipality	
Post office	Gujarati-peta	Mandal	Srikakulam	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
①	P. Manga	F	35	Inter	Nurse	₹ 15,000
	P. Pavani	F	20	Inter	-	

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: mala (iii) Religion: christian

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented): own

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection ✓

(iv) Availability of Agricultural land: Yes/ No ✓

(v) Extent of Agricultural land: X Acres

(vi) Livestock resources: Cows X Oxen X Buffaloes X Sheep/Goats X

(vii) Do you have own toilet? Yes/No ✓

(viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify _____

(ix) Do you have white Ration Card? Yes/No ✓

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle NO

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private ✓

(iii) Any PWD Persons in family: Yes/No ✓

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No ✓

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number: 9705182582

(iv) Do you have Computer/Laptop: Yes/No ✓

(v) Is internet available at home: Yes/No ✓

6. Any specific problems identified in the village/ Ward:

(i) Viral fevers

(ii) Lot of diseases causes by mosquitoes

(iii) water problems

Place: P. N. colony

Date: 11/05/2023

P. Bhayasi
Signature of the Student

D. Rany
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Bhavya Sri

Group : BSC. CBZ

Registration Number : 2222001049072

Area of the Survey conducted: P.N.colony

House No.	174	Habitat /Ward	35	Panchayat /Municipality	
Post office	Gujarathipeta	Mandal	Srikakulam	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
①	S. Purgapasad	M	65	2nd class	Farmmer	?
②	S. Ravanama	F	64	-	housewife	5,000

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: mala (iii) Religion: Hindu

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented): own

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: X Acres

(vi) Livestock resources: Cows 3 Oxen X Buffaloes X Sheep/Goats X

(vii) Do you have own toilet? Yes/No ✓

(viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify _____

(ix) Do you have white Ration Card? Yes/No ✓

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle NO

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private ✓

(iii) Any PWD Persons in family: Yes/No ✓

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No ✓

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number: 8639966122

(iv) Do you have Computer/Laptop: Yes/No ✓

(v) Is internet available at home: Yes/No ✓

6. Any specific problems identified in the village/ Ward:

(i) Lot of diseases causes by mosquitoes


(ii) water problems

(iii)

Place: P.N.colony

Date: 11/05/2023


Signature of the Student


Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Bhayya Sri

Group : BSC. CBZ

Registration Number : 2222001049072

Area of the Survey conducted: P. N. Colony

House No.	173	Habitat /Ward	3B	Penchayat /Municipality	Srikakulam
Post office	Gujaratpeta	Mandal	Srikakulam	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
①	M. Delleshwar Rao	M	37	10th class	Driver	10,000
	M. Pavan?	F	36	Inter	Housewife	
	M. Gowtham	M	5	-	-	

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: mala (iii) Religion: Hindu

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented): Rented

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: X Acres

(vi) Livestock resources: Cows X Oxen X Buffaloes X Sheep/Goats X

(vii) Do you have own toilet? Yes/No ✓

(viii) Type Cooking fuel used: LPG/Kerosene/Wood/ others specify _____ ✓

(ix) Do you have white Ration Card? Yes/No ✓

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle ✓

4. Health Details:

(i) Allments in family:

(ii) Treatment in which Hospital: Govt/Private ✓

(iii) Any PWD Persons in family: Yes/No ✓

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No ✓

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number: 9703569432 ✓

(iv) Do you have Computer/Laptop: Yes/No ✓

(v) Is internet available at home: Yes/No ✓

6. Any specific problems identified in the village/ Ward:

(i) Lot of diseases by mosquitoes

(ii) improper drainage problems

(iii)

Place: P. N. colony

Date: 12/05/2023

P. Thayyath
Signature of the Student

D. Ray
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Bhavya Sri

Group : BSC. CBZ

Registration Number : 2222001049072

Area of the Survey conducted: P. N. Colony

House No.	172	Habitat /Ward	3B	Panchayat /Municipality	Srikakulam
Post office	Gujathlipota	Mandal	Srikakulam	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
①	M. Raja	M	60	-	-	10,000
	M. Parvathi	F	55	-	-	

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: mala (iii) Religion: Hindu

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented): own

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: X Acres

(vi) Livestock resources: Cows X Oxen X Buffaloes X Sheep/Goats X

(vii) Do you have own toilet? Yes/No ✓

(viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify _____ ✓

(ix) Do you have white Ration Card? Yes/No ✓

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private ✓

(iii) Any PWD Persons in family: Yes/No ✓

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No ✓

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number: 9701233872

(iv) Do you have Computer/Laptop: Yes/No ✓

(v) Is internet available at home: Yes/No ✓

6. Any specific problems identified in the village/ Ward:

(i) Lot of disease causes by mosquitoes

(ii) water problems

(iii)

Place: P.N. Colony

Date: 12/03/2023


Signature of the Student


Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Bhavya Sri

Group : BSC. CBZ

Registration Number : 2222001049072

Area of the Survey conducted: P. N. Colony

House No.	138	Habitat /Ward	38	Panchayat /Municipality	
Post office	Srikakulam	Mandal	Srikakulam	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
①	M. Syam	M	39	10 th class	Driver	10,000
	M. Sunitha	F	35	10 th class	House wife	
	M. Jalaram	M	10	5 th class	-	

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: mala (iii) Religion: Hindu

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented): own

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection ✓

(iv) Availability of Agricultural land: Yes/ No ✓

(v) Extent of Agricultural land: * Acres

(vi) Livestock resources: Cows Oxen Buffaloes Sheep/Goats

(vii) Do you have own toilet? Yes/No ✓

(viii) Type Cooking fuel used: LPG/Kerosene/Wood/ others specify _____

(ix) Do you have white Ration Card? Yes/No ✓

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle ✓

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private ✓

(iii) Any PWD Persons in family: Yes/No ✓

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No ✓

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number: 7396602234

(iv) Do you have Computer/Laptop: Yes/No ✓

(v) Is internet available at home: Yes/No ✓

6. Any specific problems identified in the village/ Ward:

- (i) Improper drainage system
- (ii) water problems
- (iii) Lot of diseases causes by mosquitoes

Place: P. N. Colony

Date: 12/03/2023


Signature of the Student


Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Bhayya Sri

Group : BSC. CBZ

Registration Number : 2222001049072

Area of the Survey conducted: P. N. Colony

House No.	16-12-100	Habitat /Ward	36	Panchayat /Municipality	
Post office	Gurupattipeta	Mandal	Srikakulam	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
①	M. Rajulu	M	46	2nd class	shop	10,000
	M. Geetha	F	45	5th class	housewife	
	M. Mahesh	M	25	Inter	Tiffin shop	
	M. Dhana	F	26	Inter	-	

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: mala (iii) Religion: Hindu

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented): own

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: X Acres

(vi) Livestock resources: Cows X Oxen X Buffaloes X Sheep/Goats X

(vii) Do you have own toilet? Yes/No ✓

(viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify _____

(ix) Do you have white Ration Card? Yes/No ✓

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle

4. Health Details:

(i) Ailments in family: NO

(ii) Treatment in which Hospital: Govt/Private ✓

(iii) Any PWD Persons in family: Yes/No ✓

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No ✓

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number: 7396602234

(iv) Do you have Computer/Laptop: Yes/No ✓

(v) Is internet available at home: Yes/No ✓

6. Any specific problems identified in the village/ Ward:

(i) viral fevers

(ii) water problems

(iii)

Place: P.N.colony

Date: 13/05/2023

P. Bhayalari
Signature of the Student

D. Ray
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Bhayya Sri
Group : BSC. CBZ
Registration Number : 2222001049072
Area of the Survey conducted: P.N. colony

House No.	16-9/A	Habitat /Ward	3B	Panchayat /Municipality	
Post office	Bujanthipeta	Mandal	Srikakulam	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
①	D. Asinayya	M	35	BED	Teacher	10,000
	D. Sudhamani	F	30	Inter	housewife	

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: Mala (iii) Religion: Hindu

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented): Rented

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: X Acres

(vi) Livestock resources: Cows X Oxen X Buffaloes X Sheep/Goats X

(vii) Do you have own toilet? Yes/No ✓

(viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify _____

(ix) Do you have white Ration Card? Yes/No ✓

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private ✓

(iii) Any PWD Persons in family: Yes/No ✓

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No ✓

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number: 8919277943

(iv) Do you have Computer/Laptop: Yes/No ✓

(v) Is internet available at home: Yes/No ✓

6. Any specific problems identified in the village/ Ward:

(i) Lot of diseases causes by mosquitoes

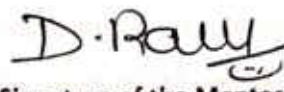
(ii) water problems

(iii)

Place: P. N. colony

Date: 13/05/2023


Signature of the Student


Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Bhavya Sri^o

Group : BSC. CBZ

Registration Number : 2222001049072

Area of the Survey conducted: P.N. Colony

House No.	16-8	Habitat /Ward	35	Panchayat /Municipality	Srikakulam
Post office	Gujarathipeta	Mandal	Srikakulam	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
①	ch. Narayana	M	40	2nd class	Daily laborer	} 20,000
②	ch. Ravanama	F	35	—	housewife	
③	ch. Lavanya	F	20	inter	—	
④	ch. sai	M	18	10 th class	—	

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: Mala (iii) Religion: Hindu

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented): own

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: X Acres

(vi) Livestock resources: Cows X Oxen X Buffaloes X Sheep/Goats X

(vii) Do you have own toilet? Yes/No Yes

(viii) Type Cooking fuel used: LPG/Kerosene/Wood/ others specify _____

(ix) Do you have white Ration Card? Yes/No Yes

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private

(iii) Any PWD Persons in family: Yes/No

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No

5. Other Details:

(i) Do You have TV: Yes/No

(ii) Do you have Mobile: Yes

(iii) Mobile Number: 7396324282

(iv) Do you have Computer/Laptop: Yes/No

(v) Is internet available at home: Yes/No

6. Any specific problems identified in the village/ Ward:

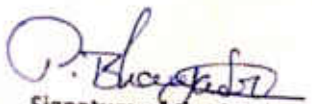
(i) Imperfect drinking system

(ii) viral fevers

(iii)

Place: P.N.colony

Date: 13/05/2023


Signature of the Student


Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Bhavya Sri

Group : BSC. CBZ

Registration Number : 2222001099072

Area of the Survey conducted: P.N. Colony

House No.	170	Habitat /Ward	36	Panchayat /Municipality	
Post office	Gufarathupeta	Mandal	Srikakulam	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
①	R. APPANA	M	45	5th class	Shop (books)	} 10,000
	R. UMA	F	38	4th class	housewife	
	R. RAJESH	M	26	Inter	Driver	
	R. SURENDRA	M	24	Inter	-	

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: mala (iii) Religion: Hindu

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented): OWN

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection ✓

(iv) Availability of Agricultural land: Yes/ No ✓

(v) Extent of Agricultural land: X Acres

(vi) Livestock resources: Cows X Oxen X Buffaloes X Sheep/Goats X.

(vii) Do you have own toilet? Yes/No ✓

(viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify _____

(ix) Do you have white Ration Card? Yes/No ✓

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private ✓

(iii) Any PWD Persons in family: Yes/No ✓

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No ✓

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number: 6300961312

(iv) Do you have Computer/Laptop: Yes/No ✓

(v) Is internet available at home: Yes/No ✓

6. Any specific problems identified in the village/ Ward:


(i) diseases causes by mosquitos

(ii) viral fevers

(iii)

Place: P. N. colony

Date: 14/05/2023


Signature of the Student


Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Bhavya Sri

Group : BSC. CBZ

Registration Number : 2222001049072

Area of the Survey conducted: P.N. colony

House No.	16-9	Habitat /Ward	35	Ranchayat /Municipality	Srikakulam
Post office	Gujjilipeta	Mandal	Srikakulam	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
①	M. Raju	M	95	-	driver	} 10,000
②	M. Laxmi	F	48	2nd class	housewife	
③	M. Santhosh Kumar	M	28	10th class	labour	

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: mala (iii) Religion: Hindu

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented): own

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: X Acres

(vi) Livestock resources: Cows X Oxen X Buffaloes X Sheep/Goats X

(vii) Do you have own toilet? Yes/No ✓

(viii) Type Cooking fuel used: LPG/Kerosene/Wood/ others specify ____.

(ix) Do you have white Ration Card? Yes/No ✓

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle ✓

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private ✓

(iii) Any PWD Persons in family: Yes/No ✓

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No ✓

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number: 8919277943 ✓

(iv) Do you have Computer/Laptop: Yes/No ✓

(v) Is internet available at home: Yes/No ✓

6. Any specific problems identified in the village/ Ward:

(i) Lot of disasars cause by mesquites


(ii) Improper drainage system

(iii)

Place: P. N. colony

Date: 14/05/2023


Signature of the Student


Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM
COMMUNITY SERVICE PROJECT
SOCIO - ECONOMIC SURVEY

Name of the Student : P. Bhoyadasi
Group : BSC - CB2
Registration Number : 2222001049072
Area of the Survey conducted: P. N. colony

House No.	18-10/A	Habitat / Ward	36	Panchayat / Municipality	
Post office	Angalappeta	Mandal	Srikakulam	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
①	V. Ganesh	M	32	Inter	Daily labourer	} 10,000
	V. Sathya Prasad	F	29	Inter	Housewife	
	V. Govindham	M	3	-	-	
	V. Jeevitha	M	Presb	-	-	

2. Social Status details:

(i) Community: SC/ST/ BC A-B-C/D/ OC (ii) Sub-Caste: Mala (iii) Religion: Hindu

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented): own

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection ✓

(iv) Availability of Agricultural land: Yes/ No ✓

(v) Extent of Agricultural land: X Acres

(vi) Livestock resources: Cows X Oxen X Buffaloes X Sheep/Goats X

(vi) Do you have own toilet? Yes/No

(vii) Type Cooking fuel used: Electricity/Wood/charcoal

(viii) Do you have own Patient Card? Yes/No

(ix) Do you have vehicle? Two-wheeler/Bus/Car/Any other vehicle

4. Health Details:

(i) Admissions in Family:

(ii) Treatment in which Hospital/Center:

(iii) Any PwDs persons in family: Yes/No

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Proxia SA Card: Yes/No

5. Other Details:

(i) Do You have TV: Yes/No

(ii) Do you have Mobile: Yes

(iii) Mobile Number: 6302121662

(iv) Do you have Computer/Laptop: Yes/No

(v) Is internet available at home: Yes/No

6. Any specific problems identified in the village/ Ward:

(i) Water problems

(ii) Improper drinking system

Place: P. N. Colony

Date: 14/05/2023

P. N. Colony
Signature of the Student

D. Paul
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Bhayya Sri
Group : BSC. CBZ
Registration Number : 2222001049072
Area of the Survey conducted: P. N. colony

House No.	16-3	Habitat /Ward	35	Panchayat /Municipality	
Post office	Gujjorappeta	Mandal	Srikakulam	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
①	M. Srinivas Rao	M		10th class	Worker	} 15000
②	M. Renuka	F		2nd class	Housewife	
③	M. Sasi	M		8th class	-	
④	M. Sathwikha	F		8th class	-	

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: Mala (iii) Religion: Hindu

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow pucca
(ii) House status (Own/ Rented): own
(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection
(iv) Availability of Agricultural land: Yes/ No
(v) Extent of Agricultural land: X Acres
(vi) Livestock resources: Cows Yes Oxen X Buffaloes X Sheep/Goats X

- (vii) Do you have own toilet? Yes/No Yes
- (viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify LPG
- (ix) Do you have white Ration Card? Yes/No Yes
- (x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle Two-wheeler

4. Health Details:

- (i) Ailments in family:
- (ii) Treatment in which Hospital: Govt/Private
- (iii) Any PWD Persons in family: Yes/No

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No Yes

5. Other Details:

- (i) Do You have TV: Yes/No - Yes
- (ii) Do you have Mobile: Yes
- (iii) Mobile Number: 7659926183
- (iv) Do you have Computer/Laptop: Yes/No
- (v) Is internet available at home: Yes/No

6. Any specific problems identified in the village/ Ward:

- (i) diseases causes by mosquitoes
- (ii) drinking system Impover
- (iii)

Place: P. N. Colony
 Date: 15/05/2023

P. Bhayadri
 Signature of the Student

D-Ray
 Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Bhavya Sri

Group : BSC. BZC

Registration Number : 2222001049072

Area of the Survey conducted: P.N. Colony

House No.	16-12-100	Habitat /Ward	36	Panchayat /Municipality	Srikakulam
Post office	Gujaripeta	Mandal	Srikakulam	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
①	Ch. Laxmi	F		7th class		} 10,000
②	Ch. Jyothna	F		inter		

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: Mala (iii) Religion: Hindu

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented): own

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: X Acres

(vi) Livestock resources: Cows X Oxen X Buffaloes X Sheep/Goats X

(vii) Do you have own toilet? Yes/No Yes

(viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify LPG

(ix) Do you have white Ration Card? Yes/No Yes

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle Two-wheeler

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private Private

(iii) Any PWD Persons in family: Yes/No No

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No Yes

5. Other Details:

(i) Do You have TV: Yes/No Yes

(ii) Do you have Mobile: Yes

(iii) Mobile Number: 9160288565

(iv) Do you have Computer/Laptop: Yes/No

(v) Is internet available at home: Yes/No

6. Any specific problems identified in the village/ Ward:

(i) water problems

(ii) lot of diseases causes by mosquitoes

(iii)

Place: P.N colony

Date: 15/05/2023

P. N. Ray
Signature of the Student

D. Ray
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Bhavya Sri
Group : BSC. CBZ
Registration Number : 2222001049072
Area of the Survey conducted: P.N. colony

House No.	164 KA	Habitat / Ward	3B	Panchayat / Municipality	
Post office	Gurajathipeta	Mandal	Srikakulam	District	Srikakulam

1. Household Details:

S. No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
①	M. Thirunadaram	M	70	3rd class	family (sew)	
	M. Saralini	F	50	—NO	housewife	10,000

2. Social Status details:

(i) Community: SC/ST/BC-A-B-C-D/OC (ii) Sub-Caste: mala (iii) Religion: Hindu

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented): own

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connections ✓

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: _____ Acres

(vi) Livestock resources: Cows ✓ Oxen X Buffaloes X Sheep/Goats X

(vii) Do you have own toilet? Yes/No Yes

(viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify LPG

(ix) Do you have white Ration Card? Yes/No Yes

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle Two-wheeler

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private Private

(iii) Any PWD Persons in family: Yes/No No

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No Yes

5. Other Details:

(i) Do You have TV: Yes/No Yes

(ii) Do you have Mobile: Yes

(iii) Mobile Number: 9494925018

(iv) Do you have Computer/Laptop: Yes/No No

(v) Is internet available at home: Yes/No No

6. Any specific problems identified in the village/ Ward:

(i) Improper drainage system

(ii)

(iii)

Place: P.N. colony

Date: 15/05/2023

P. Bhayadri
Signature of the Student

D. Ray
Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Bhavya Sri

Group : BSC. B7C

Registration Number : 2222001049072

Area of the Survey conducted: P.N. colony

House No.	175	Habitat /Ward	35	Panchayat /Municipality	
Post office	Srikakulam	Mandal	Srikakulam	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
①	S. Selliya	M	58	-	society	10,000
②	S. Poovale	F	55	-	have wife	

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: mal (iii) Religion: Hindu

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented): own

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: X Acres

(vi) Livestock resources: Cows X Oxen X Buffaloes X Sheep/Goats X

(vii) Do you have own toilet? Yes/No ✓

(viii) Type Cooking fuel used: LPG/Kerosene/Wood/ others specify _____ ✓

(ix) Do you have white Ration Card? Yes/No ✓

(x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle NO

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private ✓

(iii) Any PWD Persons in family: Yes/No ✓

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No ✓

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number:

(iv) Do you have Computer/Laptop: Yes/No ✓


(v) Is internet available at home: Yes/No ✓

6. Any specific problems identified in the village/ Ward:

- (i) diseases caused by mosquitoes
- (ii) Improper drainage system
- (iii)

Place: P N colony

Date: 16/05/2023


Signature of the Student


Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM

COMMUNITY SERVICE PROJECT

SOCIO - ECONOMIC SURVEY

Name of the Student : P. Bhayya Sri
Group : BSC. CBZ
Registration Number : 2222001049072
Area of the Survey conducted: P.N. Colony

House No.	156	Habitat /Ward	36	Panchayat /Municipality	
Post office	Brajapurpetta	Mandal	Srikakulam	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
①	B. Appana	M	38	5 th class	Chef	} 10,000
②	B. Kurnool	F	35	10 th class	Housewife	
	B. Sailaja	F	16	10 th class	-	
	B. Januprasad	M	13	7 th class	-	

2. Social Status details:

(i) Community: SC/ST/BC-A-B-C-D/OC (ii) Sub-Caste: Mala (iii) Religion: Hindu

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented): own

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: X Acres

(vi) Livestock resources: Cows X Oxen X Buffaloes X Sheep/Goats X

(vii) Do you have own toilet? Yes/No ✓

(viii) Type Cooking fuel used: LPG/Kerosene/Wood/ others specify _____

(ix) Do you have white Ration Card? Yes/No ✓

(x) Do you have vehicle? Two-wheeler/Auto/Car/Any other vehicle

4. Health Details:

(i) Ailments in family:

(ii) Treatment in which Hospital: Govt/Private ✓

(iii) Any PWD Persons in family: Yes/No ✓

S.No.	Name of the Person	Gender	Age	Nature of Disability

(iv) Do you have Govt. Arogya Sri Card: Yes/No ✓

5. Other Details:

(i) Do You have TV: Yes/No ✓

(ii) Do you have Mobile: Yes ✓

(iii) Mobile Number: 7396920219

(iv) Do you have Computer/Laptop: Yes/No ✓

(v) Is internet available at home: Yes/No ✓

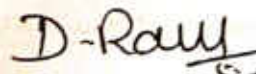
6. Any specific problems identified in the village/ Ward:

- (i) Improve drainage system
- (ii) water problems
- (iii)

Place: P.N. colony [m.v. peta]

Date: 16/03/2023


Signature of the Student


Signature of the Mentor



GOVERNMENT DEGREE COLLEGE (M), SRIKAKULAM
COMMUNITY SERVICE PROJECT
SOCIO - ECONOMIC SURVEY

Name of the Student : P. Bhaya Sri
Group : Bsc. CBZ
Registration Number : 2222001049072
Area of the Survey conducted: P. N. Colony

House No.	16-10-19/1A	Habitat /Ward	36 ward	Panchayat /Municipality	
Post office	at pos/office	Mandal	Srikakulam	District	Srikakulam

1. Household Details:

S.No.	Name of the Person	Gender M/F	Age	Education	Profession/ Employment	Income (Daily wage/Weekly/ Monthly)
①	P. Rama Rao	M		Degree		} 10,000
②	P. Krishnaveni	F		7th class		
③	P. Bhaya Sri	F	18	Degree		
④	P. Hanikrishna	M		10th class		

2. Social Status details:

(i) Community: SC/ST/ BC-A-B-C-D/ OC (ii) Sub-Caste: Mala (iii) Religion: Hindu

3. Economic Status details:

(i) Type of House: Hut/ Semi Pucca/ Pucca/ Apartment/ Bungalow

(ii) House status (Own/ Rented): Own

(iii) Drinking Water facility: Well/ Bore-well/ Govt. Tap connection

(iv) Availability of Agricultural land: Yes/ No

(v) Extent of Agricultural land: _____ Acres

(vi) Livestock resources: Cows NO Oxen NO Buffaloes NO Sheep/Goats NO.

- (vii) Do you have own toilet? Yes/No Yes
- (viii) Type Cooking fuel used: LPG/Kerosene/ Wood/ others specify LPG
- (ix) Do you have white Ration Card? Yes/No Yes
- (x) Do you have vehicle? Two-wheeler/ Auto/ Car/ Any other vehicle Two-wheeler

4. Health Details:

- (i) Ailments in family:
- (ii) Treatment in which Hospital: Govt/Private Private
- (iii) Any PWD Persons in family: Yes/No No

S.No.	Name of the Person	Gender	Age	Nature of Disability

- (iv) Do you have Govt. Arogya Sri Card: Yes/No No

5. Other Details:

- (i) Do You have TV: Yes/No No
- (ii) Do you have Mobile: Yes
- (iii) Mobile Number: 9849965159
- (iv) Do you have Computer/Laptop: Yes/No No
- (v) Is internet available at home: Yes/No No

6. Any specific problems identified in the village/ Ward:

- (i) Lot of diseases causes by mosquitoes
- (ii) Improper drinking water system
- (iii) ~~Improper drinking water system~~

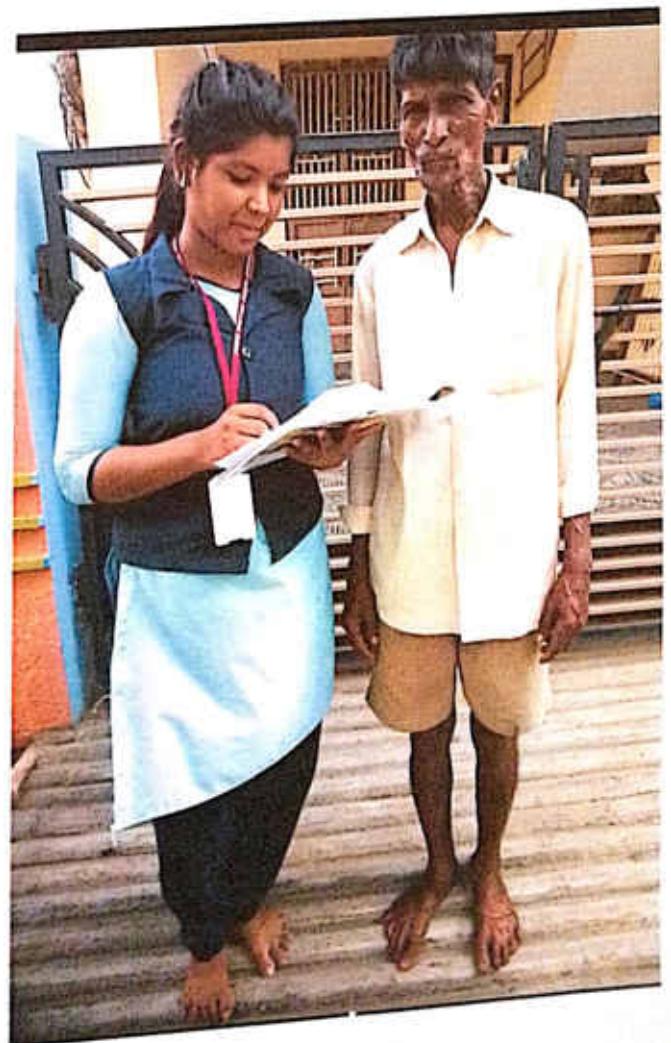
Place: P.N. colony [M.V. Peta]

Date: 16/05/2023

P. Bhayya Sr.
Signature of the Student

D. Ravi
Signature of the Mentor

Socio - Economic Survey



Socio - Economic Survey



AWARENESS REPORT



AWARENESS REPORT

Mosquito problem

Mosquito in my village (P.N.Colony, srikakulam mandalam, srikakulam) cause some different sickness in many people (especially children's and old persons) will attacked by those mosquito and give them the virus that cause of dengue, malaria it is one of the main problems in my village. some families are worrying about these issues, they already been worrying because their children has encountering the different types of symptoms that they will attacked by the mosquito that affects their health.

The government already took action against these problems. They already throw some of the gases that can let those mosquitoes to came out and totally disappear.

Hence, I (Putcha.Bhavya sri) observed this mosquito problem and told my street people about mosquitoes controlling methods and make them aware as much as I could.



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : P. Bhavya Sri
Group : BSC. CBZ
Name of the mentor : D. Ravindra
Name of the project : FOOD HABITS

House No	Name of the person	Village / Ward	Mandal	District
	P. Ramd Rao	P.N colony/36	Srikakulam	Srikakulam

1. How many times a day do you eat?

3 Times

2. Please answer the following according to your particular eating habits?

- a. I eat a good breakfast *yes*
- b. I experienced feeling of hunger during the day *yes*
- c. I eat meat. *yes*
- d. I eat vegetables. *yes*
- e. I eat fruits. *yes*
- f. I eat dairy products *yes*
- g. I eat sweets. *NO*

3. What meal would you consider to be your main meal of the day?

- a. Breakfast lunch
- c. dinner
- d. others

4. What does your main meal consist of and how it is prepared?

- Freshly prepared.
- B. restaurant meal.
- C. precooked microwave.
- D. other

5. Have you been avoiding some foods for health reasons? *Yes* / No

6. Do you have any particular food allergies?

NO

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day
- once a day
- several times a week
- less often
- never

Fresh vegetables & Fruits:

- Several times a day
- once a day
- several times a week
- less often
- never

8. What percentage of your regular diet consists of meat products?

90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?

90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

NO

11. Do you know your current body mass index?

12. Have your ever been on a diet, if so, what kind?

NO

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. little impact c. big impact. D. none

Health

a. No impact. B. little impact big impact. D. none

Weight.

a. No impact. little impact c. big impact. D. none

Mental condition.

No impact. B. little impact c. big impact. D. none

P. Bhayadri
Signature of the Student

D. Ray
Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : P. Bhavya Sri
Group : BSC. CBZ
Name of the mentor : D. Ravindra
Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
16-10-196A	P. Koushroven?	P.N colony/36	Srikakulam	Srikakulam

1. How many times a day do you eat?

3 Times

2. Please answer the following according to your particular eating habits?

- a. I eat a good breakfast ✓
- b. I experienced feeling of hunger during the day
- c. I eat meat
- d. I eat vegetables
- e. I eat fruits
- f. I eat dairy products
- g. I eat sweets.

3. What meal would you consider to be your main meal of the day?

- a. Breakfast ✓
- b. lunch
- c. dinner
- d. others

4. What does your main meal consist of and how it is prepared?

- ✓ Freshly prepared
- B. restaurant meal
- C. precooked microwave
- D. other

5. Have you been avoiding some foods for health reasons? Yes / No ✓

6. Do you have any particular food allergies?

7. What is your daily food intake frequency of the following food categories?

- Sweet foods:
- Several times a day
 - once a day
 - several times a week
 - less often
 - never

- Fresh vegetables & Fruits:
- Several times a day
 - once a day
 - several times a week
 - less often
 - never

8. What percentage of your regular diet consists of meat products?

90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?

90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

NO

11. Do you know your current body mass index?

12. Have your ever been on a diet, if so, what kind?

NO

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. B. little impact c. big impact. D. none

Health

a. No impact. B. little impact big impact. D. none

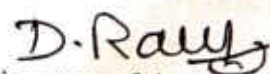
Weight.

a. No impact. B. little impact c. big impact. D. none

Mental condition.

A. No impact. B. little impact c. big impact. D. none


Signature of the Student


Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : P. Bhavya Sri
Group : BSC. BZC
Name of the mentor : D. Ravindora
Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
176	B. Sailaja	P.N. Colanly/36	Srikakulam	Srikakulam

- How many times a day do you eat?
3 Times
- Please answer the following according to your particular eating habits?
 - I eat a good breakfast *yes*
 - I experienced feeling of hunger during the day *yes*
 - I eat meat. *yes*
 - I eat vegetables. *yes*
 - I eat fruits. *yes*
 - I eat dairy products *yes*
 - I eat sweets. *yes*
- What meal would you consider to be your main meal of the day?
 - Breakfast
 - lunch
 - dinner
 - others
- What does your main meal consist of and how it is prepared?
 - Freshly prepared.
 - restaurant meal.
 - precooked microwave.
 - other
- Have you been avoiding some foods for health reasons? Yes / No
- Do you have any particular food allergies?

NO

- What is your daily food intake frequency of the following food categories?

Sweet foods: *1*

Several times a day once a day several times a week

less often never

Fresh vegetables & Fruits: *1*

once a day several times a week

8. What percentage of your regular diet consists of meat products?
90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?
90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

NO

11. Do you know your current body mass index?

12. Have your ever been on a diet, if so, what kind?

NO

13. Mention the food items from the healthiest to the unhealthiest from your point of views?


14. How much do you think a healthy diet affects?

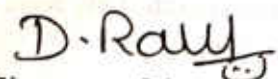
Restful sleep
a. No impact. B. little impact c. big impact. D. none

Health
a. No impact. B. little impact c. big impact. D. none

Weight.
a. No impact. B. little impact c. big impact. D. none

Mental condition.
A. No impact. B. little impact c. big impact. D. none


Signature of the Student


Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : P. Bhavya Sri
Group : BSC . BZC
Name of the mentor : D. Ravindra
Name of the project : FOOD habits

House No	Name of the person	Village / Ward	Mandal	District
174	B. APPANA	P. N. Colony/36	Srikakulam	Srikakulam

1. How many times a day do you eat?

3 Times

2. Please answer the following according to your particular eating habits?

- I eat a good breakfast *yes*
- I experienced feeling of hunger during the day *yes*
- I eat meat. *yes*
- I eat vegetables. *yes*
- I eat fruits. *yes*
- I eat dairy products *yes*
- I eat sweets. *yes*

3. What meal would you consider to be your main meal of the day?

- Breakfast lunch
- dinner
- others

4. What does your main meal consist of and how it is prepared?

- Freshly prepared.
- restaurant meal.
- precooked microwave.
- other

5. Have you been avoiding some foods for health reasons? Yes / No

6. Do you have any particular food allergies?

NO

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day once a day several times a week
less often never

Fresh vegetables & Fruits:

- Several times a day once a day several times a week
less often never

8. What percentage of your regular diet consists of meat products?
90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?
90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

NO

11. Do you know your current body mass index?

12. Have your ever been on a diet, if so, what kind?

NO

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. B. little impact c. big impact. D. none

Health

a. No impact. B. little impact c. big impact. D. none


Weight.

a. No impact. B. little impact c. big impact. D. none

Mental condition.

A. No impact. B. little impact c. big impact. D. none


Signature of the Student


Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : P. Bhavya Sri
Group : BSC. BZC
Name of the mentor : D. Ravindra
Name of the project : FOOD habits

House No	Name of the person	Village / Ward	Mandal	District
166	M. Renuka	Mutchavanipeta	Srikakulam	Srikakulam

1. How many times a day do you eat?

3 Times

2. Please answer the following according to your particular eating habits?

- a. I eat a good breakfast *YES*
- b. I experienced feeling of hunger during the day *NO*
- c. I eat meat. *YES*
- d. I eat vegetables. *YES*
- e. I eat fruits. *YES*
- f. I eat dairy products *YES*
- g. I eat sweets. *YES*

3. What meal would you consider to be your main meal of the day?

- a. Breakfast
- b. lunch
- c. dinner
- d. others

4. What does your main meal consist of and how it is prepared?

- Freshly prepared.
- B. restaurant meal.
- C. precooked microwave.
- D. other

5. Have you been avoiding some foods for health reasons? Yes / No

6. Do you have any particular food allergies?

NO

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day
- once a day
- less often
- never
- several times a week

Fresh vegetables & Fruits:

- Several times a day
- once a day
- less often
- never
- several times a week



8. What percentage of your regular diet consists of meat products?

- 90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?

- 90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

NO

11. Do you know your current body mass index?

12. Have you ever been on a diet, if so, what kind?

NO

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

14. How much do you think a healthy diet affects?

Restful sleep

- a. No impact b. little impact c. big impact d. none

Health

- a. No impact b. little impact c. big impact d. none

Weight

- a. No impact b. little impact c. big impact d. none

Mental condition

- A. No impact B. little impact c. big impact D. none

P. Bhargava Sriv

Signature of the Student

D. Rawly

Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : P. Bhavya Sri
Group : BSC. CBZ
Name of the mentor : D. Ravindra
Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
163	G. Gani Raju	P.N.colony/36	Srikakulam	Srikakulam

- How many times a day do you eat?
4 Times
- Please answer the following according to your particular eating habits?
 - I eat a good breakfast *yes*
 - I experienced feeling of hunger during the day *yes*
 - I eat meat. *yes*
 - I eat vegetables. *yes*
 - I eat fruits. *yes*
 - I eat dairy products *yes*
 - I eat sweets. *yes*
- What meal would you consider to be your main meal of the day?
 - Breakfast
 - lunch
 - dinner
 - others
- What does your main meal consist of and how it is prepared?
 - Freshly prepared.
 - restaurant meal.
 - precooked microwave.
 - other
- Have you been avoiding some foods for health reasons? Yes / No
- Do you have any particular food allergies?
NO
- What is your daily food intake frequency of the following food categories?

Sweet foods:

Several times a day once a day several times a week
 less often never

Fresh vegetables & Fruits:

Several times a day once a day several times a week
 less often never

8. What percentage of your regular diet consists of meat products?
90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?
90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?
NO

11. Do you know your current body mass index?

12. Have your ever been on a diet, if so, what kind?

NO

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

14. How much do you think a healthy diet affects?

Restful sleep
a. No impact. *B. little impact* c. big impact. D. none

Health
a. No impact. B. little impact *c. big impact.* D. none

Weight.
a. No impact. B. little impact *c. big impact.* D. none

Mental condition.
a. No impact. B. little impact *c. big impact.* D. none
A. No impact. *B. little impact* c. big impact. D. none

P. Blawatski
Signature of the Student

D. Ravi
Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : P. Bhayya Srin
Group : BSC. CBE
Name of the mentor : D. Ravindra
Name of the project : FOOD HABITS

House No	Name of the person	Village / Ward	Mandal	District
16-12-100	CH. Laami	P. N. colony/35	Sriakulam	Sriakulam

1. How many times a day do you eat?

3 Times

2. Please answer the following according to your particular eating habits?

- I eat a good breakfast - YES
- I experienced feeling of hunger during the day - NO
- I eat meat. - YES
- I eat vegetables. - YES
- I eat fruits. - YES
- I eat dairy products - NO
- I eat sweets. - YES

3. What meal would you consider to be your main meal of the day?

- a. Breakfast b. lunch c. dinner d. others

4. What does your main meal consist of and how it is prepared?

- a. Freshly prepared. B. restaurant meal. C. precooked microwave. D. other

5. Have you been avoiding some foods for health reasons? Yes / No

6. Do you have any particular food allergies?

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day once a day several times a week
less often never

Fresh vegetables & Fruits:

- Several times a day once a day several times a week
less often never

8. What percentage of your regular diet consists of meat products?

90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?

90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

No

11. Do you know your current body mass index?

Yes

12. Have your ever been on a diet, if so, what kind?

No

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact.

B. little impact

c. big impact. D. none

Health

a. No impact.

B. little impact

c. big impact. D. none

Weight.

a. No impact.

B. little impact

c. big impact. D. none

Mental condition.

A. No impact.

B. little impact

c. big impact. D. none

Signature of the Student

D. Ray
Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : P. Bhayyasi
Group : BSC. BZC
Name of the mentor : D. Ravindra
Name of the project :

House No	Name of the person	Village / Ward	Mandal	District
179	M. Raju	Mulchavanipalab5	Srikakulam	Srikakulam

1. How many times a day do you eat?

3 Times

2. Please answer the following according to your particular eating habits?

- a. I eat a good breakfast *yes*
b. I experienced feeling of hunger during the day *yes*
c. I eat meat. *yes*
d. I eat vegetables. *yes*
e. I eat fruits. *yes*
f. I eat dairy products *yes*
g. I eat sweets. *yes*

3. What meal would you consider to be your main meal of the day?

- a. Breakfast b. lunch c. dinner d. others

4. What does your main meal consist of and how it is prepared?

- A. Freshly prepared. B. restaurant meal. C. precooked microwave. D. other

5. Have you been avoiding some foods for health reasons? Yes / No

6. Do you have any particular food allergies?

NO

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day once a day several times a week
less often never

Fresh vegetables & Fruits:

- Several times a day once a day several times a week
less often never

8. What percentage of your regular diet consists of meat products?
90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?
90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

NO

11. Do you know your current body mass index?

12. Have your ever been on a diet, if so, what kind?

NO

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. B. little impact c. big impact. D. none

Health

a. No impact. B. little impact c. big impact. D. none

Weight.

a. No impact. B. little impact c. big impact. D. none

Mental condition.

A. No impact. B. little impact c. big impact. D. none

P. Bhaygar
Signature of the Student

D-Ray
Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : P. Bhayya Sri
Group : BSC. BZC
Name of the mentor : D. Ravindra
Name of the project : Food habites

House No	Name of the person	Village / Ward	Mandal	District
178	P. Saicharan	P.N.colony/36	Srikakulam	Srikakulam

1. How many times a day do you eat?

3 Times

2. Please answer the following according to your particular eating habits?

- a. I eat a good breakfast *YES*
- b. I experienced feeling of hunger during the day *YES*
- c. I eat meat. *YES*
- d. I eat vegetables. *YES*
- e. I eat fruits. *YES*
- f. I eat dairy products *YES*
- g. I eat sweets. *YES*

3. What meal would you consider to be your main meal of the day?

- a. Breakfast
- b. lunch
- c. dinner
- d. others

4. What does your main meal consist of and how it is prepared?

- a. Freshly prepared.
- B. restaurant meal.
- C. precooked microwave.
- D. other

5. Have you been avoiding some foods for health reasons? Yes / No

6. Do you have any particular food allergies?

NO

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day once a day several times a week
- less often never

Fresh vegetables & Fruits:

- Several times a day once a day several times a week
- less often never

8. What percentage of your regular diet consists of meat products?
90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?
90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

NO

11. Do you know your current body mass index?

12. Have your ever been on a diet, if so, what kind?

NO

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

14. How much do you think a healthy diet affects?

Restful sleep
a. No impact. B. little impact c. big impact. D. none

Health
a. No impact. B. little impact c. big impact. D. none

Weight.
a. No impact. B. little impact c. big impact. D. none

Mental condition.
A. No impact. B. little impact c. big impact. D. none

P. Bhayadwaj
Signature of the Student

D. Raw
Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : P. Bhavya Sri
Group : BSC. BZC
Name of the mentor : D. Ravindra
Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
186	B. Janupoud	P.N.colony/36	Srikakulam	Srikakulam

1. How many times a day do you eat?

3 Times

2. Please answer the following according to your particular eating habits?

- a. I eat a good breakfast YES
- b. I experienced feeling of hunger during the day YES
- c. I eat meat. YES
- d. I eat vegetables. YES
- e. I eat fruits. YES
- f. I eat dairy products YES
- g. I eat sweets. YES

3. What meal would you consider to be your main meal of the day?

- a. Breakfast lunch c. dinner d. others

4. What does your main meal consist of and how it is prepared?

- A. Freshly prepared. B. restaurant meal. C. precooked microwave. D. other

5. Have you been avoiding some foods for health reasons? Yes / No

6. Do you have any particular food allergies?

NO

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day once a day several times a week
- less often never

Fresh vegetables & Fruits:

- Several times a day once a day several times a week
- less often never

8. What percentage of your regular diet consists of meat products?

90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?

90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

NO

11. Do you know your current body mass index?

12. Have your ever been on a diet, if so, what kind?

NO

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. b. little impact c. big impact. D. none

Health

a. No impact. B. little impact c. big impact. D. none


Weight.

a. No impact. B. little impact c. big impact. D. none

Mental condition.

A. No impact. B. little impact c. big impact. D. none


Signature of the Student


Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : P. Bhavya Sri
Group : BSC. BZC
Name of the mentor : D. Ravindra
Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
177		P.N.colony/35	Sri kakulam	Sri kakulam

1. How many times a day do you eat?

3 Times

2. Please answer the following according to your particular eating habits?

- a. I eat a good breakfast *yes*
- b. I experienced feeling of hunger during the day *yes*
- c. I eat meat. *yes*
- d. I eat vegetables. *yes*
- e. I eat fruits. *yes*
- f. I eat dairy products *yes*
- g. I eat sweets. *yes*

3. What meal would you consider to be your main meal of the day?

- a. Breakfast
- b. lunch
- c. dinner
- d. others

4. What does your main meal consist of and how it is prepared?

- A. Freshly prepared. B. restaurant meal. C. precooked microwave. D. other

5. Have you been avoiding some foods for health reasons? Yes / No

6. Do you have any particular food allergies?

NO

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day once a day several times a week
- less often never

Fresh vegetables & Fruits:

- Several times a day once a day several times a week
- less often never

8. What percentage of your regular diet consists of meat products?

90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?

90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

NO

11. Do you know your current body mass index?

12. Have your ever been on a diet, if so, what kind?

NO

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. B. little impact c. big impact. D. none

Health

a. No impact. B. little impact c. big impact. D. none

Weight.

a. No impact. B. little impact c. big impact. D. none

Mental condition.

A. No impact. B. little impact c. big impact. D. none

P. Bhayatri
Signature of the Student

D. Raul
Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : P. Bhavya Sri^o
Group : BSC. B7C
Name of the mentor : D. Ravindra
Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
175	B. Kumari	P.N.colony/36	Srikakulam	Srikakulam

1. How many times a day do you eat?

3 Times

2. Please answer the following according to your particular eating habits?

- a. I eat a good breakfast YES
- b. I experienced feeling of hunger during the day YES
- c. I eat meat. YES
- d. I eat vegetables. YES
- e. I eat fruits. YES
- f. I eat dairy products YES
- g. I eat sweets. YES

3. What meal would you consider to be your main meal of the day?

- a. Breakfast b. lunch
- c. dinner
- d. others

4. What does your main meal consist of and how it is prepared?

- a. Freshly prepared.
- B. restaurant meal.
- C. precooked microwave.
- D. other

5. Have you been avoiding some foods for health reasons? Yes / No

6. Do you have any particular food allergies?

NO

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day
- once a day
- several times a week
- less often
- never

Fresh vegetables & Fruits:

- Several times a day
- once a day
- several times a week
- less often
- never

8. What percentage of your regular diet consists of meat products?
90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?
90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

NO

11. Do you know your current body mass index?

12. Have your ever been on a diet, if so, what kind?

NO

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. B. little impact c. big impact. D. none

Health

a. No impact. B. little impact c. big impact. D. none

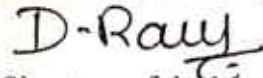
Weight.

a. No impact. B. little impact c. big impact. D. none

Mental condition.

A. No impact. B. little impact c. big impact. D. none


Signature of the Student


Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : P. Bhavya Sri
Group : BSC. B7C
Name of the mentor : D. Ravindra
Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
167	M. Tirinadasao	MVPeta 36	Srikakulam	Srikakulam

1. How many times a day do you eat?

3 Times

2. Please answer the following according to your particular eating habits?

- a. I eat a good breakfast *yes*
b. I experienced feeling of hunger during the day *yes*
c. I eat meat. *yes*
d. I eat vegetables. *yes*
e. I eat fruits. *yes*
f. I eat dairy products *yes*
g. I eat sweets. *yes*

3. What meal would you consider to be your main meal of the day?

- a. Breakfast b. lunch c. dinner d. others

4. What does your main meal consist of and how it is prepared?

- A. Freshly prepared. B. restaurant meal. C. precooked microwave. D. other

5. Have you been avoiding some foods for health reasons? Yes / No

6. Do you have any particular food allergies?

NO

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day once a day several times a week
less often never

Fresh vegetables & Fruits:

- Several times a day once a day several times a week
less often never

8. What percentage of your regular diet consists of meat products?
90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?
90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

NO

11. Do you know your current body mass index?

12. Have your ever been on a diet, if so, what kind?

NO

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. B. little impact c. big impact. D. none

Health

a. No impact. B. little impact c. big impact. D. none

Weight.

a. No impact. B. little impact c. big impact. D. none

Mental condition.

A. No impact. B. little impact c. big impact. D. none

P. Blaya Sri
Signature of the Student

D-Rajy
Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : P. Bhavya Sori
Group : BSC. BZC
Name of the mentor : D. Ravindra
Name of the project : FOOD HABITS

House No	Name of the person	Village / Ward	Mandal	District
165	M. Srinivas Rao	Mutchavaripele	Srikakulam	Srikakulam

1. How many times a day do you eat?

3 Times

2. Please answer the following according to your particular eating habits?

- I eat a good breakfast *YES*
 - I experienced feeling of hunger during the day *YES*
 - I eat meat. *YES*
 - I eat vegetables. *YES*
 - I eat fruits. *YES*
 - I eat dairy products *YES*
 - I eat sweets. *YES*
3. What meal would you consider to be your main meal of the day?
- Breakfast
 - lunch
 - dinner
 - others
4. What does your main meal consist of and how it is prepared?
- Freshly prepared.
 - restaurant meal.
 - precooked microwave.
 - other
5. Have you been avoiding some foods for health reasons? Yes / No
6. Do you have any particular food allergies?

NO

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day once a day several times a week
less often never

Fresh vegetables & Fruits:

- Several times a day once a day several times a week
less often never

8. What percentage of your regular diet consists of meat products?
90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?
90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

NO

11. Do you know your current body mass index?

12. Have your ever been on a diet, if so, what kind?

NO

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. B. little impact c. big impact. D. none

Health

a. No impact. B. little impact c. big impact. D. none

Weight.

a. No impact. B. little impact c. big impact. D. none

Mental condition.

A. No impact. B. little impact c. big impact. D. none


Signature of the Student


Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : P. Bhavya Sri
Group : BSC. CBZ
Name of the mentor : D. Ravindra
Name of the project : Food Habits

House No	Name of the person	Village / Ward	Mandal	District
164	M. Sanojini	mutchavonipeta	Srikakulam	Srikakulam

1. How many times a day do you eat?

2 Times

2. Please answer the following according to your particular eating habits?

a. I eat a good breakfast YES

b. I experienced feeling of hunger during the day NO

c. I eat meat. NO

d. I eat vegetables. YES

e. I eat fruits. YES

f. I eat dairy products NO

g. I eat sweets. NO

3. What meal would you consider to be your main meal of the day?

a. Breakfast lunch c. dinner d. others

4. What does your main meal consist of and how it is prepared?

Freshly prepared. B. restaurant meal. C. precooked microwave. D. other

5. Have you been avoiding some foods for health reasons? Yes / No

6. Do you have any particular food allergies?

NO

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

Several times a day once a day several times a week

less often never

Fresh vegetables & Fruits:

Several times a day once a day several times a week

less often never

8. What percentage of your regular diet consists of meat products?

90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?

90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

NO

11. Do you know your current body mass index?

12. Have your ever been on a diet, if so, what kind?

NO

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. B. little impact c. big impact. D. none

Health

a. No impact. B. little impact c. big impact. D. none


Weight.

a. No impact. B. little impact c. big impact. D. none

Mental condition.

A. No impact. B. little impact c. big impact. D. none


Signature of the Student


Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : P. Bhavya Sri
Group : BSC. BZC
Name of the mentor : D. Ravindra
Name of the project : FOOD Habits

House No	Name of the person	Village / Ward	Mandal	District
16-11/100	Gr. Sathyavathi	Mulchovanipeta/36	Srikakulam	Srikakulam

1. How many times a day do you eat?

3 Times

2. Please answer the following according to your particular eating habits?

- a. I eat a good breakfast *YES*
b. I experienced feeling of hunger during the day *YES*
c. I eat meat. *YES*
d. I eat vegetables. *YES*
e. I eat fruits. *YES*
f. I eat dairy products *YES*
g. I eat sweets. *YES*

3. What meal would you consider to be your main meal of the day?

- a. Breakfast b. lunch c. dinner d. others

4. What does your main meal consist of and how it is prepared?

- A. Freshly prepared. B. restaurant meal. C. precooked microwave. D. other

5. Have you been avoiding some foods for health reasons? Yes / No

6. Do you have any particular food allergies?

NO

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day once a day several times a week
less often never

Fresh vegetables & Fruits:

- Several times a day once a day several times a week
less often never

8. What percentage of your regular diet consists of meat products?
90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?
90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?
NO

11. Do you know your current body mass index?

12. Have your ever been on a diet, if so, what kind?
NO

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

14. How much do you think a healthy diet affects?

Restful sleep
a. No impact. B. little impact c. big impact. D. none

Health
a. No impact. B. little impact c. big impact. D. none

Weight.
a. No impact. B. little impact c. big impact. D. none

Mental condition.
A. No impact. B. little impact c. big impact. D. none

P. Bhagwati
Signature of the Student

D. Ray
Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : P. Bhavya sri
Group : BSC. BZC
Name of the mentor : D. Ravindra
Name of the project : FOOD HABITS

House No	Name of the person	Village / Ward	Mandal	District
16-12-100	CH. Jayasna	16/12/35	Srikakulam	Srikakulam

1. How many times a day do you eat?

3 Times

2. Please answer the following according to your particular eating habits?

- I eat a good breakfast YES
- I experienced feeling of hunger during the day NO
- I eat meat. YES
- I eat vegetables. YES
- I eat fruits. YES
- I eat dairy products YES
- I eat sweets. YES

3. What meal would you consider to be your main meal of the day?

- Breakfast
- lunch
- dinner
- others

4. What does your main meal consist of and how it is prepared?

- Freshly prepared.
- restaurant meal.
- precooked microwave.
- other

5. Have you been avoiding some foods for health reasons? Yes / No

6. Do you have any particular food allergies?

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day once a day several times a week
less often never

Fresh vegetables & Fruits:

- Several times a day once a day several times a week
less often never

8. What percentage of your regular diet consists of meat products?

90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?

90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

NO

11. Do you know your current body mass index?

yes

12. Have your ever been on a diet, if so, what kind?

NO

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. b. little impact c. big impact. D. none

Health

a. No impact. B. little impact c. big impact. D. none

Weight.

a. No impact. B. little impact c. big impact. D. none

Mental condition.

A. No impact. B. little impact c. big impact. D. none

P. Bhagat
Signature of the Student

D-Ray
Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : P. Bhavya Sri
Group : BSC. CBZ
Name of the mentor : D. Ravindra
Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
163	B. harika	P.n.colony/36	Srikakulam	Srikakulam

1. How many times a day do you eat?

3 Times

2. Please answer the following according to your particular eating habits?

- a. I eat a good breakfast *yes*
- b. I experienced feeling of hunger during the day *yes*
- c. I eat meat. *yes*
- d. I eat vegetables. *yes*
- e. I eat fruits. *yes*
- f. I eat dairy products *yes*
- g. I eat sweets. *yes*

3. What meal would you consider to be your main meal of the day?

- a. Breakfast lunch
- c. dinner
- d. others

4. What does your main meal consist of and how it is prepared?

- Freshly prepared.
- B. restaurant meal.
- C. precooked microwave.
- D. other

5. Have you been avoiding some foods for health reasons? Yes / No

6. Do you have any particular food allergies?

NO

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day
- once a day
- several times a week
- less often
- never

Fresh vegetables & Fruits:

- Several times a day
- once a day
- several times a week
- less often
- never

8. What percentage of your regular diet consists of meat products?

90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?

90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

NO

11. Do you know your current body mass index?

12. Have your ever been on a diet, if so, what kind?

NO

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. B. little impact c. big impact. D. none

Health

a. No impact. B. little impact c. big impact. D. none

Weight.

a. No impact. B. little impact c. big impact. D. none

Mental condition.

A. No impact. B. little impact c. big impact. D. none

P. Bhattacharya
Signature of the Student

D. Ray
Signature of the Mentor



GOVT DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student: P. Bhavya Sri
Group: BSC - B7C
Name of the mentor: D. Ravindra
Name of the project: Food habits

House No	Name of the person	Village / Ward	Mandal	District
178	K. Pawan	P.N colony/36	Srikakulam	Srikakulam

1. How many times a day do you eat?

3 Times

2. Please answer the following according to your particular eating habits?

- a. I eat a good breakfast
 - b. I experienced feeling of hunger during the day
 - c. I eat meat.
 - d. I eat vegetables.
 - e. I eat fruits.
 - f. I eat dairy products
 - g. I eat sweets.
3. What meal would you consider to be your main meal of the day?
- a. Breakfast b. lunch c. dinner d. others
4. What does your main meal consist of and how it is prepared?
- a. Freshly prepared. B. restaurant meal. C. precooked microwave. D. other
5. Have you been avoiding some foods for health reasons? Yes / No
6. Do you have any particular food allergies?

NO

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day once a day several times a week
- less often never

Fresh vegetables & Fruits:

- Several times a day once a day several times a week
- less often never

8. What percentage of your regular diet consists of meat products?

90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?

90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

NO

11. Do you know your current body mass index?

12. Have your ever been on a diet, if so, what kind?

NO

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. B. little impact c. big impact. D. none

Health

a. No impact. B. little impact c. big impact. D. none


Weight.

a. No impact. B. little impact c. big impact. D. none

Mental condition.

A. No impact. B. little impact c. big impact. D. none


Signature of the Student


Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : P. Bhavya Sri
Group : BSC. BZC
Name of the mentor : D. Ravindra
Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
183	k. vethela	P.n. celany/36	srikakulam	srikakulam

1. How many times a day do you eat?

3 Times

2. Please answer the following according to your particular eating habits?

- a. I eat a good breakfast ✓
- b. I experienced feeling of hunger during the day ✓
- c. I eat meat. ✓
- d. I eat vegetables. ✓
- e. I eat fruits. ✓
- f. I eat dairy products ✓
- g. I eat sweets. ✓

3. What meal would you consider to be your main meal of the day?

- a. Breakfast ✓
- b. lunch
- c. dinner
- d. others

4. What does your main meal consist of and how it is prepared?

- a. ✓ Freshly prepared.
- B. restaurant meal.
- C. precooked microwave.
- D. other

5. Have you been avoiding some foods for health reasons? Yes / No ✓

6. Do you have any particular food allergies?

NO

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day once a day several times a week
- less often never

Fresh vegetables & Fruits:

- Several times a day once a day several times a week
- less often never

8. What percentage of your regular diet consists of meat products?

90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?

90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

NO

11. Do you know your current body mass index?

12. Have your ever been on a diet, if so, what kind?

NO

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. B. little impact c. big impact. D. none

Health

a. No impact. B. little impact c. big impact. D. none

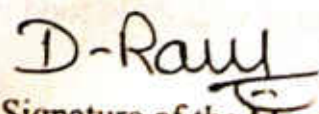
Weight.

a. No impact. B. little impact c. big impact. D. none

Mental condition.

A. No impact. B. little impact c. big impact. D. none


Signature of the Student


Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : P. Bhavya Sri P
Group : BSC. B2C
Name of the mentor : D. Ravindra
Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
180	M. Laxmi	P. N. Chandray/36	Srikakulam	Srikakulam

- How many times a day do you eat?
3 Times
- Please answer the following according to your particular eating habits?
 - I eat a good breakfast ✓
 - I experienced feeling of hunger during the day. ✓
 - I eat meat. ✓
 - I eat vegetables. ✓
 - I eat fruits. ✓
 - I eat dairy products. ✓
 - I eat sweets. ✓
- What meal would you consider to be your main meal of the day?
 - Breakfast
 - lunch ✓
 - dinner
 - others
- What does your main meal consist of and how it is prepared?
✓ Freshly prepared. B. restaurant meal. C. precooked microwave. D. other
- Have you been avoiding some foods for health reasons? Yes / No. ✓
- Do you have any particular food allergies?

NO

- What is your daily food intake frequency of the following food categories?
Sweet foods:

Several times a day once a day several times a week
less often never

Fresh vegetables & Fruits:

Several times a day once a day several times a week
less often never

8. What percentage of your regular diet consists of meat products?
90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?
90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

NO
11. Do you know your current body mass index?

yes
12. Have your ever been on a diet, if so, what kind?

NO
13. Mention the food items from the healthiest to the unhealthiest from your point of views?

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. B. little impact c. big impact. D. none

Health

a. No impact. B. little impact c. big impact. D. none

Weight.

a. No impact. B. little impact c. big impact. D. none

Mental condition.

A. No impact. B. little impact c. big impact. D. none

P. Bhargava
Signature of the Student

D. Ray
Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : P. Bhavya Sri
Group : BSC. BZC
Name of the mentor : D. Ravindra
Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
18/	M. Raju	P.N. Colony/36	Srikakulam	Srikakulam

1. How many times a day do you eat?

4 Times

2. Please answer the following according to your particular eating habits?

- a. I eat a good breakfast ✓
- b. I experienced feeling of hunger during the day ✓
- c. I eat meat. ✓
- d. I eat vegetables ✓
- e. I eat fruits. ✓
- f. I eat dairy products ✓
- g. I eat sweets. ✓

3. What meal would you consider to be your main meal of the day?

- a. Breakfast ✓
- b. lunch
- c. dinner
- d. others

4. What does your main meal consist of and how it is prepared?

- a. Freshly prepared. ✓
- B. restaurant meal.
- C. precooked microwave.
- D. other

5. Have you been avoiding some foods for health reasons? Yes / No ✓

6. Do you have any particular food allergies?

NO

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day once a day several times a week
- less often never

Fresh vegetables & Fruits:

- Several times a day once a day several times a week
- less often never

8. What percentage of your regular diet consists of meat products?

90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?

90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

NO

11. Do you know your current body mass index?

yes

12. Have your ever been on a diet, if so, what kind?

NO

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. B. little impact big impact. D. none

Health

a. No impact. B. little impact big impact. D. none

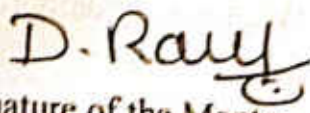
Weight.

a. No impact. B. little impact big impact. D. none

Mental condition.

A. No impact. B. little impact big impact. D. none

P. Bhaya 
Signature of the Student

D. Ray 
Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : P. Bhavya Sri
Group : BSC. BZC
Name of the mentor : D. Ravindra
Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
179	M. Sathash Kumar	P.N.Colony/36	Srikakulam	Srikakulam

1. How many times a day do you eat?

3 Times

2. Please answer the following according to your particular eating habits?

- a. I eat a good breakfast ✓
- b. I experienced feeling of hunger during the day ✓
- c. I eat meat. ✓
- d. I eat vegetables. ✓
- e. I eat fruits. ✓
- f. I eat dairy products ✓
- g. I eat sweets. ✓

3. What meal would you consider to be your main meal of the day?

- a. Breakfast
- b. lunch
- c. dinner
- d. others

4. What does your main meal consist of and how it is prepared?

- a. Freshly prepared.
- B. restaurant meal.
- C. precooked microwave.
- D. other

5. Have you been avoiding some foods for health reasons? Yes / No ✓

6. Do you have any particular food allergies?

NO

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day
- once a day
- several times a week
- less often
- never

Fresh vegetables & Fruits:

- Several times a day
- once a day
- several times a week
- less often
- never

8. What percentage of your regular diet consists of meat products?
90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?
90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

NO

11. Do you know your current body mass index?

yes

12. Have your ever been on a diet, if so, what kind?

NO

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. B. little impact c. big impact. D. none

Health

a. No impact. B. little impact c. big impact. D. none

Weight.

a. No impact. B. little impact c. big impact. D. none

Mental condition.

A. No impact. B. little impact c. big impact. D. none

P. Bhayya Sir
Signature of the Student

D-Rally
Signature of the Mentor



GOVT. DEGREE COLLEGE (MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : P. Bhavya Sri
Group : BSC. BZC
Name of the mentor : D. Pavindora
Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
180	M. Mahesh	Mulchavanipeta/36	Sriakulam	Sriakulam

1. How many times a day do you eat?

3 Times

2. Please answer the following according to your particular eating habits?

- a. I eat a good breakfast. ✓
- b. I experienced feeling of hunger during the day ✓
- c. I eat meat. ✓
- d. I eat vegetables. ✓
- e. I eat fruits. ✓
- f. I eat dairy products ✓
- g. I eat sweets. ✓

3. What meal would you consider to be your main meal of the day?

- a. Breakfast b. lunch c. dinner d. others

4. What does your main meal consist of and how it is prepared?

- a. Freshly prepared. b. restaurant meal. c. precooked microwave. d. other

5. Have you been avoiding some foods for health reasons? Yes / No ✓

6. Do you have any particular food allergies?

NO

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day once a day several times a week
less often never

Fresh vegetables & Fruits:

- Several times a day once a day several times a week
less often never

8. What percentage of your regular diet consists of meat products?
90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?
90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

NO

11. Do you know your current body mass index?

yes

12. Have your ever been on a diet, if so, what kind?

NO

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. B. little impact c. big impact. D. none

Health

a. No impact. B. little impact c. big impact. D. none

Weight.

a. No impact. B. little impact c. big impact. D. none

Mental condition.

A. No impact. B. little impact c. big impact. D. none

P. Bhawja Sir
Signature of the Student

D. Ray
Signature of the Mentor



GOVT. DEGREE COLLEGE(MEN), SRIKAKULAM
COMMUNITY SERVICE PROJECT
PROJECT: FOOD HABITS



Name of the student : P. Bhalya ~~son~~
Group : BSC. CBZ
Name of the mentor : D. Ravindra
Name of the project : Food habits

House No	Name of the person	Village / Ward	Mandal	District
16/19/1/A	P. Sartharan	MVPeta/37	Srikakulam	Srikakulam

1. How many times a day do you eat?

3 Times

2. Please answer the following according to your particular eating habits?

- a. I eat a good breakfast *yes*
b. I experienced feeling of hunger during the day *yes*
c. I eat meat. *yes*
d. I eat vegetables. *yes*
e. I eat fruits. *yes*
f. I eat dairy products *yes*
g. I eat sweets. *yes*

3. What meal would you consider to be your main meal of the day?

- a. Breakfast b. lunch c. dinner d. others

4. What does your main meal consist of and how it is prepared?

- A. Freshly prepared. B. restaurant meal. C. precooked microwave. D. other

5. Have you been avoiding some foods for health reasons? Yes / No

6. Do you have any particular food allergies?

NO

7. What is your daily food intake frequency of the following food categories?

Sweet foods:

- Several times a day once a day several times a week
less often never

Fresh vegetables & Fruits:

- Several times a day once a day several times a week
less often never

8. What percentage of your regular diet consists of meat products?

90% 75% 50% 25% less than 25%

9. How much of your diet consists of vegetables and non-animal products?

90% 75% 50% 25% less than 25%

10. Do you or have you ever has cholesterol problems?

NO

11. Do you know your current body mass index?

Yes

12. Have your ever been on a diet, if so, what kind?

NO

13. Mention the food items from the healthiest to the unhealthiest from your point of views?

14. How much do you think a healthy diet affects?

Restful sleep

a. No impact. B. little impact c. big impact. D. none

Health


a. No impact. B. little impact c. big impact. D. none


Weight.

a. No impact. B. little impact c. big impact. D. none

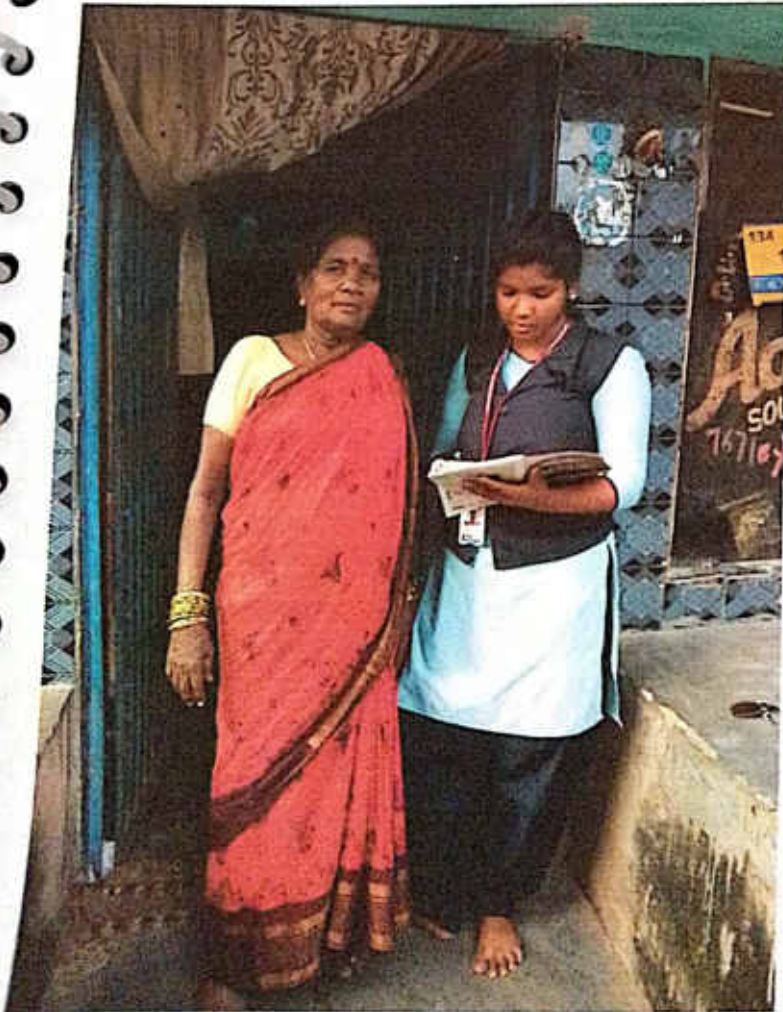
Mental condition.

A. No impact. B. little impact c. big impact. D. none

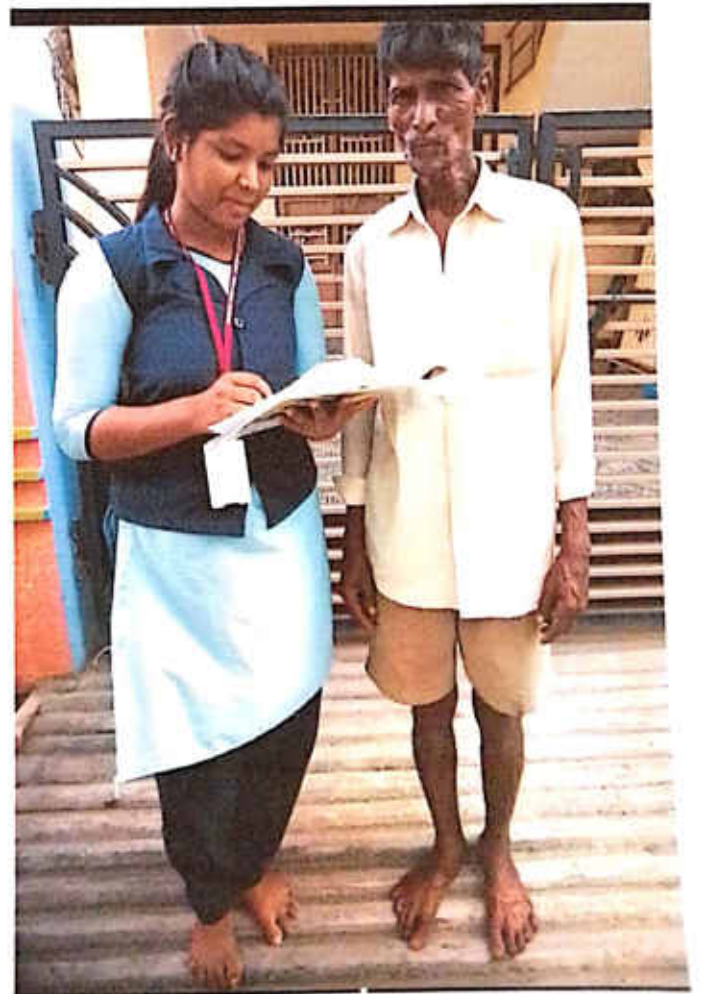

Signature of the Student


Signature of the Mentor

Food habits



Food habits



OBSERVATIONS:-

FOOD HABITS SURVEY

S.NO	Group of individuals	Main finding	Remarks/ suggestions
1.	Women/ pregnant women	Middlebaged women /pregnant women preferred to have as per their health conditions. Some from economically poor status are taking porridge as main breakfast also fermented curd rice was included, Preferred vegetable soups in the middle and for lunch they are likely to take rice fresh vegetables, non-vegetarian food, curd. They are seen having early evening food to avoid digestion problems.	Suggested to increase time intervals of food intake with Tess quantity each time. Following medication as per the Schedule and also see that they have good rest during the day and not to push themselves much and to involve in meditation..
2.	Young women	They preferred take boiled eggs, Milk, porridge, vegetable soups for breakfast, dal, fresh vegetables, non-vegetarian food items in lunch, fresh fruit juices in their daily intake.	Suggested to take more Jaggery food items, also they are advised to take iron tonics in case of fatigue and anaemia also to take multi-vitamin syrups.
3.	Young boys	It is observed that they prefer to take spicy junk and fast foods atleast 4 times a diet,	Suggested to take porridge and liquid dite to avoid

		week and interested to take lunch as main meal with vegetables, dal, pickle and curd followed with fresh fruits. They prefer doing exercise, also interested in sports and physical fitness. games for	processed foods to maintain balanced weight.
4.	Men	Middle aged men preferred south Indian tiffins like Idli, Dosa, boiled eggs and less rice quantity for lunch, more roti's like diet fruits, fresh. vegetables, butter milk and limited quantities of Non-vegetarian items.	Suggested for their age group exercise, walking and to take more balanced diet.
5.	Elderly people	Preferred liquid diet and ragi porridge, boiled eggs for breakfast, roti's, fresh fruits boiled vegetables and ragi porridge	Suggested to take less quantities of meal and to increase number of time intervals as with age they might develop stomach related problems.
6.	Individuals with health issues	They told that they are taking food as per the advice of the Doctors.	Suggested to take a proper food items and to maintain a proper balance

CONCLUSION

I'm P.Bhavya sri studying in B.SC first year Cbz group.I had completed the community service project on "GOOD HABITS" in our Village and submitted the report to my mentor.My project is about the food habits of our Village people,I conducted questionnaire to different age groups people about their regular diet.Most of the old aged people considered lunch as their main meal of the day.They taking food only two times per day due to digestive problems. We find out the major problem facing by our villagers and dropped the Sarpanch attention towards the problem by conducting awareness program in our Village.

It was interesting to carry out this project to know about different opinions, food habits and problems of our villagers. Finally I believe that my project is complete under vision of my mentor. I thank him for his guidance and support.

By

PUTCHA.BHAVYA SRI

Verified by
D. Ray